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someday that it will not be just limited to Medicaid. Medicare and so on may have some other reimbursement procedures that we were able to do so the amendment is to the Nebraska Telehealth Act. If you're looking on your machines or you're looking at a white copy, we decided it was easier just to white copy you the whole thing and put the changes in so you could look at the whole bill at once. So the whole amendment that you're looking at is not a complete rewrite. I'm just highlighting to you what the changes were from what the bill previously was. That's on page 1, line 4. We also made an amendment on the second page in Section 4 and added the words "limit a patient's right to choose in-person contact with a health care practitioner for the delivery of health care services for which telehealth is available". The reason we added that was to guarantee and retain the patient's right for in-patient treatment so they can't say, well, look, this works so good, you can't go see a doctor in person, you must go do it by telehealth. We didn't want...that's going overboard. We didn't want to do that. So to protect the right of the patient to be able to come in and still have a face-to-face contact, that's the purpose for this amendment. We also have a disclosure provision where we disclose to people that they are going to be treated and have their health care service delivered by telehealth, and there's some written information that's provided to them and that they still have their confidentiality. They have access to those records. They have permission to disseminate some of the images and so on that are given out, and that that disclosure only needs to be done the first time they go in, that you don't have to do that for every treatment. It's a matter of making the procedure easier, and you still have that initial disclosure. It's not a consent. It is a disclosure. And finally, the last thing the amendment does is on the very last sentence of the white copy that you see here, and this is for Health and Human Services, to establish methods and procedures necessary to safeguard against unnecessary utilization of telehealth conferences. Health and Human Services has been good to work with. I want to acknowledge that. There's been some...there's been some touchy times with this bill on and off with them but, quite frankly, they've been good to work with. At this point in time, we've reached some agreements with them and the Health Committee has done a good job of also realizing and pushing this bill very hard. But Health and Human Services expressed some