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with a larger system, then it is prorated and so on, as far as I understand it. I'm not a professional on this, you understand. I'm not a...I'm a layman, as you might say. But...

SENATOR CHAMBERS: Well, do you want me to ask Senator Byars then?

SENATOR CUDABACK: You are charged...

SENATOR CHAMBERS: Because he might have worked in that area.

SENATOR CUDABACK: Yes.

SENATOR CHAMBERS: Okay.

SENATOR CUDABACK: Senator Byars is probably more...Senator Byars.

SENATOR CHAMBERS: Thank you. And before my time runs out, Senator Byars, what are the implications for Medicare and Medicaid, if any?

SENATOR BYARS: There are definitely implications, Senator Chambers. Thank you for asking the question. It's a good question. If you are not a critical access hospital or a large enough hospital to receive different reimbursements, critical access is reimbursed on actual cost, where you find the hospitals now that are applying for this status in Broken Bow and Lexington are part of what's now called the demonstration project that was just done in the new Medicare bill this last year by Congress, which increases their reimbursements. It is much to the advantage of their communities to be reimbursed at actual cost of doing business so that they can be whole and provide those services to their community.

SENATOR CHAMBERS: Thank you. Is Senator Smith in the Chamber? I'd like to ask Senator Smith a question.

SENATOR JANSSEN: Senator Smith, will you respond, please?

SENATOR CHAMBERS: Senator Smith, I don't believe McCook or