

ONE HUNDRED EIGHTH LEGISLATURE - SECOND SESSION - 2024
COMMITTEE STATEMENT
LB1087

Hearing Date: Friday February 02, 2024
Committee On: Health and Human Services
Introducer: Jacobson
One Liner: Adopt the Hospital Quality Assurance and Access Assessment Act

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:
Aye: 7 Senators Ballard, Cavanaugh, M., Day, Hansen, Hardin, Riepe, Walz
Nay:
Absent:
Present Not Voting:

Testimony:

Proponents:

Senator Mike Jacobson
Jeremy Nordquist
Mel McNea
Manuela Banner
Ryan Larsen

Patrick Henry Connell

Sara Howard
Marcia Muetting

Opponents:

Neutral:

Jeremy Brunssen

Representing:

Opening Presenter
Nebraska Hospital Association
Regional West Health System
Memorial Community Hospital Health System NTLA
Community Medical Center, Nebraska Hospital
Association
Nebraska Association of Behavioral Health
Organizations
First Five Nebraska
Nebraska Pharmacists' Association

Representing:

Representing:

Department of Health and Human Services

* ADA Accommodation Written Testimony

Summary of purpose and/or changes:

Explanation of amendments:

The standing committee amendment, AM2404, strikes the original sections of the bill and inserts new language.

Sec. 1: Language remains the same as the original bill.



Sec. 2: Language remains the same as the original bill.

Sec. 3: Language remains the same as the original bill.

Sec. 4: DHHS shall collect assessments from (directly is removed) hospitals and remit the assessments to the State Treasurer for credit to the Hospital Quality Assurance and Access Fund. Contracting parties collecting assessments language is removed.

Sec. 5: Clarifies that administrative fee is the fee retained by DHHS. Clarifies that the assessment total is the statewide aggregate assessment.

Sec. 6: The Hospital Quality Assurance and Access Assessment Fund shall only be used to pay DHHS, not contracting parties or programs established by a statewide association representing hospitals and health care systems in the state. The administrative fee is referenced in Section 5 of this amendment.

DHHS shall prohibit a Medicaid managed care organization from:

- * setting, establishing, or negotiating reimbursement rates with a hospital in a manner that takes into account, directly or indirectly, a directed payment that a hospital receives under this Act;
- * unnecessarily delaying a directed payment to a hospital;
- * recouping or offsetting a directed payment for any reason.

A hospital shall not directly pass on the cost of an assessment to patients or non-Medicaid payors, including as a fee or rate increase. A hospital that violates this subsection shall not receive a directed payment for the remainder of the year. This subsection shall not be construed to prohibit a hospital from negotiating with a non-Medicaid payor for a rate increase.

Sec. 7: Language remains the same as the original bill.

Sec. 8: Language remains the same as the original bill.

Sec. 9: DHHS shall discontinue the collection of assessments when federal matching funds are unavailable. In such case, DHHS is required to terminate the collection of the assessments beginning on the date such federal matching funds become unavailable.

Sec. 10: Emergency Clause

Vote to adopt AM 2404 passed,

Vote results: 6-0-1

Vote: Aye: Hansen, Hardin, Ballard, Day, Riepe, Walz

PNV: Cavanaugh, M



