LEGISLATURE OF NEBRASKA ONE HUNDRED FIFTH LEGISLATURE FIRST SESSION

LEGISLATIVE BILL 417

Introduced by Riepe, 12.

Read first time January 13, 2017

Committee: Health and Human Services

1 A BILL FOR AN ACT relating to public health and welfare; to amend 2 sections 13-308, 28-372, 28-712, 28-712.01, 38-101, 38-123, 43-296, 3 43-4331, 68-949, 71-6038, 71-6039.06, 71-6603, 81-2210, 81-2273, 4 81-2274, 81-2275, 81-2279, 81-2281, 81-2283, 83-1212.01, and 83-1213, Reissue Revised Statutes of Nebraska, and sections 68-908, 5 6 68-909, 71-806, 71-810, 71-1904, 71-3405, and 71-6039, Revised 7 Statutes Cumulative Supplement, 2016; to eliminate references to nursing assistants; to provide for nurse aides in certain health 8 9 care facilities as prescribed; to change and eliminate provisions relating to alternative responses under the Child Protection and 10 Family Safety Act; to change provisions relating to providing notice 11 12 to credential holders under the Uniform Credentialing Act; to change 13 and eliminate reporting requirements under the Medical Assistance 14 Act; to rename the Nebraska Senior Companion Volunteer Program Act; 15 to change the purpose of the act; to eliminate the Nebraska Senior Companion Volunteer Program; to change and eliminate benefits for 16 and restrictions on senior volunteers; to change and eliminate 17 18 provisions relating to application for and use of grant funds and 19 funding by municipal corporations; to provide for a quality assurance plan relating to services for persons with developmental 20 21 disabilities; to eliminate quality review teams; to eliminate 22 certain reporting requirements and provisions relating to regional center occupancy rates and data systems; to provide for standards 23

-1-

for peer services for behavioral health services; to harmonize provisions; to provide operative dates; to repeal the original sections; to outright repeal sections 81-2233, 81-2276, 81-2277, 81-2278, and 81-2280, Reissue Revised Statutes of Nebraska; and to declare an emergency.

6 Be it enacted by the people of the State of Nebraska,

Section 1. Section 13-308, Reissue Revised Statutes of Nebraska, is
 amended to read:

3 13-308 Any municipal corporation may contract with any person and
4 provide funds for home-delivered meals for the elderly and retired senior
5 volunteer programs.

6 Sec. 2. Section 28-372, Reissue Revised Statutes of Nebraska, is7 amended to read:

28-372 (1) When any physician, psychologist, physician assistant, 8 9 nurse, <u>nurse aide</u> nursing assistant, other medical, developmental disability, or mental health professional, law enforcement personnel, 10 caregiver or employee of a caregiver, operator or employee of a sheltered 11 workshop, owner, operator, or employee of any facility licensed by the 12 13 department, or human services professional or paraprofessional not including a member of the clergy has reasonable cause to believe that a 14 vulnerable adult has been subjected to abuse, neglect, or exploitation or 15 16 observes such adult being subjected to conditions or circumstances which reasonably would result in abuse, neglect, or exploitation, he or she 17 shall report the incident or cause a report to be made to the appropriate 18 law enforcement agency or to the department. Any other person may report 19 abuse, neglect, or exploitation if such person has reasonable cause to 20 believe that a vulnerable adult has been subjected to abuse, neglect, or 21 exploitation or observes such adult being subjected to conditions or 22 23 circumstances which reasonably would result in abuse, neglect, or 24 exploitation.

(2) Such report may be made by telephone, with the caller giving his or her name and address, and, if requested by the department, shall be followed by a written report within forty-eight hours. To the extent available the report shall contain: (a) The name, address, and age of the vulnerable adult; (b) the address of the caregiver or caregivers of the vulnerable adult; (c) the nature and extent of the alleged abuse, neglect, or exploitation or the conditions and circumstances which would

-3-

reasonably be expected to result in such abuse, neglect, or exploitation;
(d) any evidence of previous abuse, neglect, or exploitation, including
the nature and extent of the abuse, neglect, or exploitation; and (e) any
other information which in the opinion of the person making the report
may be helpful in establishing the cause of the alleged abuse, neglect,
or exploitation and the identity of the perpetrator or perpetrators.

7 (3) Any law enforcement agency receiving a report of abuse, neglect,
8 or exploitation shall notify the department no later than the next
9 working day by telephone or mail.

10 (4) A report of abuse, neglect, or exploitation made to the 11 department which was not previously made to or by a law enforcement 12 agency shall be communicated to the appropriate law enforcement agency by 13 the department no later than the next working day by telephone or mail.

14 (5) The department shall establish a statewide toll-free number to
15 be used by any person any hour of the day or night and any day of the
16 week to make reports of abuse, neglect, or exploitation.

Sec. 3. Section 28-712, Reissue Revised Statutes of Nebraska, is amended to read:

19 28-712 (1) The department, in consultation with the Nebraska Children's Commission, may implement the shall develop an alternative 20 response program implementation plan in accordance with this section and 21 sections 28-710.01 and 28-712.01. The alternative response program may 22 23 implementation plan shall include the provision of concrete supports and 24 voluntary services, including, but not limited to: Meeting basic needs, 25 including food and clothing assistance; housing assistance; transportation assistance; child care assistance; and mental health and 26 27 substance abuse services. When the alternative response implementation 28 plan has been developed, the department may begin using alternative 29 response in up to five alternative response demonstration project 30 locations that are designated by the department.

31 The department shall provide a report of an evaluation on the status

-4-

1 of alternative response implementation pursuant to subsection (2) of this 2 section to the commission and electronically to the Legislature by 3 November 15, 2015. The commission shall provide feedback on the report to 4 the department before December 15, 2015. The department may begin using 5 alternative response in up to five additional alternative response 6 demonstration project locations on or after January 1, 2016. The 7 department shall provide a report of another evaluation done pursuant to 8 subsection (2) of this section to the commission and electronically to 9 the Legislature by November 15, 2016. The department may continue using 10 alternative response until July 1, 2017. Continued use of alternative 11 response thereafter shall require approval of the Legislature.

For purposes of this section, demonstration project location means any geographic region, including, but not limited to, a city, a township, a village, a county, a group of counties, or a group of counties and cities, townships, or villages.

16 (2) The department shall contract with an independent entity to 17 evaluate the alternative response demonstration projects. The evaluation 18 shall include, but not be limited to:

19 (a) The screening process used to determine which cases shall be
 20 assigned to alternative response;

(b) The number and proportion of repeat child abuse and neglect
 allegations within a specified period of time following initial intake;

23 (c) The number and proportion of substantiated child abuse and 24 neglect allegations within a specified period of time following initial 25 intake;

26 (d) The number and proportion of families with any child entering 27 out-of-home care within a specified period of time following initial 28 intake;

(e) Changes in child and family well-being in the domains of
 behavioral and emotional functioning and physical health and development
 as measured by a standardized assessment instrument to be selected by the

1 department;

2 (f) The number and proportion of families assigned to the 3 alternative response track who are reassigned to a traditional response; 4 and

5 (g) A cost analysis that will examine, at a minimum, the costs of
6 the key elements of services received.

7 (2) (3) The department shall provide to the Nebraska Children's
 8 Commission regular updates on:

9 (a) The alternative response implementation plan, including the
 10 development of the alternative response interview protocols of children;

11 <u>(a)</u> (b) The status of <u>the</u> alternative response <u>program</u> 12 <u>implementation</u>;

(c) Inclusion of child welfare stakeholders, service providers, and
 other community partners, including families, for feedback and
 recommendations on the alternative response implementation plan;

16 (b) (d) Any findings or recommendations made by the independent 17 evaluator, including costs; and

18 (c) (e) Any alternative response programmatic modifications. ; and

19 (f) The status of the adoption and promulgation of rules and 20 regulations.

(3) (4) The department shall adopt and promulgate rules 21 and regulations to carry out this section and sections 28-710.01 and 22 28-712.01. Such rules and regulations shall include, but not be limited 23 24 to, provisions on the transfer of cases from alternative response to 25 traditional response; notice to families subject to a comprehensive assessment and served through alternative response of the alternative 26 response process and their rights, including the opportunity to challenge 27 28 agency determinations; and the provision of services through alternative 29 response; the collection, sharing, and reporting of data; and the 30 alternative response ineligibility criteria.

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Whenever the department proposes to change the alternative response

ineligibility criteria, public notice of the changes shall be given. The
department shall provide public notice and time for public comment by
publishing the proposed changes on its web site at least sixty days prior
to the public hearing on such regulation changes.

5 The department shall provide a copy of the proposed rules and 6 regulations to the Nebraska Children's Commission no later than October 7 <u>1, 2014.</u>

8 Sec. 4. Section 28-712.01, Reissue Revised Statutes of Nebraska, is 9 amended to read:

28-712.01 (1) This section applies to <u>the</u> alternative response
 <u>program</u> demonstration projects designated under section 28-712.

(2) The Review, Evaluate, and Decide Team shall convene to review 12 intakes pursuant to the department's rules, regulations, and policies, to 13 evaluate the information, and to determine assignment for alternative 14 response or traditional response. The team shall utilize consistent 15 criteria to review the severity of the allegation of child abuse or 16 17 neglect, access to the perpetrator, vulnerability of the child, family history including previous reports, parental cooperation, parental or 18 caretaker protective factors, and other information as deemed necessary. 19 At the conclusion of the review, the intake shall be assigned to either 20 traditional response or alternative response. Decisions of the team shall 21 22 be made by consensus. If the team cannot come to consensus, the intake shall be assigned for a traditional response. 23

24 (3) In the case of an alternative response, the department shall 25 complete a comprehensive assessment. The department shall transfer the case being given alternative response to traditional response if the 26 department determines that a child is unsafe. Upon completion of the 27 28 comprehensive assessment, if it is determined that the child is safe, participation in services offered to the family receiving an alternative 29 response is voluntary, the case shall not be transferred to traditional 30 31 response based upon the family's failure to enroll or participate in such

-7-

services, and the subject of the report shall not be entered into the
 central registry of child protection cases maintained pursuant to section
 28-718.

4 (4) The department shall, by the next working day after receipt of a 5 report of child abuse and neglect, enter into the tracking system of 6 child protection cases maintained pursuant to section 28-715 all reports 7 of child abuse or neglect received under this section that are opened for 8 alternative response and any action taken.

9 (5) The department shall make available to the appropriate investigating law enforcement agency and the county attorney a copy of 10 all reports relative to a case of suspected child abuse or neglect. 11 Aggregate, nonidentifying reports of child abuse or neglect receiving an 12 13 alternative response shall be made available quarterly to requesting agencies outside the department. Such alternative response data shall 14 include, but not be limited to, the nature of the initial child abuse or 15 16 neglect report, the age of the child or children, the nature of services 17 offered, the location of the cases, the number of cases per month, and the number of alternative response cases that were transferred to 18 19 traditional response. No other agency or individual except the office of Inspector General of Nebraska Child Welfare, the Public Counsel, law 20 enforcement agency personnel, and county attorneys shall be provided 21 specific, identifying reports of child abuse or neglect being given 22 23 alternative response. The office of Inspector General of Nebraska Child 24 Welfare shall have access to all reports relative to cases of suspected 25 child abuse or neglect subject to traditional response and those subject to alternative response. The department and the office shall develop 26 procedures allowing for the Inspector General's review of cases subject 27 28 to alternative response. The Inspector General shall include in the report pursuant to section 43-4331 a summary of all cases reviewed 29 pursuant to this subsection. 30

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Sec. 5. Section 38-101, Reissue Revised Statutes of Nebraska, is

-8-

1	amended to read:
2	38-101 Sections 38-101 to 38-1,142 and the following practice acts
3	shall be known and may be cited as the Uniform Credentialing Act:
4	(1) The Advanced Practice Registered Nurse Practice Act;
5	(2) The Alcohol and Drug Counseling Practice Act;
6	(3) The Athletic Training Practice Act;
7	(4) The Audiology and Speech-Language Pathology Practice Act;
8	(5) The Certified Nurse Midwifery Practice Act;
9	(6) The Certified Registered Nurse Anesthetist Practice Act;
10	(7) The Chiropractic Practice Act;
11	(8) The Clinical Nurse Specialist Practice Act;
12	(9) The Cosmetology, Electrology, Esthetics, Nail Technology, and
13	Body Art Practice Act;
14	(10) The Dentistry Practice Act;
15	(11) The Emergency Medical Services Practice Act;
16	(12) The Environmental Health Specialists Practice Act;
17	(13) The Funeral Directing and Embalming Practice Act;
18	(14) The Genetic Counseling Practice Act;
19	(15) The Hearing Instrument Specialists Practice Act;
20	(16) The Licensed Practical Nurse-Certified Practice Act;
21	(17) The Massage Therapy Practice Act;
22	(18) The Medical Nutrition Therapy Practice Act;
23	(19) The Medical Radiography Practice Act;
24	(20) The Medicine and Surgery Practice Act;
25	(21) The Mental Health Practice Act;
26	(22) The Nurse Practice Act;
27	(23) The Nurse Practitioner Practice Act;
28	(24) The Nursing Home Administrator Practice Act;
29	(25) The Occupational Therapy Practice Act;
30	(26) The Optometry Practice Act;
31	(27) The Perfusion Practice Act;

1 (28) The Pharmacy Practice Act; 2 (29) The Physical Therapy Practice Act; (30) The Podiatry Practice Act; 3 4 (31) The Psychology Practice Act; 5 (32) The Respiratory Care Practice Act; 6 (33) The Surgical First Assistant Practice Act; 7 (34) The Veterinary Medicine and Surgery Practice Act; and (35) The Water Well Standards and Contractors' Practice Act. 8 9 If there is any conflict between any provision of sections 38-101 to 10 <u>38-1,142</u> 38-1,139 and 38-1,141 and any provision of a practice act, the provision of the practice act shall prevail. 11 The Revisor of Statutes shall assign the Uniform Credentialing Act, 12 13 including the practice acts enumerated in subdivisions (1) through (34) (33) of this section, to articles within Chapter 38. 14 Sec. 6. Section 38-123, Reissue Revised Statutes of Nebraska, is 15 amended to read: 16 17 38-123 (1) The department shall establish and maintain a record of all credentials issued pursuant to the Uniform Credentialing Act. The 18 record shall contain identifying information for each credential holder 19

and the credential issued pursuant to the act. 20

(2) For individual credential holders engaged in a profession: 21

22 (a) The record information shall include:

(i) The name, date and place of birth, and social security number; 23

(ii) The street, rural route, or post office address; 24

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(iii) The school and date of graduation;

(iv) The name of examination, date of examination, and ratings or 26 grades received, if any; 27

28 (v) The type of credential issued, the date the credential was issued, the identifying name and number assigned to the credential, and 29 the basis on which the credential was issued; 30

(vi) The status of the credential; and 31

-10-

1 (vii) A description of any disciplinary action against the 2 credential, including, but not limited to, the type of disciplinary 3 action, the effective date of the disciplinary action, and a description 4 of the basis for any such disciplinary action;

5 (b) The record may contain any additional information the department 6 deems appropriate to advance or support the purpose of the Uniform 7 Credentialing Act;

8 (c) The record may be maintained in computer files or paper copies 9 and may be stored on microfilm or in similar form; and

10 (d) The record is a public record, except that social security
11 numbers shall not be public information but may be shared as specified in
12 subsection (5) of section 38-130.

13 (3) For credential holders engaged in a business:

14 (a) The record information shall include:

15 (i) The full name and address of the business;

16 (ii) The type of credential issued, the date the credential was 17 issued, the identifying name and number assigned to the credential, and 18 the basis on which the credential was issued;

19 (iii) The status of the credential; and

(iv) A description of any disciplinary action against the
credential, including, but not limited to, the type of disciplinary
action, the effective date of the disciplinary action, and a description
of the basis for any such disciplinary action;

(b) The record may contain any additional information the department
deems appropriate to advance or support the purpose of the Uniform
Credentialing Act;

(c) The record may be maintained in computer files or paper copies
and may be stored on microfilm or in similar form; and

29 (d) The record is a public record.

30 (4) Except as otherwise specifically provided, if If the department
 31 is required to provide notice or notify an applicant or credential holder

-11-

under the Uniform Credentialing Act, such requirements shall be satisfied
 by <u>sending</u> mailing a written notice to such applicant or credential
 holder at his or her last address of record.

Sec. 7. Section 43-296, Reissue Revised Statutes of Nebraska, is
amended to read:

43-296 All associations receiving juveniles under the Nebraska 6 7 Juvenile Code shall be subject to the same visitation, inspection, and supervision by the Department of Health and Human Services as are public 8 9 charitable institutions of this state, and it shall be the duty of the 10 department to pass annually upon the fitness of every such association as may receive or desire to receive juveniles under the provisions of such 11 12 code. Every such association shall annually, on or before September 15, 13 make a report to the department showing its condition, management, and 14 competency to adequately care for such juveniles as are or may be 15 committed to it and such other facts as the department may require. Upon 16 receiving such report, the department shall provide an electronic copy of 17 such report to the Health and Human Services Committee of the Legislature on or before September 15 of 2012, 2013, and 2014. Upon the department 18 19 being satisfied that such association is competent and has adequate facilities to care for such juveniles, it shall issue to such association 20 a certificate to that effect, which certificate shall continue in force 21 22 for one year unless sooner revoked by the department. No juvenile shall be committed to any such association which has not received such a 23 24 certificate within the fifteen months immediately preceding the 25 commitment. The court may at any time require from any association receiving or desiring to receive juveniles under the provisions of the 26 Nebraska Juvenile Code such reports, information, and statements as the 27 judge shall deem proper and necessary for his or her action, and the 28 court shall in no case be required to commit a juvenile to any 29 association whose standing, conduct, or care of juveniles or ability to 30 care for the same is not satisfactory to the court. 31

-12-

Sec. 8. Section 43-4331, Reissue Revised Statutes of Nebraska, is
 amended to read:

3 43-4331 On or before September 15 of each year, the Inspector General shall provide to the Health and Human Services Committee of the 4 5 Legislature, the Judiciary Committee of the Legislature, the Supreme Court, and the Governor a summary of reports and investigations made 6 under the Office of Inspector General of Nebraska Child Welfare Act for 7 the preceding year. The summary provided to the committees shall be 8 9 provided electronically. The summaries shall detail recommendations and the status of implementation of recommendations and may also include 10 recommendations to the committees regarding issues discovered through 11 investigation, audits, inspections, and reviews by the office that will 12 13 increase accountability and legislative oversight of the Nebraska child welfare system, improve operations of the department, the juvenile 14 services division, the commission, and the Nebraska child welfare system, 15 or deter and identify fraud, abuse, and illegal acts. Such summary shall 16 17 include summaries of alternative response cases under the alternative response program demonstration projects implemented in accordance with 18 sections 28-710.01, 28-712, and 28-712.01 reviewed by the Inspector 19 General. The summaries shall not contain any confidential or identifying 20 information concerning the subjects of the reports and investigations. 21

22 Sec. 9. Section 68-908, Revised Statutes Cumulative Supplement, 23 2016, is amended to read:

68-908 (1) The department shall administer the medical assistanceprogram.

(2) The department may (a) enter into contracts and interagency agreements, (b) adopt and promulgate rules and regulations, (c) adopt fee schedules, (d) apply for and implement waivers and managed care plans for services for eligible recipients, including services under the Nebraska Behavioral Health Services Act, and (e) perform such other activities as necessary and appropriate to carry out its duties under the Medical

-13-

1 Assistance Act. A covered item or service as described in section 68-911 2 that is furnished through a school-based health center, furnished by a provider, and furnished under a managed care plan pursuant to a waiver 3 does not require prior consultation or referral by a patient's primary 4 5 care physician to be covered. Any federally qualified health center providing services as a sponsoring facility of a school-based health 6 center shall be reimbursed for such services provided at a school-based 7 health center at the federally qualified health center reimbursement 8 9 rate.

10 (3) The department shall maintain the confidentiality of information 11 regarding applicants for or recipients of medical assistance and such 12 information shall only be used for purposes related to administration of 13 the medical assistance program and the provision of such assistance or as 14 otherwise permitted by federal law.

(4) $\frac{(4)(a)}{(a)}$ The department shall prepare an annual summary and 15 16 analysis of the medical assistance program for legislative and public review. The department shall submit a report of such summary and analysis 17 to the Governor and the Legislature electronically no later than December 18 19 1 of each year , including, but not limited to, a description of eligible recipients, covered services, provider reimbursement, program trends and 20 projections, program budget and expenditures, the status of 21 implementation of the Medicaid Reform Plan, and recommendations for 22 23 program changes.

24 (b) The department shall provide a draft report of such summary and 25 analysis to the Medicaid Reform Council no later than September 15 of each year. The council shall conduct a public meeting no later than 26 27 October 1 of each year to discuss and receive public comment regarding 28 such report. The council shall provide any comments and recommendations 29 regarding such report in writing to the department no later than November 30 1 of each year. The department shall submit a final report of such summary and analysis to the Governor, the Legislature, and the council no 31

1 later than December 1 of each year. The report submitted to the 2 Legislature shall be submitted electronically. Such final report shall 3 include a response to each written recommendation provided by the 4 council.

5 Sec. 10. Section 68-909, Revised Statutes Cumulative Supplement,
6 2016, is amended to read:

7 68-909 (1) All contracts, agreements, rules, and regulations 8 relating to the medical assistance program as entered into or adopted and 9 promulgated by the department prior to July 1, 2006, and all provisions 10 of the medicaid state plan and waivers adopted by the department prior to 11 July 1, 2006, shall remain in effect until revised, amended, repealed, or 12 nullified pursuant to law.

(2) Prior to the adoption and promulgation of proposed rules and 13 14 regulations under section 68-912 or relating to the implementation of medicaid state plan amendments or waivers, the department shall provide a 15 16 report to the Governor, the Legislature, and the Medicaid Reform Council no later than December 1 before the next regular session of the 17 Legislature summarizing the purpose and content of such proposed rules 18 and regulations and the projected impact of such proposed rules and 19 regulations on recipients of medical assistance and medical assistance 20 expenditures. The report submitted to the Legislature shall be submitted 21 electronically. Any changes in medicaid copayments in fiscal year 2011-12 22 are exempt from the reporting requirement of this subsection and the 23 24 requirements of section 68-912.

(3) The Medicaid Reform Council, no later than thirty days after the date of receipt of any report under subsection (2) of this section, may conduct a public meeting to receive public comment regarding such report. The council shall promptly provide any comments and recommendations regarding such report in writing to the department. Such comments and recommendations shall be advisory only and shall not be binding on the department, but the department shall promptly provide a written response

-15-

1 to such comments or recommendations to the council.

2 (4) The department shall monitor and shall periodically, as necessary, but no less than biennially, report to the Governor, the 3 4 Legislature, and the Medicaid Reform Council on the implementation of 5 rules and regulations, medicaid state plan amendments, and waivers adopted under the Medical Assistance Act and the effect of such rules and 6 regulations, amendments, or waivers on eligible recipients of medical 7 assistance and medical assistance expenditures. The report submitted to 8 9 the Legislature shall be submitted electronically.

10 Sec. 11. Section 68-949, Reissue Revised Statutes of Nebraska, is 11 amended to read:

68-949 (1) It is the intent of the Legislature that the department 12 13 implement reforms to the medical assistance program such as those contained in the Medicaid Reform Plan, including (a) an incremental 14 expansion of home and community-based services for aged persons and 15 16 persons with disabilities consistent with such plan, (b) an increase in 17 care coordination or disease management initiatives to better manage medical assistance expenditures on behalf of high-cost recipients with 18 multiple or chronic medical conditions, and (c) other reforms as deemed 19 necessary and appropriate by the department, in consultation with the 20 committee and the Medicaid Reform Council. 21

(2) (2)(a) The department shall develop recommendations based on a 22 comprehensive analysis of various options available to the state under 23 24 applicable federal law for the provision of medical assistance to persons with disabilities who are employed, including persons with a medically 25 improved disability, to enhance and replace current eligibility 26 provisions contained in subdivision (8) of section 68-915. 27

(b) The department shall provide a draft report of such
recommendations to the committee and the Medicaid Reform Council no later
than October 1, 2008. The council shall conduct a public meeting no later
than October 15, 2008, to discuss and receive public comment regarding

-16-

such report. The council shall provide any comments and recommendations regarding such report in writing to the department and the committee no later than November 1, 2008. The department shall provide a final report of such recommendations to the Governor, the committee, and the council no later than December 1, 2008.

(3) (3)(a) The department shall develop recommendations for further 6 modification or replacement of the defined benefit structure of the 7 medical assistance program. Such recommendations shall be consistent with 8 9 the public policy in section 68-905 and shall consider the needs and resources of low-income Nebraska residents who are eligible or may become 10 eligible for medical assistance, the experience and outcomes of other 11 states that have developed and implemented such changes, and other 12 13 relevant factors as determined by the department.

14 (b) The department shall provide a draft report of such 15 recommendations to the committee and the Medicaid Reform Council no later 16 than October 1, 2008. The council shall conduct a public meeting no later 17 than October 15, 2008, to discuss and receive public comment regarding 18 such report. The council shall provide any comments and recommendations 19 regarding such report in writing to the department and the committee no later than November 1, 2008. The department shall provide a final report 20 21 of such recommendations to the Governor, the committee, and the council 22 no later than December 1, 2008.

Sec. 12. Section 71-806, Revised Statutes Cumulative Supplement,
24 2016, is amended to read:

71-806 (1) The division shall act as the chief behavioral health authority for the State of Nebraska and shall direct the administration and coordination of the public behavioral health system, including, but not limited to: (a) Administration and management of the division, regional centers, and any other facilities and programs operated by the division; (b) integration and coordination of the public behavioral health system; (c) comprehensive statewide planning for the provision of

-17-

1 an appropriate array of community-based behavioral health services and 2 continuum of care; (d) coordination and oversight of regional behavioral 3 health authorities, including approval of regional budgets and audits of regional behavioral health authorities; (e) development and management of 4 data and information systems; (f) prioritization and approval of all 5 expenditures of funds received and administered by the division, 6 7 including: The establishment of rates to be paid; reimbursement methodologies for behavioral health services; methodologies to be used by 8 9 regional behavioral health authorities in determining a consumer's financial eligibility as provided in subsection (2) of section 71-809; 10 and fees and copays to be paid by consumers of such services; (q) 11 cooperation with the department in the licensure and regulation of 12 professionals, 13 behavioral health programs, and facilities; (h) cooperation with the department in the provision of behavioral health 14 services under the medical assistance program; (i) audits of behavioral 15 health programs and services; and (j) promotion of activities in research 16 17 and education to improve the quality of behavioral health services, recruitment and retention of behavioral health professionals, and access 18 to behavioral health programs and services; and (k) establishment of 19 standards for peer services, including standards for training programs 20 and for training, certification of, and service delivery by individuals. 21

(2) The department shall adopt and promulgate rules and regulationsto carry out the Nebraska Behavioral Health Services Act.

24 Sec. 13. Section 71-810, Revised Statutes Cumulative Supplement, 25 2016, is amended to read:

26 71-810 (1) The division shall encourage and facilitate the statewide 27 development and provision of an appropriate array of community-based 28 behavioral health services and continuum of care for the purposes of (a) 29 providing greater access to such services and improved outcomes for 30 consumers of such services and (b) reducing the necessity and demand for 31 regional center behavioral health services.

-18-

1 (2) The division may reduce or discontinue regional center 2 behavioral health services only if (a) appropriate community-based 3 services or other regional center behavioral health services are available for every person receiving the regional center services that 4 would be reduced or discontinued, (b) such services possess sufficient 5 capacity and capability to effectively replace the service needs which 6 otherwise would have been provided at such regional center, and (c) no 7 8 further commitments, admissions, or readmissions for such services are 9 required due to the availability of community-based services or other regional center services to replace such services. 10

(3) The division shall notify the Governor and the Legislature of 11 any intended reduction or discontinuation of regional center services 12 under this section. The notification submitted to the Legislature shall 13 14 submitted electronically. Such notice shall include detailed be documentation of the community-based services or other regional center 15 services that are being utilized to replace such services. 16

(4) As regional center services are reduced or discontinued under 17 division shall make appropriate corresponding 18 this section, the reductions in regional center personnel and other expenditures related to 19 the provision of such services. All funding related to the provision of 20 regional center services that are reduced or discontinued under this 21 section shall be reallocated and expended by the division for purposes 22 23 related to the statewide development and provision of community-based 24 services.

(5) The division may establish state-operated community-based services to replace regional center services that are reduced or discontinued under this section. The division shall provide regional center employees with appropriate training and support to transition such employees into positions as may be necessary for the provision of such state-operated services.

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(6) When the occupancy of the licensed psychiatric hospital beds of

-19-

1 any regional center reaches twenty percent or less of its licensed 2 psychiatric hospital bed capacity on March 15, 2004, the division shall 3 notify the Governor and the Legislature of such fact. The notification 4 submitted to the Legislature shall be submitted electronically. Upon such 5 notification, the division, with the approval of a majority of members of 6 the Executive Board of the Legislative Council, may provide for the 7 transfer of all remaining patients at such center to appropriate 8 community-based services or other regional center services pursuant to 9 this section and cease the operation of such regional center.

10 (7) The division, in consultation with each regional behavioral 11 health authority, shall establish and maintain a data and information 12 system for all persons receiving state-funded behavioral health services 13 under the Nebraska Behavioral Health Services Act. Information maintained by the division shall include, but not be limited to, (a) the number of 14 15 persons receiving regional center services, (b) the number of persons 16 ordered by a mental health board to receive inpatient or outpatient 17 treatment and receiving regional center services, (c) the number of 18 persons ordered by a mental health board to receive inpatient or 19 outpatient treatment and receiving community-based services, (d) the 20 number of persons voluntarily admitted to a regional center and receiving 21 regional center services, (e) the number of persons waiting to receive 22 regional center services, (f) the number of persons waiting to be 23 transferred from a regional center to community-based services or other 24 regional center services, (g) the number of persons discharged from a 25 regional center who are receiving community-based services or other regional center services, and (h) the number of persons admitted to 26 27 behavioral health crisis centers. Each regional behavioral health 28 authority shall provide such information as requested by the division and 29 necessary to carry out this subsection. The division shall submit reports 30 of such information to the Governor and the Legislature on a quarterly basis beginning July 1, 2005, in a format which does not identify any 31

person by name, address, county of residence, social security number, or other personally identifying characteristic. The report submitted to the Legislature shall be submitted electronically.

4 <u>(6)</u> (8) The provisions of this section are self-executing and 5 require no further authorization or other enabling legislation.

Sec. 14. Section 71-1904, Revised Statutes Cumulative Supplement,
2016, is amended to read:

8 71-1904 (1) The department shall adopt and promulgate rules and 9 regulations pursuant to sections 71-1901 to 71-1906.01 for (a) the proper 10 care and protection of children by licensees under such sections, (b) the issuance, suspension, and revocation of licenses to provide foster care, 11 (c) the issuance, suspension, and revocation of probationary licenses to 12 provide foster care, (d) the issuance, suspension, and revocation of 13 provisional licenses to provide foster care, (e) the provision of 14 training in foster care, which training shall be directly related to the 15 skills necessary to care for children in need of out-of-home care, 16 17 including, but not limited to, abused, neglected, dependent, and delinquent children, and (f) the proper administration of sections 18 19 71-1901 to 71-1906.01.

(2) The department may issue a waiver for any licensing standard not 20 related to children's safety for a relative home that is pursuing 21 licensure. Such waivers shall be granted on a case-by-case basis upon 22 assessment by the department based upon the best interests of the child. 23 24 A relative home that receives a waiver pursuant to this subsection shall 25 be considered fully licensed for purposes of federal reimbursement under the federal Fostering Connections to Success and Increasing Adoptions Act 26 27 of 2008, Public Law 110-351. The department shall submit electronically 28 an annual report to the Health and Human Services Committee of the Legislature on the number of waivers granted under this subsection and 29 30 the total number of children placed in relative homes. For 2013 and 2014, the department shall provide the report electronically to the Health and 31

1 Human Services Committee of the Legislature on or before September 15.

2 (3) The department shall adopt and promulgate rules and regulations licensing 3 foster requirements establishing new home that ensure 4 children's safety, health, and well-being but minimize the use of 5 licensing mandates for nonsafety issues. Such rules and regulations shall provide alternatives to address nonsafety issues regarding housing and 6 7 provide assistance to families in overcoming licensing barriers, especially in child-specific relative and kinship placements, to maximize 8 9 appropriate reimbursement under Title IV-E of the federal Social Security 10 Act, as amended, including expanding the use of kinship guardianship assistance payments under 42 U.S.C. 673(d), as such act and section 11 existed on January 1, 2013. 12

Sec. 15. Section 71-3405, Revised Statutes Cumulative Supplement,
2016, is amended to read:

15 71-3405 For purposes of the Child and Maternal Death Review Act:

16 (1) Child means a person from birth to eighteen years of age;

17 (2) Investigation of child death means a review of existing records and other information regarding the child from relevant agencies, 18 professionals, and providers of medical, dental, prenatal, and mental 19 health care. The records to be reviewed may include, but not be limited 20 to, medical records, coroner's reports, autopsy reports, social services 21 22 records, records of alternative response cases under the alternative 23 response program demonstration projects implemented in accordance with 24 sections 28-710.01, 28-712, and 28-712.01, educational records, emergency and paramedic records, and law enforcement reports; 25

(3) Investigation of maternal death means a review of existing records and other information regarding the woman from relevant agencies, professionals, and providers of medical, dental, prenatal, and mental health care. The records to be reviewed may include, but not be limited to, medical records, coroner's reports, autopsy reports, social services records, educational records, emergency and paramedic records, and law

-22-

1 enforcement reports;

2 (4) Maternal death means the death of a woman during pregnancy or3 the death of a postpartum woman;

4 (5) Postpartum woman means a woman during the period of time 5 beginning when the woman ceases to be pregnant and ending one year after 6 the woman ceases to be pregnant;

7 (6) Preventable child or maternal death means the death of any child or pregnant or postpartum woman which reasonable medical, social, legal, 8 9 psychological, or educational intervention may have prevented. 10 Preventable child or maternal death includes, but is not limited to, the death of a child or pregnant or postpartum woman from (a) intentional and 11 unintentional injuries, (b) medical misadventures, including untoward 12 results, malpractice, and foreseeable complications, (c) lack of access 13 to medical care, (d) neglect and reckless conduct, including failure to 14 supervise and failure to seek medical care for various reasons, and (e) 15 preventable premature birth; 16

17 (7) Reasonable means taking into consideration the condition,18 circumstances, and resources available; and

19 (8) Team means the State Child and Maternal Death Review Team.

20 Sec. 16. Section 71-6038, Reissue Revised Statutes of Nebraska, is 21 amended to read:

22 71-6038 For purposes of sections 71-6038 to 71-6042:

(1) Complicated feeding problems include, but are not limited to,
 difficulty swallowing, recurrent lung aspirations, and tube or parenteral
 or intravenous feedings;

26

(2) Department means the Department of Health and Human Services;

(3) <u>Nurse aide</u> Nursing assistant means any person employed by a facility described in subsection (1) of section 71-6039 nursing home for the purpose of aiding a licensed registered or practical nurse through the performance of nonspecialized tasks related to the personal care and comfort of residents other than a paid dining assistant or a licensed

-23-

1 registered or practical nurse;

2 (4) Nursing home means any facility or a distinct part of any
3 facility that provides care as defined in sections 71-420, 71-421,
4 71-422, 71-424, and 71-429; and

5 (5) Paid dining assistant means any person employed by a nursing 6 home for the purpose of aiding a licensed registered or practical nurse 7 through the feeding of residents other than a <u>nurse aide</u> nursing 8 assistant or a licensed registered or practical nurse.

9 Sec. 17. Section 71-6039, Revised Statutes Cumulative Supplement,
10 2016, is amended to read:

11 71-6039 (1) No person shall act as a <u>nurse aide</u> nursing assistant in 12 a <u>facility or a distinct part of a facility that provides care as defined</u> 13 <u>in section 71-405, 71-406, 71-409, 71-412, 71-416, 71-417, 71-418,</u> 14 <u>71-419, 71-420, 71-421, 71-422, 71-424, 71-426, 71-427, or 71-429</u> nursing 15 home unless such person:

(a) Is at least sixteen years of age and has not been convicted of a
 crime involving moral turpitude;

(b) Is able to speak and understand the English language or a
 language understood by a substantial portion of the <u>facility</u> nursing home
 residents; and

(c) Has successfully completed a basic course of training approved
by the department for <u>nurse aides</u> nursing assistants within one hundred
twenty days of initial employment in the capacity of a <u>nurse aide</u> nursing
assistant at any nursing home.

(2)(a) A registered nurse or licensed practical nurse whose license
has been revoked, suspended, or voluntarily surrendered in lieu of
discipline may not act as a <u>nurse aide</u> nursing assistant in a <u>facility</u>
<u>described in subsection (1) of this section</u> nursing home.

(b) If a person registered as a <u>nurse aide</u> nursing assistant becomes
 licensed as a registered nurse or licensed practical nurse, his or her
 registration as a <u>nurse aide</u> nursing assistant becomes null and void as

-24-

LB417 2017

1 of the date of licensure.

2 (c) A person listed on the Nurse Aide Registry with respect to whom 3 a finding of conviction has been placed on the registry may petition the 4 department to have such finding removed at any time after one year has 5 elapsed since the date such finding was placed on the registry.

(3) The department may prescribe a curriculum for training nurse 6 7 aides nursing assistants and may adopt and promulgate rules and regulations for such courses of training. The content of the courses of 8 9 training and competency evaluation programs shall be consistent with federal requirements unless exempted. The department may approve courses 10 of training if such courses of training meet the requirements of this 11 section. Such courses of training shall include instruction on the 12 13 responsibility of each <u>nurse aide</u> nursing assistant to report suspected abuse or neglect pursuant to sections 28-372 and 28-711. Nursing homes 14 may carry out approved courses of training within the nursing home, 15 except that nursing homes may not conduct the competency evaluation part 16 17 of the program. The prescribed training shall be administered by a licensed registered nurse. 18

19 (4) For <u>nurse aides</u> <u>nursing assistants</u> at intermediate care facilities for persons with developmental disabilities, such courses of 20 training shall be no less than twenty hours in duration and shall include 21 at least fifteen hours of basic personal care training and five hours of 22 23 basic therapeutic and emergency procedure training, and for nurse aides 24 nursing assistants at all nursing homes other than intermediate care 25 facilities for persons with developmental disabilities, such courses shall be no less than seventy-five hours in duration. 26

(5) This section shall not prohibit any facility from exceeding theminimum hourly or training requirements.

Sec. 18. Section 71-6039.06, Reissue Revised Statutes of Nebraska,
 is amended to read:

31 71-6039.06 <u>Nurse aides</u> Nursing assistants and paid dining

-25-

assistants are eligible to participate in the Licensee Assistance Program
 as prescribed by section 38-175.

Sec. 19. Section 71-6603, Reissue Revised Statutes of Nebraska, is
amended to read:

5 71-6603 On and after September 6, 1991, no person shall act as a 6 home health aide unless such person:

7 (1) Is at least eighteen years of age;

8

(2) Is of good moral character;

9 (3) Has not been convicted of a crime under the laws of this state 10 or another jurisdiction, the penalty for which is imprisonment for a 11 period of more than one year and which is rationally related to the 12 person's fitness or capacity to act as a home health aide;

(4) Is able to speak and understand the English language or the
language of the home health agency patient and the home health agency
staff member who acts as the home health aide's supervisor;

16 (5) Meets one of the following qualifications:

17 (a) Has successfully completed a home health aide training course18 which meets the standards described in section 71-6608.01;

19 (b) Is a graduate of a school of nursing;

(c) Has been employed by a licensed home health agency as a homehealth aide II prior to September 6, 1991;

(d) Has successfully completed a course in a school of nursing which
 included practical clinical experience in fundamental nursing skills and
 has completed a competency evaluation as described in section 71-6608.02;

(e) Has successfully completed a basic course of training approved by the department for <u>nurse aides</u> nursing assistants as required by section 71-6039 and has completed a competency evaluation as described in section 71-6608.02;

(f) Has been employed by a licensed home health agency as a home
health aide I prior to September 6, 1991, and has completed a competency
evaluation as described in section 71-6608.02; or

-26-

(g) Has met the qualifications equal to one of those contained in
 subdivisions (a) through (f) of this subdivision in another state or
 territory of the United States; and

4 (6) Has provided to the employing licensed home health agency proof5 of meeting the requirements of this section.

6 Sec. 20. Section 81-2210, Reissue Revised Statutes of Nebraska, is7 amended to read:

81-2210 Community aging services means those activities and services 8 9 which fulfill the goals of the Nebraska Community Aging Services Act, which are necessary to promote, restore, or support self-sufficiency and 10 independence for older persons, and which include: (1) Congregate 11 activities, including, but not limited to, senior centers, group meals, 12 volunteerism, adult day services, and recreation; and (2) individual 13 services, including, but not limited to, specialized transportation, 14 meals-on-wheels, home handyman services, home health care services, legal 15 services, counseling related to problems of aging or encouraging access 16 17 to aging services, and senior companion volunteer services.

Sec. 21. Section 81-2273, Reissue Revised Statutes of Nebraska, is amended to read:

81-2273 Sections 81-2273 to 81-2283 shall be known and may be cited
as the Nebraska Senior Companion Volunteer Program Act.

22 Sec. 22. Section 81-2274, Reissue Revised Statutes of Nebraska, is 23 amended to read:

81-2274 The purpose of the Nebraska Senior Companion Volunteer
Program Act is to provide volunteer community service opportunities for
to low-income older persons following priorities outlined in the federal
Older Americans Act of 1965, as the act existed on January 1, 2017 for
the benefit of frail elderly persons with special needs.

Sec. 23. Section 81-2275, Reissue Revised Statutes of Nebraska, is
 amended to read:

31 81-2275 For purposes of the Nebraska Senior Companion Volunteer

-27-

1 Program Act:

2 (1) Department means the Department of Health and Human Services; 3 and

4 (2) Direct service contractor means any public or private nonprofit 5 organization that (a) is not currently receiving federal funding for the 6 federal senior companion program and (b) demonstrates the ability to 7 provide the services specified in section 81-2277;

8 (3) Frail elderly means a person who (a) is sixty years of age or 9 older, (b) has a physical, mental, or emotional health limitation, and 10 (c) needs assistance to achieve and maintain independent living; and

(2) (4) Senior companion volunteer means an individual who (a) is 11 sixty years of age or older, (b) has an annual income not exceeding one 12 13 hundred twenty-five percent of the federal poverty level, (c) is determined by a physical examination to be capable, with or without 14 15 reasonable accommodation, of serving adults with special needs without 16 detriment to himself or herself or the persons served, and (d) provides 17 companion services at least four hours a day, four days a week.

Sec. 24. Section 81-2279, Reissue Revised Statutes of Nebraska, is 18 19 amended to read:

(1) A senior volunteer may Senior companion volunteers 20 81-2279 providing companion services pursuant to the Nebraska Senior Companion 21 22 Volunteer Program Act shall receive (a) (1) transportation expenses for transportation to and from their residences and the place where services 23 24 are to be rendered, (b) (2) one free meal when reasonably available 25 during each day that services are rendered, and (c) (3)(a) accident and liability insurance, (b) an annual physical examination, and (c) a 26 27 nontaxable hourly stipend of two dollars and fifty-five cents per hour.

28 (2) A senior volunteer shall receive motor vehicle accident and liability insurance coverage. 29

Sec. 25. Section 81-2281, Reissue Revised Statutes of Nebraska, is 30 amended to read: 31

2017

LB417 2017 1 81-2281 (1) The department shall make <u>annual grants</u> in an amount not 2 to exceed twenty-five *fifty* thousand dollarsto_direct_service contractors and shall give preference to applications for grants to 3 4 provide in-home services. 5 (2) Applications shall be made on forms provided by the department. 6 (3) No grant shall be approved for any applicant who has received 7 federal funding to provide services under any federal senior companion 8 program. 9 (2) (4) As a condition to receiving a grant, an applicant shall 10 obtain at least ten percent matching funds from a local sources governmental or other source. 11 (5) Grants shall be for a period of twenty-four months and shall not 12 13 be used as matching funds but solely to carry out the requirements of the Nebraska Senior Companion Volunteer Program Act. 14 (6) No person paid from grant funds shall replace any staff member 15 16 of the grantee. 17 Sec. 26. Section 81-2283, Reissue Revised Statutes of Nebraska, is amended to read: 18 19 81-2283 The department shall adopt and promulgate rules and regulations to carry out the Nebraska Senior Companion Volunteer Program 20 21 Act. 22 Sec. 27. Section 83-1212.01, Reissue Revised Statutes of Nebraska, 23 is amended to read: 24 83-1212.01 (1) There is hereby created the Advisory Committee on 25 Developmental Disabilities. The advisory committee shall consist of a representative of a statewide advocacy organization for persons with 26

developmental disabilities and their families and not more than fifteen 27 additional members, at least one-third of whom shall be persons with 28 29 developmental disabilities, at least one-third of whom shall be families of persons with developmental disabilities, and no more than one-third of 30 whom shall be elected officials or interested community persons. 31

-29-

1 (2) The members shall be appointed by the Governor for staggered 2 terms of three years. Any vacancy shall be filled by the Governor for the 3 remainder of the term. One of the members shall be designated as 4 chairperson by the Governor. Members shall be reimbursed for their actual 5 and necessary expenses as provided in sections 81-1174 to 81-1177.

6 (3) The advisory committee shall advise the department regarding all 7 aspects of the funding and delivery of services to persons with 8 developmental disabilities.

9 (4) The advisory committee shall <u>(a)</u> provide sufficient oversight to 10 ensure that persons placed in the custody of the department under the 11 Developmental Disabilities Court-Ordered Custody Act are receiving the 12 least restrictive treatment and services necessary <u>and (b) oversee the</u> 13 <u>implementation of the quality assurance plan described in section</u> 14 <u>83-1213</u>.

Sec. 28. Section 83-1213, Reissue Revised Statutes of Nebraska, is amended to read:

17 83-1213 (1) The department shall develop a quality assurance plan to promote and monitor quality relating to services for persons with 18 developmental disabilities. Such plan may rely on internally or 19 externally developed performance and outcome measures. Such plan shall 20 lead to continual learning and adjustments and improvements to the system 21 22 of such services provide for the establishment of at least one quality review team for each developmental disability service area designated by 23 24 the department. Each team shall consist of at least four members and 25 shall include at least one person with a developmental disability, at least one parent or other close relative of a person with a developmental 26 27 disability, and at least one person who is neither a person with a 28 developmental disability nor a close relative of such a person. No 29 employee of any governmental agency or instrumentality or any specialized 30 program shall be eligible to be appointed to a team. The department shall consider nominations for such teams from advocacy groups, providers, 31

1 elected officials, or other groups or by persons interested in 2 developmental disability services who are located in the service area 3 where such team is established.

4 (2) Members of each quality review team shall be reimbursed by the
5 department for their actual and necessary expenses as provided in
6 sections 81-1174 to 81-1177.

7 (3)(a) Each quality review team shall (i) conduct onsite visits of 8 persons with developmental disabilities receiving residential services 9 funded in whole or in part by the department, (ii) assess the quality of 10 life of such persons receiving such services, (iii) make recommendations 11 to improve the quality of such services on behalf of such persons, and 12 (iv) perform such advisory or other duties as provided or approved in 13 rules and regulations adopted and promulgated by the department.

(b) In making quality of life assessments of persons receiving such 14 15 services, the quality review team shall consider the extent to which such persons (i) are able to exercise choice and control regarding the type 16 17 and provider of services they receive and the daily activities in which 18 they are engaged, (ii) are treated with respect and dignity by their 19 service providers, (iii) have access to necessary services, equipment, 20 and support, and (iv) are able to participate in activities and events 21 that maximize community integration and inclusion.

(4) Each quality review team shall provide quarterly and annual
 written reports to the department and service providers of visits
 conducted and assessments completed under this section.

Sec. 29. Sections 1, 2, 5, 6, 7, 9, 10, 11, 12, 13, 14, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, and 32 of this act become operative three calendar months after the adjournment of this legislative session. The other sections of this act become operative on their effective date.

30Sec. 30.Original sections 13-308, 28-372, 38-101, 38-123, 43-296,3168-949, 71-6038, 71-6039.06, 71-6603, 81-2210, 81-2273, 81-2274, 81-2275,

-31-

81-2279, 81-2281, 81-2283, 83-1212.01, and 83-1213, Reissue Revised
 Statutes of Nebraska, and sections 68-908, 68-909, 71-806, 71-810,
 71-1904, and 71-6039, Revised Statutes Cumulative Supplement, 2016, are
 repealed.

Sec. 31. Original sections 28-712, 28-712.01, and 43-4331, Reissue
Revised Statutes of Nebraska, and section 71-3405, Revised Statutes
Cumulative Supplement, 2016, are repealed.

8 Sec. 32. The following sections are outright repealed: Sections 9 81-2233, 81-2276, 81-2277, 81-2278, and 81-2280, Reissue Revised Statutes 10 of Nebraska.

11 Sec. 33. Since an emergency exists, this act takes effect when 12 passed and approved according to law.