## ONE HUNDRED EIGHTH LEGISLATURE - SECOND SESSION - 2024 COMMITTEE STATEMENT LB905

Hearing Date: Thursday February 01, 2024
Committee On: Health and Human Services

Introducer: Riepe

One Liner: Require the Department of Health and Human Services to submit a waiver or state plan

amendment for medical respite care

## **Roll Call Vote - Final Committee Action:**

Advanced to General File

**Vote Results:** 

Aye: 7 Senators Ballard, Cavanaugh, M., Day, Hansen, Hardin, Riepe, Walz

Nay: Absent:

**Present Not Voting:** 

**Testimony:** 

Proponents:Representing:Senator Merv RiepeOpening PresenterSheena HelgenbergerThe Wellbeing PartnersLinda TwomeySiena Francis House

Margaret Woeppel Nebraska Hospital Association

Opponents: Representing:

Neutral: Representing:

\* ADA Accommodation Written Testimony

## Summary of purpose and/or changes:

LB 905 requires DHHS to submit a Medicaid waiver or state plan amendment to designate medical respite facilities to reimburse services to homeless individuals. Also, DHHS is required, after approval of waiver or state plan amendment, to choose the medical respite facilities. Definitions are provided for adult in expansion population, homeless, medical respite care and medical respite facility. A reporting requirement is provided as well as rules and regulations.

Sec. 1: No later than January 1, 2025, DHHS is required to submit a Medicaid waiver or state plan amendment to the federal Centers for Medicare and Medicaid Services (CMS) to designate two medical respite facilities to reimburse for services to an individual who is homeless and an adult in the expansion population.

Definitions are provided.



Adult in the expansion population is an adult described in federal law (42 U.S.C. 1396(a)(10)(A)(i)(VIII) as under 65 years of age, not pregnant, not entitled/enrolled for benefits, and does not exceed 133% of the poverty line; and otherwise Medicaid eligible as a mandatory categorically needy individual.

Homeless has the same meaning as provided in federal law. The federal law defines homeless as an individual/family who lacks a fixed, regular, and adequate residence; is living in a supervised publicly or privately operated shelter; resided in shelter not meant for human habitation; will imminently lose their housing; has no subsequent residence identified; and lacks resources to obtain permanent housing (42 U.S.C. 11302).

Medical respite care means short-term housing with supportive medical services.

Medical respite facility means a residential facility that provides medical respite care to homeless individuals.

DHHS is required to choose two medical facilities best able to serve homeless individuals who are adults in the expansion population. The two medical respite facilities will consist of one in a city of the metropolitan class and one in a city of the primary class.

Once such waiver or state plan amendment is approved, DHHS is required to submit a report to the Health and Human Services Committee on or before November 30 of each year. The report shall provide the number of homeless individuals served at each facility, cost of the program, and amount of reduction in health care costs due to the program's implementation.

DHHS may adopt and promulgate rules and regulations to carry out this bill.

Ben Hansen, Chairperson