

LEGISLATURE OF NEBRASKA

ONE HUNDRED FIRST LEGISLATURE

SECOND SESSION

LEGISLATIVE BILL 1106

FINAL READING

Introduced by Nordquist, 7; Ashford, 20; Cook, 13; Council, 11;
Gloor, 35; Howard, 9; Mello, 5.

Read first time January 21, 2010

Committee: Health and Human Services

A BILL

1 FOR AN ACT relating to the Medical Assistance Act; to amend
2 sections 68-901, 68-907, and 68-908, Reissue Revised
3 Statutes of Nebraska; to define terms; to provide for
4 school-based health centers; to provide for School Health
5 Center Advisory Councils; to provide for amending or
6 seeking a waiver to the medicaid state plan; to harmonize
7 provisions; to repeal the original sections; and to
8 declare an emergency.
9 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 68-901, Reissue Revised Statutes of
2 Nebraska, is amended to read:

3 68-901 Sections 68-901 to 68-967 and sections 4 and 5 of
4 this act shall be known and may be cited as the Medical Assistance
5 Act.

6 Sec. 2. Section 68-907, Reissue Revised Statutes of
7 Nebraska, is amended to read:

8 68-907 For purposes of the Medical Assistance Act:

9 (1) Committee means the Health and Human Services
10 Committee of the Legislature;

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

13 (3) Medicaid Reform Plan means the Medicaid Reform Plan
14 submitted on December 1, 2005, pursuant to the Medicaid Reform Act
15 enacted pursuant to Laws 2005, LB 709;

16 (4) Medicaid state plan means the comprehensive written
17 document, developed and amended by the department and approved
18 by the federal Centers for Medicare and Medicaid Services, which
19 describes the nature and scope of the medical assistance program
20 and provides assurances that the department will administer the
21 program in compliance with federal requirements;

22 (5) Provider means a person providing health care or
23 related services under the medical assistance program; and

24 (6) School-based health center means a health center
25 that:

1 (a) Is located in or is adjacent to a school facility;

2 (b) Is organized through school, school district,
3 learning community, community, and provider relationships;

4 (c) Is administered by a sponsoring facility;

5 (d) Provides school-based health services onsite
6 during school hours to children and adolescents by health care
7 professionals in accordance with state and local laws, rules, and
8 regulations, established standards, and community practice;

9 (e) Does not perform abortion services or refer or
10 counsel for abortion services and does not dispense, prescribe, or
11 counsel for contraceptive drugs or devices; and

12 (f) Does not serve as a child's or an adolescent's
13 medical or dental home but augments and supports services provided
14 by the medical or dental home;

15 (7) School-based health services may include any
16 combination of the following as determined in partnership with a
17 sponsoring facility, the school district, and the community:

18 (a) Medical health;

19 (b) Behavioral and mental health;

20 (c) Preventive health; and

21 (d) Oral health;

22 (8) Sponsoring facility means:

23 (a) A hospital;

24 (b) A public health department as defined in section
25 71-1626;

1 (c) A federally qualified health center as defined in
2 section 1905(1)(2)(B) of the federal Social Security Act, 42 U.S.C.
3 1396d(1)(2)(B), as such act and section existed on January 1, 2010;

4 (d) A nonprofit health care entity whose mission is to
5 provide access to comprehensive primary health care services;

6 (e) A school or school district; or

7 (f) A program administered by the Indian Health Service
8 or the federal Bureau of Indian Affairs or operated by an
9 Indian tribe or tribal organization under the federal Indian
10 Self-Determination and Education Assistance Act, or an urban Indian
11 program under title V of the federal Indian Health Care Improvement
12 Act, as such acts existed on January 1, 2010; and

13 ~~(6)~~ (9) Waiver means the waiver of applicability to
14 the state of one or more provisions of federal law relating to
15 the medical assistance program based on an application by the
16 department and approval of such application by the federal Centers
17 for Medicare and Medicaid Services.

18 Sec. 3. Section 68-908, Reissue Revised Statutes of
19 Nebraska, is amended to read:

20 68-908 (1) The department shall administer the medical
21 assistance program.

22 (2) The department may (a) enter into contracts and
23 interagency agreements, (b) adopt and promulgate rules and
24 regulations, (c) adopt fee schedules, (d) apply for and implement
25 waivers and managed care plans for eligible recipients, and (e)

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

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

18 (4)(a) The department shall prepare an annual summary
19 and analysis of the medical assistance program for legislative
20 and public review, including, but not limited to, a description
21 of eligible recipients, covered services, provider reimbursement,
22 program trends and projections, program budget and expenditures,
23 the status of implementation of the Medicaid Reform Plan, and
24 recommendations for program changes.

25 (b) The department shall provide a draft report of such

1 summary and analysis to the Medicaid Reform Council no later than
2 September 15 of each year. The council shall conduct a public
3 meeting no later than October 1 of each year to discuss and receive
4 public comment regarding such report. The council shall provide
5 any comments and recommendations regarding such report in writing
6 to the department no later than November 1 of each year. The
7 department shall submit a final report of such summary and analysis
8 to the Governor, the Legislature, and the council no later than
9 December 1 of each year. Such final report shall include a response
10 to each written recommendation provided by the council.

11 Sec. 4. (1) To ensure that the interests of the school
12 district, community, and health care provider are reflected within
13 the policies, procedures, and scope of services of school-based
14 health centers, each school district shall establish a School
15 Health Center Advisory Council for each school in the district
16 hosting a school-based health center.

17 (2) The School Health Center Advisory Council shall
18 include:

19 (a) At least one representative of the school
20 administration or school district administration;

21 (b) At least one representative of the sponsoring
22 facility; and

23 (c) At least one parent recommended by a school
24 administrator or school district administrator and approved by a
25 majority vote of the school board. Any parent serving on a School

1 Health Center Advisory Council shall have at least one child
2 enrolled in the school through which the school-based health center
3 is organized.

4 (3) If another institution or organization sponsors the
5 school-based health center, at least one representative of each
6 sponsoring institution or organization shall be included on the
7 School Health Center Advisory Council.

8 (4) School Health Center Advisory Councils may also
9 include students enrolled in the school district through which
10 the school-based health center is organized. Any such students
11 must be appointed by a school administrator or school district
12 administrator.

13 Sec. 5. (1) On or before July 1, 2010, the department
14 shall submit an application to the Centers for Medicare and
15 Medicaid Services of the United States Department of Health and
16 Human Services, amending the medicaid state plan or seeking a
17 waiver thereto to provide for utilization of money to allow for
18 payments for treatment for children who are lawfully residing in
19 the United States and who are otherwise eligible for medicaid and
20 CHIP pursuant to the federal Children's Health Insurance Program
21 Reauthorization Act of 2009, Public Law 111-3, as such act existed
22 on January 1, 2010, and for treatment for pregnant women who
23 are lawfully residing in the United States and who are otherwise
24 eligible for medicaid pursuant to the federal Children's Health
25 Insurance Program Reauthorization Act of 2009, Public Law 111-3, as

1 such act existed on January 1, 2010.

2 (2) For purposes of this section, (a) CHIP means the
3 Children's Health Insurance Program established pursuant to 42
4 U.S.C. 1397aa et seq., and (b) medicaid means the program for
5 medical assistance established under 42 U.S.C. 1396 et seq., as
6 such sections existed on January 1, 2010.

7 Sec. 6. Original sections 68-901, 68-907, and 68-908,
8 Reissue Revised Statutes of Nebraska, are repealed.

9 Sec. 7. Since an emergency exists, this act takes effect
10 when passed and approved according to law.