

LEGISLATURE OF NEBRASKA
ONE HUNDRED FOURTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 988

Introduced by Cook, 13.

Read first time January 14, 2016

Committee: Appropriations

- 1 A BILL FOR AN ACT relating to the Health Care Homes for the Medically
- 2 Underserved Fund; to amend section 81-3140, Revised Statutes
- 3 Supplement, 2015; to change provisions relating to the distribution
- 4 of the fund; and to repeal the original section.
- 5 Be it enacted by the people of the State of Nebraska,

1 Sec. 1. Section 81-3140, Revised Statutes Supplement, 2015, is
2 amended to read:

3 81-3140 (1)(a) Twenty-five percent of the federal medicaid fraud
4 settlement funds accruing to Nebraska annually shall be deposited in the
5 Health Care Homes for the Medically Underserved Fund for distribution to
6 federally qualified health centers in Nebraska. Such funds shall be
7 distributed proportionately based on the unduplicated number of patients
8 served in the previous year by such federally qualified health centers as
9 reported through the uniform data system of the Health Resources and
10 Services Administration of the United States Department of Health and
11 Human Services.

12 (b) Five percent of the federal medicaid fraud settlement funds
13 accruing to Nebraska annually shall be deposited in the Health Care Homes
14 for the Medically Underserved Fund for distribution to federally
15 qualified health centers in Nebraska. Such funds shall be used for
16 persons receiving services under section 330(h), 330(i), or 333(g) of the
17 federal Public Health Service Act, 42 U.S.C. 254b, as such sections
18 existed on January 1, 2016.

19 (2) Funds distributed pursuant to subsection (1) of this section
20 shall be used for the following purposes:

21 (a) Hiring, training, certifying, and maintaining staff dedicated to
22 patient-centered chronic disease management, including, but not limited
23 to, case managers, health educators, social workers, outreach and
24 enrollment workers, and community health workers;

25 (b) Providing services, including, but not limited to, interpreter
26 services, transportation services, and social work assistance;

27 (c) Capital improvements, including, but not limited to, facility
28 expansion, leasing additional space, and furnishing, equipment, or
29 redesign of facilities to support patient-centered care;

30 (d) Medication management, including, but not limited to, clinical
31 pharmacy services, pharmacists, clinical pharmacists, technology for

1 monitoring and real-time notification, and care managers;

2 (e) Information technology, including, but not limited to,
3 telehealth services, analytics tools, patient registries, and updates to
4 electronic health records systems; and

5 (f) Reimbursement to health care providers, including, but not
6 limited to, physicians, nurse practitioners, dietitians, diabetic
7 educators, behavioral health providers, and oral health providers.

8 Sec. 2. Original section 81-3140, Revised Statutes Supplement,
9 2015, is repealed.