LEGISLATURE OF NEBRASKA

ONE HUNDRED FIRST LEGISLATURE

SECOND SESSION

LEGISLATIVE BILL 938

Introduced by Stuthman, 22.

Read first time January 14, 2010

Committee: Health and Human Services

A BILL

1	FOR AN	ACT relating to the Medical Assistance Act; to amend
2		sections 68-907 and 68-911, Reissue Revised Statutes of
3		Nebraska; to define a term; to provide for reimbursement
4		of federally qualified health centers as prescribed; to
5		harmonize provisions; to repeal the original sections;
6		and to declare an emergency.

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

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LB 938 LB 938 Section 1. Section 68-907, Reissue Revised Statutes of 1 2 Nebraska, is amended to read: 3 68-907 For purposes of the Medical Assistance Act: (1) Committee means the Health and Human Services 4 5 Committee of the Legislature; 6 (2) Department means the Department of Health and Human 7 Services; 8 (3) Federally qualified health center has the definition 9 found in section 1905(1)(2)(B) of the federal Social Security 10 Act, 42 U.S.C. 1396d(1)(2)(B), as such act and section existed on 11 January 1, 2010; 12 (3) (4) Medicaid Reform Plan means the Medicaid Reform 13 Plan submitted on December 1, 2005, pursuant to the Medicaid Reform Act enacted pursuant to Laws 2005, LB 709; 14 15 (4) (5) Medicaid state plan means the comprehensive 16 written document, developed and amended by the department and approved by the federal Centers for Medicare and Medicaid Services, 17 18 which describes the nature and scope of the medical assistance 19 program and provides assurances that the department will administer 20 the program in compliance with federal requirements; 21 (5) (6) Provider means a person providing health care or 22 related services under the medical assistance program; and 23 (6) (7) Waiver means the waiver of applicability to the state of one or more provisions of federal law relating to 24 25 the medical assistance program based on an application by the

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1	department and approval of such application by the federal Centers
2	for Medicare and Medicaid Services.
3	Sec. 2. Section 68-911, Reissue Revised Statutes of
4	Nebraska, is amended to read:
5	68-911 (1) Medical assistance shall include coverage for
6	health care and related services as required under Title XIX of the
7	federal Social Security Act, including, but not limited to:
8	(a) Inpatient and outpatient hospital services;
9	(b) Laboratory and X-ray services;
10	(c) Nursing facility services;
11	(d) Home health services;
12	(e) Nursing services;
13	(f) Clinic services;
14	(g) Physician services;
15	(h) Medical and surgical services of a dentist;
16	(i) Nurse practitioner services;
17	<pre>(j) Nurse midwife services;</pre>
18	(k) Pregnancy-related services;
19	(1) Medical supplies; and
20	(m) Early and periodic screening and diagnosis and
21	treatment services for children.
22	(2) In addition to coverage otherwise required under this
23	section, medical assistance may include coverage for health care
24	and related services as permitted but not required under Title XIX
25	of the federal Social Security Act, including, but not limited to:

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1	(a) Prescribed drugs;
2	(b) Intermediate care facilities for the mentally
3	retarded;
4	(c) Home and community-based services for aged persons
5	and persons with disabilities;
6	(d) Dental services;
7	(e) Rehabilitation services;
8	(f) Personal care services;
9	(g) Durable medical equipment;
10	(h) Medical transportation services;
11	(i) Vision-related services;
12	(j) Speech therapy services;
13	(k) Physical therapy services;
14	(1) Chiropractic services;
15	(m) Occupational therapy services;
16	(n) Optometric services;
17	(o) Podiatric services;
18	(p) Hospice services;
19	(q) Mental health and substance abuse services;
20	(r) Hearing screening services for newborn and infant
21	children; and
22	(s) Administrative expenses related to administrative
23	activities, including outreach services, provided by school
24	districts and educational service units to students who are
25	eligible or potentially eligible for medical assistance.

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1	(3) No later than July 1, 2009, the department
2	shall submit a state plan amendment or waiver to the federal
3	Centers for Medicare and Medicaid Services to provide coverage
4	under the medical assistance program for community-based secure
5	residential and subacute behavioral health services for all
6	eligible recipients, without regard to whether the recipient has
7	been ordered by a mental health board under the Nebraska Mental
8	Health Commitment Act to receive such services.
9	(4) No later than July 1, 2010, the department shall
10	submit a state plan amendment to the federal Centers for Medicare
11	and Medicaid Services to provide for payment for services of
12	federally qualified health centers, and shall actually pay
13	federally qualified health centers, in an amount, calculated on
14	a per-visit basis, that is equal to one hundred percent of the
15	average of the costs of the federally qualified health center of
16	furnishing such services which are reasonable and related to the
17	cost of furnishing such services, except that, if such amount
18	is less than the prospective payment system rate determined in
19	compliance with section 1902(bb) of the federal Society Security
20	Act, 42 U.S.C. 1396a(bb), as such act and section existed on
21	January 1, 2010, the department shall make payment to the federally
22	qualified health center at such prospective payment system rate.
23	Sec. 3. Original sections 68-907 and 68-911, Reissue
24	Revised Statutes of Nebraska, are repealed.

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25 Sec. 4. Since an emergency exists, this act takes effect

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1 when passed and approved according to law.