

AMENDMENTS TO LB1091

Introduced by Health and Human Services.

1 1. Strike the original sections and insert the following new
2 sections:

3 **Section 1.** Section 68-994, Revised Statutes Cumulative Supplement,
4 2024, is amended to read:

5 68-994 (1) Until July 1, 2023, the department shall not add long-
6 term care services and supports to the medicaid managed care program. For
7 purposes of this section, long-term care services and supports includes
8 services of a skilled nursing facility, a nursing facility, and an
9 assisted-living facility and home and community-based services.

10 (2) It is the intent of the Legislature that services provided to
11 long-term care clients with special needs be administered in a manner
12 that preserves continuity of care, program stability, and specialized
13 oversight.

14 (3)(a) The department shall exclude skilled nursing facility and
15 nursing facility services for long-term care clients with special needs
16 from enrollment with medicaid managed care organizations.

17 (b) For purposes of this section, (i) long-term care client with
18 special needs means a medicaid recipient whose medical or nursing needs
19 are complex or intensive and exceed the usual level of staff expertise
20 and services ordinarily provided in a nursing facility and (ii) provider
21 means a medicaid-approved provider of long-term care services for long-
22 term care clients with special needs.

23 (c) Skilled nursing facility and nursing facility services provided
24 to a long-term care client with special needs shall continue to be
25 administered and reimbursed through fee-for-service medicaid or another
26 delivery system authorized under state or federal law and not through
27 medicaid managed care organizations.

1 (d) The department shall not require a provider to enroll with a
2 managed care organization as a condition of eligibility to serve a long-
3 term care client with special needs.

4 (e) Nothing in this subsection shall prohibit the department from
5 requiring a managed care organization to coordinate benefits other than
6 skilled nursing facility or nursing facility services or provide
7 wraparound services for a long-term care client with special needs if
8 financial risk and utilization management for a provider is not
9 administered by the managed care organizations.

10 (f) The department shall amend medicaid managed care contracts as
11 necessary, including, but not limited to, revisions to enrollment
12 processes, no later than six months after the effective date of this act.

13 (g) The department may adopt and promulgate rules and regulations to
14 implement this subsection.

15 **Sec. 2.** Original section 68-994, Revised Statutes Cumulative
16 Supplement, 2024, is repealed.