

LEGISLATURE OF NEBRASKA
ONE HUNDRED NINTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 929

Introduced by Fredrickson, 20.

Read first time January 09, 2026

Committee: Health and Human Services

1 A BILL FOR AN ACT relating to the medical assistance program; to amend
2 section 68-912, Revised Statutes Supplement, 2025; to provide
3 requirements for the Department of Health and Human Services
4 relating to deductions, cost sharing, and similar charges for
5 medicaid enrollees as prescribed; and to repeal the original
6 section.

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

1 **Section 1.** Section 68-912, Revised Statutes Supplement, 2025, is
2 amended to read:

3 68-912 (1) Pursuant to this section, the The department may
4 establish (a) premiums, copayments, and deductibles for goods and
5 services provided under the medical assistance program, (b) limits on the
6 amount, duration, and scope of goods and services that recipients may
7 receive under the medical assistance program subject to subsection (5) of
8 this section, and (c) requirements for recipients of medical assistance
9 as a necessary condition for the continued receipt of such assistance,
10 including, but not limited to, active participation in care coordination
11 and appropriate disease management programs and activities.

12 (2) In establishing and limiting coverage for services under the
13 medical assistance program, the department shall consider (a) the effect
14 of such coverage and limitations on recipients of medical assistance and
15 medical assistance expenditures, (b) the public policy in section 68-905,
16 (c) the experience and outcomes of other states, (d) the nature and scope
17 of benchmark or benchmark-equivalent health insurance coverage as
18 recognized under federal law, and (e) other relevant factors as
19 determined by the department.

20 (3) Coverage for mandatory and optional services and limitations on
21 covered services as established by the department prior to July 1, 2006,
22 shall remain in effect until revised, amended, repealed, or nullified
23 pursuant to law. Any proposed reduction or expansion of services or
24 limitation of covered services by the department under this section shall
25 be subject to the review requirements of section 68-909.

26 (4) Except as otherwise provided in this subsection, proposed rules
27 and regulations under this section relating to the establishment of
28 premiums, copayments, or deductibles for eligible recipients or limits on
29 the amount, duration, or scope of covered services for eligible
30 recipients shall not become effective until the conclusion of the
31 earliest regular session of the Legislature in which there has been a

1 reasonable opportunity for legislative consideration of such rules and
2 regulations. This subsection does not apply to rules and regulations that
3 are (a) required by federal or state law, (b) related to a waiver in
4 which recipient participation is voluntary, or (c) proposed due to a loss
5 of federal matching funds relating to a particular covered service or
6 eligibility category. Legislative consideration includes, but is not
7 limited to, the introduction of a legislative bill, a legislative
8 resolution, or an amendment to pending legislation relating to such rules
9 and regulations.

10 (5) Any limitation on the amount, duration, or scope of goods and
11 services that recipients may receive under the medical assistance program
12 shall give full and deliberate consideration to the role of home health
13 services from private duty nurses in meeting the needs of a disabled
14 family member or disabled person.

15 (6) The department shall not require deductions, cost sharing,
16 including deductibles, co-insurance, or copayments, or similar charges
17 unless required by federal law.

18 (7) The department shall implement the deduction, cost sharing, or
19 similar charges required by 42 U.S.C. 1396o(k) no earlier than October 1,
20 2028, by:

21 (a) Setting the amount of the deduction, cost sharing, or similar
22 charges at the lowest amount permitted by federal law;

23 (b) Permitting managed care organizations under the medical
24 assistance program to pay the deduction, cost sharing, or similar charges
25 on behalf of medicaid enrollees as allowed under federal law; and

26 (c) Prohibiting providers from denying care, items, or services to
27 any enrollee if an enrollee does not pay a required deduction, cost
28 sharing, or similar charge.

29 **Sec. 2.** Original section 68-912, Revised Statutes Supplement, 2025,
30 is repealed.