

LEGISLATURE OF NEBRASKA  
ONE HUNDRED SIXTH LEGISLATURE  
FIRST SESSION

**LEGISLATIVE BILL 498**

Introduced by Wishart, 27; Cavanaugh, 6; Chambers, 11; Howard, 9; Hunt,  
8; McCollister, 20; Morfeld, 46; Pansing Brooks, 28.

Read first time January 22, 2019

Committee:

- 1 A BILL FOR AN ACT relating to the Medical Assistance Act; to amend
- 2 section 68-911, Reissue Revised Statutes of Nebraska; to require a
- 3 state plan amendment relating to coverage for family planning
- 4 services; and to repeal the original section.
- 5 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 68-911, Reissue Revised Statutes of Nebraska, is  
2 amended to read:

3 68-911 (1) Medical assistance shall include coverage for health care  
4 and related services as required under Title XIX of the federal Social  
5 Security Act, including, but not limited to:

- 6 (a) Inpatient and outpatient hospital services;
- 7 (b) Laboratory and X-ray services;
- 8 (c) Nursing facility services;
- 9 (d) Home health services;
- 10 (e) Nursing services;
- 11 (f) Clinic services;
- 12 (g) Physician services;
- 13 (h) Medical and surgical services of a dentist;
- 14 (i) Nurse practitioner services;
- 15 (j) Nurse midwife services;
- 16 (k) Pregnancy-related services;
- 17 (l) Medical supplies;
- 18 (m) Mental health and substance abuse services; and
- 19 (n) Early and periodic screening and diagnosis and treatment  
20 services for children which shall include both physical and behavioral  
21 health screening, diagnosis, and treatment services.

22 (2) In addition to coverage otherwise required under this section,  
23 medical assistance may include coverage for health care and related  
24 services as permitted but not required under Title XIX of the federal  
25 Social Security Act, including, but not limited to:

- 26 (a) Prescribed drugs;
- 27 (b) Intermediate care facilities for persons with developmental  
28 disabilities;
- 29 (c) Home and community-based services for aged persons and persons  
30 with disabilities;
- 31 (d) Dental services;

- 1 (e) Rehabilitation services;
- 2 (f) Personal care services;
- 3 (g) Durable medical equipment;
- 4 (h) Medical transportation services;
- 5 (i) Vision-related services;
- 6 (j) Speech therapy services;
- 7 (k) Physical therapy services;
- 8 (l) Chiropractic services;
- 9 (m) Occupational therapy services;
- 10 (n) Optometric services;
- 11 (o) Podiatric services;
- 12 (p) Hospice services;
- 13 (q) Mental health and substance abuse services;
- 14 (r) Hearing screening services for newborn and infant children; and
- 15 (s) Administrative expenses related to administrative activities,
- 16 including outreach services, provided by school districts and educational
- 17 service units to students who are eligible or potentially eligible for
- 18 medical assistance.

19 (3) No later than July 1, 2009, the department shall submit a state  
20 plan amendment or waiver to the federal Centers for Medicare and Medicaid  
21 Services to provide coverage under the medical assistance program for  
22 community-based secure residential and subacute behavioral health  
23 services for all eligible recipients, without regard to whether the  
24 recipient has been ordered by a mental health board under the Nebraska  
25 Mental Health Commitment Act to receive such services.

26 (4) On or before October 1, 2014, the department, after consultation  
27 with the State Department of Education, shall submit a state plan  
28 amendment to the federal Centers for Medicare and Medicaid Services, as  
29 necessary, to provide that the following are direct reimbursable services  
30 when provided by school districts as part of an individualized education  
31 program or an individualized family service plan: Early and periodic

1 screening, diagnosis, and treatment services for children; medical  
2 transportation services; mental health services; nursing services;  
3 occupational therapy services; personal care services; physical therapy  
4 services; rehabilitation services; speech therapy and other services for  
5 individuals with speech, hearing, or language disorders; and vision-  
6 related services.

7 (5) No later than September 1, 2019, the department shall submit a  
8 state plan amendment to the federal Centers for Medicare and Medicaid  
9 Services for the purpose of providing medical assistance for family  
10 planning services for persons whose income is at or below the income  
11 eligibility level set by the state as of January 1, 2019, for coverage  
12 for pregnant women, as permitted under section 1902(a)(10)(A)(ii)(XXI) of  
13 the federal Social Security Act, as amended, 42 U.S.C. 1396a(a)(10)(A)  
14 (ii)(XXI), as such act and section existed on January 1, 2019.

15 (6) For purposes of this section:

16 (a) Family planning services shall be consistent with 42 U.S.C.  
17 1396a(a)(10)(G)(XVI) and includes coverage, without imposition of  
18 utilization controls, of: All United States Food and Drug Administration-  
19 approved family planning methods, including the drug or device, insertion  
20 or provision, and removal; screening and treatment for preinvasive,  
21 cervical, and breast cancers, including cancer prevention vaccinations;  
22 interpersonal violence screening and prevention; and followup family  
23 planning appointments and counseling; and

24 (b) Family planning services includes the following related  
25 services: Medical diagnosis and treatment services that are provided in a  
26 family planning setting as part of or as a followup to a family planning  
27 visit, including, but not limited to, treatment of medical conditions  
28 routinely diagnosed during a family planning visit, such as treatment for  
29 a urinary tract infection or sexually transmitted infection; preventive  
30 services routinely provided during a family planning visit, such as the  
31 human papillomavirus vaccine; treatment of a major medical complication

1 resulting from a family planning visit; and the insertion of a long-  
2 acting reversible contraceptive immediately postdelivery as part of a  
3 family planning visit.

4 (7) No state funds shall be utilized to pay for elective abortion  
5 services.

6 Sec. 2. Original section 68-911, Reissue Revised Statutes of  
7 Nebraska, is repealed.