

LEGISLATURE OF NEBRASKA
ONE HUNDRED FIFTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 985

Introduced by Howard, 9; Crawford, 45; Hansen, 26; Krist, 10; Morfeld,
46; Pansing Brooks, 28; Vargas, 7; Wishart, 27.

Read first time January 11, 2018

Committee:

- 1 A BILL FOR AN ACT relating to the medical assistance program; to amend
- 2 section 68-972, Revised Statutes Cumulative Supplement, 2016; to
- 3 provide for state funding of prenatal care as prescribed; to
- 4 harmonize provisions; and to repeal the original section.
- 5 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 68-972, Revised Statutes Cumulative Supplement,
2 2016, is amended to read:

3 68-972 (1) The Legislature finds that:

4 (a) Title XXI of the federal Social Security Act, as amended, and
5 the rules and regulations promulgated pursuant thereto, authorize the
6 State Children's Health Insurance Program to assist state efforts to
7 initiate and expand provisions of child health assistance to uninsured,
8 low-income children;

9 (b) As defined in Title XXI of the federal Social Security Act, as
10 amended, and the rules and regulations promulgated pursuant thereto,
11 child means an individual under the age of nineteen years, including any
12 period of time from conception to birth, up to age nineteen years;

13 (c) Pursuant to Title XXI of the federal Social Security Act, as
14 amended, and the rules and regulations promulgated pursuant thereto,
15 eligibility can only be conferred to a targeted low-income child,
16 including an unborn child, under a separate child health program;

17 (d) Under Title XXI of the federal Social Security Act, as amended,
18 and the rules and regulations promulgated pursuant thereto, child health
19 assistance is available to benefit unborn children independent of the
20 mother's eligibility and immigration status;

21 (e) Under Title XXI of the federal Social Security Act, as amended,
22 and the rules and regulations promulgated pursuant thereto, child health
23 assistance expressly includes prenatal care that connects to the health
24 of the unborn child;

25 (f) Prenatal care has been clearly shown to reduce the likelihood of
26 premature delivery or low birth weight, both of which are associated with
27 a wide range of congenital disabilities as well as infant mortality, and
28 such care can detect a great number of serious and even life-threatening
29 disabilities, many of which can now be successfully treated in utero;

30 (g) Ensuring prenatal care for more children will significantly help
31 reduce infant mortality and morbidity rates and will spare many infants

1 from the burden of congenital disabilities and reduce the cost of
2 treating those congenital disabilities after birth;

3 (h) It is well established that access to prenatal care can improve
4 health outcomes during infancy as well as over a child's life. Since
5 healthy babies and children require less medical care than babies and
6 children with health problems, provision of prenatal care will result in
7 lower medical expenditures for the affected children in the long run; and

8 (i) Adopting federal law to provide for medical services related to
9 unborn children before birth will result in healthier infants, better
10 long-term child growth and development, and ultimate cost savings to the
11 state through reduced expenditures for high cost neonatal and potential
12 long-term medical rehabilitation.

13 (2) Such coverage shall be implemented through the creation of a
14 separate program as allowed under Title XXI of the federal Social
15 Security Act, as amended, and 42 C.F.R. 457.10, solely for the unborn
16 children of mothers who are ineligible for coverage under Title XIX of
17 the federal Social Security Act. If federal funding is no longer
18 available to cover the costs of the separate program created pursuant to
19 this section, the Legislature shall ensure that sufficient funds are
20 appropriated to cover the costs. All other aspects of the medical
21 assistance program relating to the State Children's Health Insurance
22 Program remain a medicaid expansion program as defined in 42 C.F.R.
23 457.10.

24 (3) The benefits provided pursuant to this section ~~subsection~~,
25 unless the recipient qualifies for coverage under Title XIX of the
26 federal Social Security Act, as amended, shall be prenatal care and
27 pregnancy-related services connected to the health of the unborn child,
28 including: (a) Professional fees for labor and delivery, including live
29 birth, fetal death, miscarriage, and ectopic pregnancy; (b)
30 pharmaceuticals and prescription vitamins; (c) outpatient hospital care;
31 (d) radiology, ultrasound, and other necessary imaging; (e) necessary

1 laboratory testing; (f) hospital costs related to labor and delivery; (g)
2 services related to conditions that could complicate the pregnancy,
3 including those for diagnosis or treatment of illness or medical
4 conditions that threaten the carrying of the unborn child to full term or
5 the safe delivery of the unborn child; and (h) other pregnancy-related
6 services approved by the department. Services not covered under this
7 section ~~subsection~~ include medical issues separate to the mother and
8 unrelated to pregnancy.

9 (4) The department shall receive the state and federal funds
10 appropriated or provided for benefits provided pursuant to this section.
11 Within thirty days after July 19, 2012, the department shall submit a
12 state plan amendment or waiver for approval by the federal Centers for
13 Medicare and Medicaid Services to provide coverage under the medical
14 assistance program to persons eligible under this section.

15 (5) Eligibility shall be determined under this section using an
16 income budgetary methodology that determines children's eligibility at no
17 greater than one hundred eighty-five percent of the Office of Management
18 and Budget income poverty guideline.

19 Sec. 2. Original section 68-972, Revised Statutes Cumulative
20 Supplement, 2016, is repealed.