

LEGISLATURE OF NEBRASKA
ONE HUNDRED EIGHTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 907

Introduced by Riepe, 12.

Read first time January 04, 2024

Committee:

- 1 A BILL FOR AN ACT relating to the Medical Assistance Act; to amend
- 2 section 68-911, Revised Statutes Supplement, 2023; to require
- 3 comprehensive coverage for treatment of obesity; and to repeal the
- 4 original section.
- 5 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 68-911, Revised Statutes Supplement, 2023, 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;
- 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 (o) Rural health clinic services; and
- 23 (p) Federally qualified health center services.

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

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

1 with disabilities;

2 (d) Dental services;

3 (e) Rehabilitation services;

4 (f) Personal care services;

5 (g) Durable medical equipment;

6 (h) Medical transportation services;

7 (i) Vision-related services;

8 (j) Speech therapy services;

9 (k) Physical therapy services;

10 (l) Chiropractic services;

11 (m) Occupational therapy services;

12 (n) Optometric services;

13 (o) Podiatric services;

14 (p) Hospice services;

15 (q) Mental health and substance abuse services;

16 (r) Hearing screening services for newborn and infant children; and

17 (s) Administrative expenses related to administrative activities,
18 including outreach services, provided by school districts and educational
19 service units to students who are eligible or potentially eligible for
20 medical assistance.

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

28 (4) On or before October 1, 2014, the department, after consultation
29 with the State Department of Education, shall submit a state plan
30 amendment to the federal Centers for Medicare and Medicaid Services, as
31 necessary, to provide that the following are direct reimbursable services

1 when provided by school districts as part of an individualized education
2 program or an individualized family service plan: Early and periodic
3 screening, diagnosis, and treatment services for children; medical
4 transportation services; mental health services; nursing services;
5 occupational therapy services; personal care services; physical therapy
6 services; rehabilitation services; speech therapy and other services for
7 individuals with speech, hearing, or language disorders; and vision-
8 related services.

9 (5) No later than January 1, 2023, the department shall provide
10 coverage for continuous glucose monitors under the medical assistance
11 program for all eligible recipients who have a prescription for such
12 device.

13 (6) On or before October 1, 2023, the department shall seek federal
14 approval for federal matching funds from the federal Centers for Medicare
15 and Medicaid Services through a state plan amendment or waiver to extend
16 postpartum coverage for beneficiaries from sixty days to at least six
17 months. Nothing in this subsection shall preclude the department from
18 submitting a state plan amendment for twelve months.

19 (7)(a) No later than XXX, the department shall provide comprehensive
20 coverage for treatment of obesity for medicaid recipients with an
21 indication for chronic weight management to include intensive behavioral
22 therapy and anti-obesity medication as approved by the federal Food and
23 Drug Administration.

24 (b) Nothing in this subsection shall preclude the department from
25 utilization management for treatment of obesity. All such medical
26 necessity determinations shall be made in the same manner as
27 determinations for the treatment of any other illness, condition, or
28 disorder covered under the medicaid state plan.

29 Sec. 2. Original section 68-911, Revised Statutes Supplement, 2023,
30 is repealed.