

E AND R AMENDMENTS TO LB 599

Introduced by Larson, 40, Chairman Enrollment and Review

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

3 Section 1. Section 4-110, Revised Statutes Cumulative
4 Supplement, 2010, is amended to read:

5 4-110 Verification of lawful presence in the United
6 States pursuant to section 4-108 is not required for:

7 (1) Any purpose for which lawful presence in the United
8 States is not restricted by law, ordinance, or regulation;

9 (2) Assistance for health care services and products,
10 not related to an organ transplant procedure, that are necessary
11 for the treatment of an emergency medical condition, including
12 emergency labor and delivery, manifesting itself by acute symptoms
13 of sufficient severity, including severe pain, such that the
14 absence of immediate medical attention could reasonably be expected
15 to result in (a) placing the patient's health in serious jeopardy,
16 (b) serious impairment to bodily functions, or (c) serious
17 dysfunction of any bodily organ or part;

18 (3) Short-term, noncash, in-kind emergency disaster
19 relief;

20 (4) Public health assistance for immunizations with
21 respect to diseases and for testing and treatment of symptoms
22 of communicable diseases, whether or not such symptoms are caused
23 by a communicable disease; or

1 (5) Programs, services, or assistance necessary for the
2 protection of life or safety, such as soup kitchens, crisis
3 counseling and intervention, and short-term shelter, which (a)
4 deliver in-kind services at the community level, including those
5 which deliver such services through public or private, nonprofit
6 agencies and (b) do not condition the provision of assistance, the
7 amount of assistance provided, or the cost of assistance provided
8 on the income or resources of the recipient.

9 The Legislature finds that unborn children do not have
10 immigration status and therefor are not within the scope of section
11 4-108. Prenatal care services available pursuant to section 68-915
12 and section 4 of this act to unborn children, whose eligibility is
13 independent of the mother's eligibility status, shall not be deemed
14 to be tied to the immigration status of the mother and therefor are
15 not included in the restrictions imposed by section 4-108.

16 Sec. 2. Section 68-901, Revised Statutes Supplement,
17 2011, is amended to read:

18 68-901 Sections 68-901 to 68-971 and section 4 of this
19 act shall be known and may be cited as the Medical Assistance Act.

20 Sec. 3. Section 68-915, Reissue Revised Statutes of
21 Nebraska, is amended to read:

22 68-915 The following persons shall be eligible for
23 medical assistance:

- 24 (1) Dependent children as defined in section 43-504;
25 (2) Aged, blind, and disabled persons as defined in
26 sections 68-1002 to 68-1005;
27 (3) Children under nineteen years of age who are eligible

1 under section 1905(a)(i) of the federal Social Security Act;

2 (4) Persons who are presumptively eligible as allowed
3 under sections 1920 and 1920B of the federal Social Security Act;

4 (5) Children under nineteen years of age with a family
5 income equal to or less than two hundred percent of the Office
6 of Management and Budget income poverty guideline, as allowed
7 under Title XIX and Title XXI of the federal Social Security Act,
8 without regard to resources, and pregnant women with a family
9 income equal to or less than one hundred eighty-five percent of
10 the Office of Management and Budget income poverty guideline,
11 as allowed under Title XIX and Title XXI of the federal Social
12 Security Act, without regard to resources. Children described
13 in this subdivision and subdivision (6) of this section shall
14 remain eligible for six consecutive months from the date of
15 initial eligibility prior to redetermination of eligibility. The
16 department may review eligibility monthly thereafter pursuant to
17 rules and regulations adopted and promulgated by the department.
18 The department may determine upon such review that a child is
19 ineligible for medical assistance if such child no longer meets
20 eligibility standards established by the department;

21 (6) For purposes of Title XIX of the federal Social
22 Security Act as provided in subdivision (5) of this section,
23 children with a family income as follows:

24 (a) Equal to or less than one hundred fifty percent of
25 the Office of Management and Budget income poverty guideline with
26 eligible children one year of age or younger;

27 (b) Equal to or less than one hundred thirty-three

1 percent of the Office of Management and Budget income poverty
2 guideline with eligible children over one year of age and under six
3 years of age; or

4 (c) Equal to or less than one hundred percent of the
5 Office of Management and Budget income poverty guideline with
6 eligible children six years of age or older and less than nineteen
7 years of age;

8 (7) Persons who are medically needy caretaker relatives
9 as allowed under 42 U.S.C. 1396d(a)(ii);

10 (8) As allowed under 42 U.S.C. 1396a(a)(10)(A)(ii),
11 disabled persons as defined in section 68-1005 with a family income
12 of less than two hundred fifty percent of the Office of Management
13 and Budget income poverty guideline and who, but for earnings in
14 excess of the limit established under 42 U.S.C. 1396d(q)(2)(B),
15 would be considered to be receiving federal Supplemental Security
16 Income. The department shall apply for a waiver to disregard any
17 unearned income that is contingent upon a trial work period in
18 applying the Supplemental Security Income standard. Such disabled
19 persons shall be subject to payment of premiums as a percentage of
20 family income beginning at not less than two hundred percent of
21 the Office of Management and Budget income poverty guideline. Such
22 premiums shall be graduated based on family income and shall not be
23 less than two percent or more than ten percent of family income;
24 and

25 (9) As allowed under 42 U.S.C. 1396a(a)(10)(A)(ii),
26 persons who:

27 (a) Have been screened for breast and cervical cancer

1 under the Centers for Disease Control and Prevention breast and
2 cervical cancer early detection program established under Title XV
3 of the federal Public Health Service Act, 42 U.S.C. 300k et seq.,
4 in accordance with the requirements of section 1504 of such act, 42
5 U.S.C. 300n, and who need treatment for breast or cervical cancer,
6 including precancerous and cancerous conditions of the breast or
7 cervix;

8 (b) Are not otherwise covered under creditable coverage
9 as defined in section 2701(c) of the federal Public Health Service
10 Act, 42 U.S.C. 300gg(c);

11 (c) Have not attained sixty-five years of age; and

12 (d) Are not eligible for medical assistance under any
13 mandatory categorically needy eligibility group; ~~and-~~

14 (10) Persons eligible for services described in
15 subsection (3) of section 4 of this act.

16 Eligibility Except as provided in section 4 of this act,
17 eligibility shall be determined under this section using an income
18 budgetary methodology that determines children's eligibility at
19 no greater than two hundred percent of the Office of Management
20 and Budget income poverty guideline and adult eligibility using
21 adult income standards no greater than the applicable categorical
22 eligibility standards established pursuant to state or federal
23 law. The department shall determine eligibility under this section
24 pursuant to such income budgetary methodology and subdivision
25 (1) (q) of section 68-1713.

26 Sec. 4. (1) The Legislature finds that:

27 (a) Title XXI of the federal Social Security Act,

1 as amended, and the rules and regulations promulgated pursuant
2 thereto, authorize the State Children's Health Insurance Program
3 to assist state efforts to initiate and expand provisions of child
4 health assistance to uninsured, low-income children;

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

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

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

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

24 (f) Prenatal care has been clearly shown to reduce the
25 likelihood of premature delivery or low birth weight, both of which
26 are associated with a wide range of congenital disabilities as well
27 as infant mortality, and such care can detect a great number of

1 serious and even life-threatening disabilities, many of which can
2 now be successfully treated in utero;

3 (g) Ensuring prenatal care for more children will
4 significantly help reduce infant mortality and morbidity rates and
5 will spare many infants from the burden of congenital disabilities
6 and reduce the cost of treating those congenital disabilities after
7 birth;

8 (h) It is well established that access to prenatal
9 care can improve health outcomes during infancy as well as over
10 a child's life. Since healthy babies and children require less
11 medical care than babies and children with health problems,
12 provisions of prenatal care will result in lower medical
13 expenditures for the affected children in the long run; and

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

19 (2) Such coverage shall be implemented through the
20 creation of a separate program as allowed under Title XXI of
21 the federal Social Security Act, as amended, and 42 C.F.R. 457.10,
22 solely for the unborn children of mothers who are ineligible
23 for coverage under Title XIX of the federal Social Security Act.
24 All other aspects of the medical assistance program relating to
25 the State Children's Health Insurance Program remain a medicaid
26 expansion program as defined in 42 C.F.R. 457.10.

27 (3) The benefits provided pursuant to this subsection,

1 unless the recipient qualifies for coverage under Title XIX of
2 the federal Social Security Act, as amended, shall be prenatal
3 care and pregnancy-related services connected to the health of
4 the unborn child, including: (a) Professional fees for labor and
5 delivery, including live birth, fetal death, miscarriage, and
6 ectopic pregnancy; (b) pharmaceuticals and prescription vitamins;
7 (c) outpatient hospital care; (d) radiology, ultrasound, and other
8 necessary imaging; (e) necessary laboratory testing; (f) hospital
9 costs related to labor and delivery; (g) services related to
10 conditions that could complicate the pregnancy, including those
11 for diagnosis or treatment of illness or medical conditions that
12 threaten the carrying of the unborn child to full term or the
13 safe delivery of the unborn child; and (h) other pregnancy-related
14 services approved by the department. Services not covered under
15 this subsection include medical issues separate to the mother and
16 unrelated to pregnancy.

17 (4) The department shall receive the state and federal
18 funds appropriated or provided for benefits provided pursuant to
19 this section. Within thirty days after the effective date of this
20 act, the department shall submit a state plan amendment or waiver
21 for approval by the federal Centers for Medicare and Medicaid
22 Services to provide coverage under the medical assistance program
23 to persons eligible under this section.

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

1 Sec. 5. Original section 68-915, Reissue Revised Statutes
2 of Nebraska, section 4-110, Revised Statutes Cumulative Supplement,
3 2010, and section 68-901, Revised Statutes Supplement, 2011, are
4 repealed.

5 Sec. 6. Since an emergency exists, this act takes effect
6 when passed and approved according to law.

7 2. On page 1, strike lines 2 through 6 and insert
8 "section 68-915, Reissue Revised Statutes of Nebraska, section
9 4-110, Revised Statutes Cumulative Supplement, 2010, and section
10 68-901, Revised Statutes Supplement, 2011; to change provisions
11 relating to verification of lawful presence; to provide for
12 coverage of certain children pursuant to the medical assistance
13 program; to state findings; to provide duties for the Department of
14 Health and Human Services; to harmonize provisions; to repeal the
15 original sections; and to declare an emergency."