

ONE HUNDRED THIRD LEGISLATURE - FIRST SESSION - 2013
COMMITTEE STATEMENT
LB556

Hearing Date: Thursday February 14, 2013

Committee On: Health and Human Services

Introducer: McGill

One Liner: Provide for telehealth services for children, change the medical assistance program, and provide duties for the Department of Health and Human Services

Roll Call Vote - Final Committee Action:

Advanced to General File with amendment(s)

Vote Results:

Aye: 7 Senators Campbell, Cook, Crawford, Gloor, Howard, Krist, Watermeier

Nay:

Absent:

Present Not Voting:

Proponents:

Senator Amanda McGill

Dr. Chris Kratochvil

Dr. Joseph Evans

Dr. Howard Liu

Terry Teachman

Mary Bahney

Cathleen Cafferty

Susan Lindblad

Joseph Kohout

Courtney VanDeVelde

Representing:

District #26

Self

Self

Self

Self

National Association of Social Workers, NE Chapter;
School Social Work Association of Nebraska

Hastings Public Schools

Hastings Public Schools

Nebraska Association of Regional Administrators

Voices for Children in Nebraska

Opponents:

Brenda Vosik

Vaughn Crowell

Regina Miller

Lani Bresler

Melane Williams-Smotherman

Janelle Heine

Christine S. Bates

Vivianne Chaumont

Representing:

Nebraska Family Forum

Self

Self

Self

Family Advocacy Movement

Self

Self

DHHS Division of Medicaid and Long-term Care

Neutral:

James Holt

Judy Zabel

Representing:

Self

Self

Summary of purpose and/or changes:

Under LB 556, the department, in collaboration with the State Department of Education, must adopt and promulgate rules and regulations providing for telehealth services for children through public schools. The rules and regulations

must provide a means for school personnel, physicians, and behavioral health professionals to communicate with each other regarding telehealth services for either medical or behavioral health conditions. The adult present when a child is receiving telehealth services at a public school site need not have medical training, except that a school nurse, a counselor, or another person familiar with the child's treatment plan must be able to attend to any emergencies.

In terms of telehealth within the public school environment, services may be received by a child regardless of the distance between the site and the nearest health care facility offering a comparable service. Moreover, telehealth services received by a child shall be eligible for coverage under the medical assistance program pursuant to Neb. Rev. Stat. 68-911. The transmission costs shall be reimbursed under the medical assistance program provided in Neb. Rev. Stat. 71-8506.

Pursuant to LB 556, each regional behavioral health authority created under Neb. Rev. Stat. 71-807 shall appoint an implementation and development team whose members shall include educators, social workers, parents, behavioral health professionals, and other persons interested in children's behavioral health professionals, and other persons interested in children's behavioral health and in expanding access to children's behavioral health services. LB 556 states the purposes of the implementation and development teams include, but are not limited to: advising the behavioral health regions, the department, and the State Department of Education on strategies for implementation of this act; providing education and training for educators on children's behavioral health; and identifying the strategies to include the family in behavioral health interventions for children. The implementation and development teams shall conduct public meetings and forums as necessary and must publicize their findings and determinations.

It is also the intent of the Legislature that behavioral health screenings be part of childhood physicals. The department shall provide training for health care professionals on providing child behavioral health screenings. The screenings shall be considered preventative services for purposes of the federal Patient Protection and Affordable Care Act.

The bill provides that the department shall establish rates for transmission cost reimbursement for telehealth consultations. LB 556 adds that the rates shall include reimbursement for all means of transmission, including secure wireless transmissions, which comply with HIPAA, and rules and regulations adopted by CMS.

Neb. Rev. Stat. 79-214 outlines the health care requirement screenings prior to admission into certain grade levels within the public school system. LB 556 amends the statute adding 9th grade and behavioral health screening to the physical examination required within six months prior to the entrance of the beginner grade and 7th grade, and for any transfer student.

Explanation of amendments:

The Committee amendment becomes the bill.

The Committee amendment requires the department to adopt rules and regs providing for telehealth services for children's behavioral health to be included in the Nebraska Telehealth Act. Included is a provision for an appropriately trained staff member or employee to be available in person to the child receiving telehealth services to provide for an urgent situation or emergency. The requirement can be waived by the parent. Also included is a provision that telehealth services for behavioral health services for children may be covered even if comparable services are within thirty miles of the child's place of residence.

The amendment provides for a pilot project for telehealth behavioral health services. Three pilot clinics shall be chosen, with at least one urban and one rural clinic. Parents of children in pediatric practices within the pilot clinics will be offered routine mental and behavior health screening for their child during required physical exams or at the request of a parent. Children identified through such screening as being at risk may be referred for further evaluation and treatment.

Consultation via telephone or telehealth shall be available to the pilot primary care practice and the child with the faculty and staff of the department of Child and Adolescent Psychiatry, Psychiatric Nursing, Developmental Pediatrics and the Munroe-Meyer Institute Psychology Department of the University of Nebraska Medical Center as needed to manage the care of children with mental or behavioral health issues for the pilot.

Data on the pilot program shall be collected and evaluated by the Interdisciplinary Center for Program Evaluation at the Munroe-Meyer Institute of the University of Nebraska Medical Center. Evaluation of the pilot program shall include data

as outlined in the amendment including referrals, treatment modality, program costs and financial impact on primary care practices. The pilot shall terminate two years after the effective date of the act.

Medicaid reimbursement shall include mental health and substance abuse services; early and periodic screening and diagnosis and service for Medicaid eligible children for physical and behavioral health screening, diagnosis and treatment services; and reimbursement for telehealth services as outlined.

Kathy Campbell, Chairperson