

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

December 21, 2016

Patrick O'Donnell
Clerk of the Legislature
State Capitol
Lincoln, NE 68509

Dear Mr. O'Donnell:

In the 2001 Legislative Session, LB 692 was passed into law. An annual \$50 million endowment for health care programs was created from the principal and investment income of the tobacco settlement fund and the Medicaid intergovernmental transfer (IGT) fund. Currently this endowment has increased to \$59.2 million annually for DHHS. The purpose of this endowment was to create an ongoing funding mechanism for health care in Nebraska.

LB 692 requires the Department of Health and Human Services to provide an annual report to the Legislature and the Governor detailing the use of funds appropriated under the Nebraska Health Care Funding Act and the outcomes achieved from such use.

The following report fulfills that statutory mandate. We appreciate the opportunity to share with the Governor and the Legislature the important work done as a result of LB 692.

Sincerely,

A handwritten signature in black ink, appearing to read "Courtney N. Phillips".

Courtney N. Phillips, MPA
Chief Executive Officer
Department of Health and Human Services

592016 LB 692 Report: Table on Appropriations, Uses and Outcomes

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
	Program 033			
Division of Public Health	Administration	\$13,688	Sec 95 - \$13,688 regulatory support for emergency medical technicians-intermediate and emergency medical technicians-paramedic licensing.	Used for base costs for licensing individual providers of emergency medical services. Base costs include expenses such as salaries, postage, e-commerce, equipment, and communications. Under this program there are currently 1,504 licensed paramedics and 97 licensed Advanced Emergency Medical Technicians (AEMT) & Emergency Medical Technician I (EMT-I), or basic EMT's. There are also 5,298 licensed Emergency Medical Technician (EMT) and 487 licensed Emergency Medical Responders (EMR).
	Smoking Cessation	\$6,000	Sec 95 - \$6,000 cost related to implementation of smoking cessation.	Used to enhance Tobacco Free Nebraska toll free Tobacco Quit line. In 2015 there were 2,692 callers.
	Parkinson's Disease Registry	\$26,000	Sec. 95 - Parkinson's Disease Registry	DHHS Office of Health Statistics uses these funds to collect, validate, and update the Parkinson's Disease Registry to monitor the incidence and mortality of Parkinson's Disease in Nebraska. Approximately 16,000 cases have been documented since the inception of the Registry. These funds are also used to process and complete data requests as well as promote the use of the registry data and enforce compliance with reporting to the Registry.
Division of Children & Family Services	Nebraska Lifespan Respite Services Program	\$404,643	Sec 95 - Respite Care Program in service areas.	This program continues to expand, enhance access and make progress. The Lifespan Respite Subsidy program is currently serving 334 individuals with special needs. Between July 1, 2015 and June 30, 2016, the Lifespan Respite Subsidy Program served 943 total individuals (up from 750 individuals in state fiscal year 2015). Clients eligible for other programs providing respite services are referred to those appropriate programs.
	Total Program 033	\$450,331		
	Program 179			
Division of Public Health	Administration	\$100,000	Sec 100 - \$100,000 each year for staffing and operating expenses.	Provide technical assistance to 18 local public health departments to provide the 10 essential services. <ol style="list-style-type: none"> 1. Monitor health status to identify and solve community health problems. 2. Diagnose and investigate health problems and health hazards in the community. 3. Inform, educate, and empower people about health issues. 4. Mobilize community partnerships and action to identify and solve health problems. 5. Develop policies and plans that support individual and community health efforts. 6. Enforce laws and regulations that protect health and ensure safety. 7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable. 8. Assure competent public and personal health care workforce. 9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services. 10. Research for new insights and innovative solutions to health problems.

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
	Office of Health Disparities and Health Equity	\$220,000 (*\$110,000 for each office)	Sec 100 - for operation a satellite office of minority health in the 2 nd and 3 rd congressional districts.	Two staff in each of the Congressional Districts 2 and 3 satellite offices are supported with these funds. These positions direct the activities necessary to support programs; coordinate services and activities with other community, state, local and federal agencies, health professionals, and service agencies in efforts to reduce health disparities and promote improved health among diverse populations within Congressional District 2 and 3.
	Total Program 179	\$320,000		
Division of Children & Family Services	Juvenile Service Operations	\$1,000,000	Sec 101 - Mental Health services to juvenile offenders under section 43-407.	<p><u>YRTC - Kearney</u></p> <ul style="list-style-type: none"> ❖ \$908,761 used for salaries/benefits for Clinical Psychologist, 10 Licensed and Provisional Mental Health Practitioners and 6 Youth Counselor Supervisors. ❖ Mental Health/Sexual Trauma Program: <ul style="list-style-type: none"> • Averaged 260 individual therapy sessions per month. • Mental health practitioners responded to an average of 14 hours of crisis situations per month. • Mental health practitioners responded to an average of 10 mental health referrals per month. • 32 youth from were admitted to Hastings Juvenile Chemical Dependency Program for long term chemical dependency treatment upon recommendation from YRTC-K. • Completed an average of 9 chemical dependency evaluations and facilitated 23 chemical dependency groups per month. • 361 psychiatric consults completed by the contracted medical doctor with 82 referrals to Richard Young Hospital. ❖ Youth Counselor I's made 4,082 contacts with parents and 3,839 contacts with Juvenile Service Officers, Family Permanency Specialists, and Probation Officers. ❖ Case Managers made 2,948 individual counseling sessions with youth. <ul style="list-style-type: none"> • 31 contacts with Guardians Ad Litem • 867 Family Team Meetings • 3,103 supervised recreation activities • 40 work projects <p><u>YRTC-Geneva:</u></p> <ul style="list-style-type: none"> ❖ \$ 89,147 used for salaries/benefits for two Mental Health Practitioners (LMHP) <i>Programs/Education:</i> <ul style="list-style-type: none"> • High risk mental health/behavior youth, special needs, trauma, review of youth who exhibits potential or actual suicidal behavior. Average monthly count 18 - youth served 25 (7/1/15 to 6/30/16). • Special needs outcomes working towards release. <ul style="list-style-type: none"> <u>Highlight</u> - more Individual specific programming, group, individual/family counseling, mental health focus/cognitive behavioral therapy in outcome strategies that includes learning, sharing with a goal of promoting change. 144 contacts, also review of youth who exhibits potential or actual suicidal behavior, mental health assessments, and classification reports. • Individual, group, family counseling, average youth monthly count of 7, youth served 14 (7/1/15-6/30/16). <ul style="list-style-type: none"> <u>Highlight</u> – more individual specific programming, individual/family counseling, mental health focus/cognitive behavioral therapy in outcome strategies that includes learning, sharing with a goal of promoting change.
	Total Program 250	\$1,000,000		

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
	Program 038			
Division of Behavioral Health	Mental Health and Substance Abuse	\$2,599,660 \$6,500,000	Sec 96 - Behavioral Health providers. Sec 96 - to be distributed to Six Regions based on a formula.	Continued payment of rates to BH providers for treatment and recovery services. Maintained rate increase established in original LB 692. Rates vary by service types. The Department of Behavioral Health and the Regions contract with providers for service and support networks of which there are varying providers, service types and rates. Continued services to consumers in communities (non-state hospital based).
		\$1,500,000	Sec. 96 - Emergency protective custody.	Crisis Center/hospitals reimbursed for days of service related to Emergency Protected Custody.
	Total Program 038	\$10,599,660		
	Program 347			
Division of Children & Family Services	Nebraska Lifespan Respite Services Program – Respite Subsidy	\$810,000	Sec. 103 - Aid in carrying out the NE Lifespan Respite Service payments to caregivers to purchase services.	This program continues to expand and enhance access and make progress. The Lifespan Respite Subsidy program is currently serving 334 individuals with special needs. Between July 1, 2015 and June 30, 2016, the Lifespan Respite Subsidy Program served 943 total individuals (up from 750 individuals in state fiscal year 2015). Clients eligible for other programs providing respite services are referred to those appropriate programs.
	Total Program 347	\$810,000		
Division of Medicaid and Long-Term Care	Medical Assistance	\$4,765,896	Sec 104 - Continuation of the behavioral health provider rate increase and behavior health provider rate increase for managed care, inpatient and residential treatment.	Continued provision of behavioral health for clients and participation of providers in the program. The provider rate increased 2.25%.
	Smoking Cessation	\$450,000	Sec 104 - State Plan Amendment covering tobacco use cessation in compliance to Title XIX of federal Social Security Act smoking cessation.	Clients receive medication and up to four counseling sessions to support up to two quit attempts per year. For FY 15, an average of 148 clients utilized 129 counseling sessions per month. An average of 158 prescriptions were filled monthly. Smoking cessation services rendered via common procedural terminology (CPT) codes 99406 and 99407 are reimbursed on a fee schedule. Code 99406- \$14.35- smoking and tobacco use cessation visit; intermediate greater than 3 min. Code 99407-\$24.60 Greater than 10 minutes.
	Total Program 348	\$5,215,896		

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
	Program 344			
Division of Medicaid and Long-Term Care	Child Health Insurance	\$6,835,700	Sec 102 - CHIP	Provides health care under the Children's Health Insurance Program.
	Total Program 344	\$6,835,700		
	Program 514			
	Health Aid	\$200,000	Sec 112 - Poison Control – UNMC	Sub award administered by UNMC.
	Total Program 514	\$200,000		
	Program 424			
Division of Developmental Disabilities	Developmental Disability Act	\$5,000,000	Sec 110 - State Aid/Services to Developmentally Disabled on waiting list.	Continued provision of developmental disability services to participants. In SFY16, the Division was able to fund an additional 45 participant's needs from the Waiting List.
	Total Program 424	\$5,000,000		
	Program 502			
Division of Public Health	Local Public Health	\$5,405,000	Sec 111 - Aid to local public health departments.	Local public health provide the three core functions of public health which include assessment, policy development and assurance and the 10 essential services. 1. Monitor health status to identify and solve community health problems. 2. Diagnose and investigate health problems and health hazards in the community. 3. Inform, educate, and empower people about health issues. 4. Mobilize community partnerships and action to identify and solve health problems. 5. Develop policies and plans that support individual and community health efforts. 6. Enforce laws and regulations that protect health and ensure safety. 7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable. 8. Assure competent public and personal health care workforce. 9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services. 10. Research for new insights and innovative solutions to health problems.
		\$1,349,000	Sec 111 - to be equally distributed among federally qualified health centers in the second congressional district for the purpose of implementing a minority health initiative.	Funding is equally distributed to One World Community Health Center and Charles Drew Health Center in Omaha, Nebraska. A few One World outcomes to note are that they had 87% of patients, 12 years and over, screened for depression and had a follow-up plan documented if patient considered depressed. Also, the percentage of patients 6-17 years with weight assessment and counseling for nutrition and physical activity increased from 80% to 82%. The percentage of adult patients with weight screening and follow-up increased from 51% to 65%. A few Charles Drew Health Center outcomes to note are that they allowed 17,602 uninsured people to receive medical services. Also 1,474 prenatal patients were provided services and 94.4% of prenatal patients delivered at or above the healthy birth weight.

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
		\$1,526,000	Sec 111 - for minority health services to be distributed to counties having a minority population equal to or exceeding 5% of the total population in the 1 st and 3 rd congressional districts.	There were 15 Minority Health Initiative (MHI) grants and one contract awarded in FY 2015 for two years focusing on the priority areas of obesity, cardiovascular, infant mortality, diabetes, cancer, asthma, chronic lung disease and unintentional injury.
		\$750,000	Sec 111 - to be distributed proportionally to federally qualified health centers based on the previous fiscal year's number of uninsured clients as reported on the Uniform Data System Report.	Funds distributed to community health centers. During the fiscal year July 1, 2015 to June 30, 2016, considerable progress was made in the provision of the three core functions and ten essential services of public health. Every health center receiving funding under LB 692 and LB 1060 demonstrated significant improvement in both number and complexity of activities and programs during this time period.
	Total Program 502	\$9,030,000		
	Program 623			
	623 Biomedical Research	\$14,000,000	Sec 118 - Biomedical Research	A contract and sub award for biomedical research were awarded to the Board of Regents on behalf of the University of Nebraska Medical Center and the University of Nebraska Lincoln in the amount of \$10,247,664; and to the Creighton University, Father Flanagan's Boys Home, Boys Town National research Hospital, and the Creighton University – Boys Town Healthcare Foundation in the amount of \$3,752,336.
	Total Program 623	\$14,000,000		
	Program 030			
Division of Public Health	Tobacco Prevention	\$2,570,000	Sec 93 - Tobacco Prevention and Control	Funding is used for tobacco prevention, reducing exposure to secondhand smoke, addressing tobacco-related health disparities and helping people quit tobacco. Program areas include the Nebraska Tobacco Quit line, an educational media component. Also program surveillance and evaluation, youth prevention efforts, and sub grants to nine counties for tobacco prevention and control work.
	Total Program 030	\$2,570,000		
	Program 354			
Division of Children & Family	Child Welfare Aid	\$2,734,444	Sec 106 - Child welfare	This is for rate increases that occurred when LB 692 was passed in 2001. This is just the continuation of funds. In 2012, LB 949 moved the funds from program 347 to Program 354. This money is used to continue to allow providers to have the rate increase they received in 2001.
	Total Program 354	\$2,734,444		
	Program 621			
Division of Public Health	Stem Cell Research	\$437,000	Sec 116 - Stem Cell Research	Five research grants were awarded. Three to the University of Nebraska at Lincoln, and two to the University of Nebraska Medical Center. Each grant was about \$87,000.
	Total Program 621	\$437,000		

DHHS Divisions	Program	FY16 Appropriations	Use Sections are from LB 657 (2015)	Outcomes
Other Agencies	Legislative Council	\$5,000	Sec 10 - Legislative Council (LB657); revised LB746A (2016)	Administered by Legislative Council.
	Attorney General	\$395,807	Sec 38 - Attorney General. Enforcement of tobacco settlement agreement.	Administered by Attorney General.
	Department of Revenue	\$316,482 \$250,000	Sec 68 - Department of Revenue. Audit and enforce provisions of the tobacco Master Settlement Agreement. Sec 74 - Department of Revenue Gambler Assistance	Administered by the Department of Revenue.
	Board of Regents of the University of Nebraska: UNMC	\$250,000	LB390A (2015) - University of Nebraska Medical Center for the Medical Cannabidiol Pilot Study	Administered by UNMC.
Total DHHS		\$59,203,031		
Total Other Agencies		\$1,217,289		
Undistributed		(\$70,320)		
Grand Total		\$60,350,000		