

AMENDMENTS TO LB752

Introduced by Blood, 3.

1 1. Strike sections 14 to 17 and insert the following new sections:

2 Sec. 14. (1) The Veterans' Health Task Force is created. The task
3 force shall consist of the following members:

4 (a) The chairperson of the Government, Military and Veterans Affairs
5 Committee of the Legislature or another member of the committee as such
6 chairperson's designee;

7 (b) One additional member of the Government, Military and Veterans
8 Affairs Committee of the Legislature designated by the chairperson of
9 such committee;

10 (c) The chairperson of the Health and Human Services Committee of
11 the Legislature or another member of the committee as such chairperson's
12 designee;

13 (d) One additional member of the Health and Human Services Committee
14 of the Legislature designated by the chairperson of such committee;

15 (e) One representative from the Department of Health and Human
16 Services designated by the chief executive officer of the Department of
17 Health and Human Services;

18 (f) One representative from the Department of Veterans' Affairs
19 designated by the Director of Veterans' Affairs; and

20 (g) One practicing psychologist in private practice appointed by the
21 chairperson of the Health and Human Services Committee of the
22 Legislature.

23 (2) Members of the task force shall serve without compensation but
24 shall be reimbursed for their actual and necessary expenses as provided
25 in sections 81-1174 to 81-1177.

26 (3) The chairperson of the Government, Military and Veterans Affairs
27 Committee of the Legislature or such chairperson's designee shall serve

1 as chairperson of the task force. Administrative and staff support for
2 the task force shall be provided by the Government, Military and Veterans
3 Affairs Committee of the Legislature and the Health and Human Services
4 Committee of the Legislature.

5 Sec. 15. (1) The Veterans' Health Task Force shall undertake a
6 study regarding development and implementation of a veteran health care
7 navigator program, administered by the Department of Veterans' Affairs,
8 as provided in this section.

9 (2) The program, if implemented, should provide for the hiring of a
10 suitable number of veteran health care navigators. Navigators should be
11 full-time employees of the department. Navigators should have direct
12 knowledge of the veteran communities they serve. The mission of the
13 navigators should be to:

14 (a) Increase access by veterans and their families to health care
15 coverage and services;

16 (b) Leverage existing resources and structures where veterans and
17 their families are likely to be found;

18 (c) Ensure that the needs of veterans and their families are
19 incorporated in all state efforts to expand access to affordable, quality
20 healthcare; and

21 (d) Ensure that veterans and their families have access to mental
22 health treatment, including for posttraumatic stress disorder,
23 depression, and suicide prevention.

24 (3) The program, if implemented, should provide the following duties
25 for veteran health care navigators:

26 (a) Identifying all federal and other health benefits, coverage, and
27 services available to veterans and their families;

28 (b) Coordinating with other local, state, and federal agencies and
29 departments, health care providers, and health insurance programs to help
30 veterans and their beneficiaries apply for coverage under such programs,
31 including helping veterans overcome barriers within the health care

1 system, to ensure enrollment in health plans and effective delivery and
2 coordination of health services;

3 (c) Ensuring that access to mental health coverage, services, and
4 treatment is a primary focus of their activities under the program;

5 (d) Connecting veterans to trained mental health care providers,
6 including those trained in veteran suicide prevention; and

7 (e) Carrying out such other duties as the Director of Veterans'
8 Affairs may assign to carry out the program.

9 (4) If the program is implemented, when carrying out their duties
10 under the program, the Department of Veterans' Affairs and the veteran
11 health care navigators should coordinate and collaborate with other
12 relevant local, state, and federal departments and agencies, including,
13 but not limited to, the behavioral health regions established in section
14 71-807, county veterans service officers, and the Department of Health
15 and Human Services.

16 (5) As part of the study required by this section, the Veterans'
17 Health Task Force shall also conduct an examination of all existing
18 health care and veterans' programs to:

19 (a) Evaluate whether the needs of veterans and their families are
20 met by such programs;

21 (b) Determine any necessary and appropriate steps that could be
22 taken to increase access to affordable, quality health care, including by
23 rule and regulation pursuant to existing statutory authority or through
24 new legislation; and

25 (c) Evaluate how the veteran health care navigator program proposed
26 under this section could improve access to affordable, quality health
27 care for veterans and their families.

28 (6) On or before January 1, 2022, the Veterans' Health Task Force
29 shall electronically submit a report to the Legislature regarding
30 development and implementation of a veteran health care navigator program
31 as provided in this section. The report shall include any recommended

1 legislation necessary to implement the program. The report shall also
2 summarize the task force's findings from the examination under subsection
3 (5) of this section.

4 Sec. 16. (1) The Veterans' Health Task Force shall conduct an
5 analysis of the impact medicaid expansion has had on veterans and their
6 families.

7 (2) On or before January 1, 2022, the task force shall
8 electronically submit a report to the Legislature summarizing its
9 findings under this section. The report shall include any changes made or
10 proposed to be made through rule and regulation and any recommended
11 legislation.

12 Sec. 17. (1) The Veterans' Health Task Force shall undertake a study
13 regarding development and implementation of a program to reduce barriers
14 to access to mental health services and treatment for veterans and their
15 families. If implemented, the program should provide for:

16 (a) Identifying structural and logistical barriers to accessing
17 treatment, including perceived stigma, long travel distances to receive
18 care, and any other barriers;

19 (b) Resolving all barriers identified in subdivision (1)(a) of this
20 section that can be resolved without legislative or budgetary action,
21 including through increased coordination between departments, nonprofit
22 organizations, service providers, and the federal government, application
23 for and use of private and federal grants, and any other actions;

24 (c) Enhancing and strengthening veteran suicide prevention programs
25 in keeping with proven best practices and research, including by:

26 (i) Identifying and applying for federal and private grants focused
27 on veteran suicide prevention;

28 (ii) Coordinating local, state, federal, and nonprofit programs that
29 include community-based approaches for at-risk veterans and veterans at
30 large;

31 (iii) Providing technical assistance to communities to develop

1 strategic plans to reduce veteran suicide, including through coordination
2 and participation by local leaders, faith communities, schools,
3 workplaces, and other stakeholders; and

4 (iv) Evaluating community strategic plans within Nebraska and
5 disseminating findings and best practices to optimize the impact of
6 efforts by all partners and stakeholders;

7 (d) Creating a centralized provider data base which identifies, by
8 region, mental health providers with the expertise and ability to assist
9 veterans and their families. The data base should highlight providers
10 with training or experience in the prevention and treatment of veteran
11 suicide;

12 (e) Using the report created by the Department of Health and Human
13 Services under section 13 of this act to compile data on the locations of
14 residency and death, length and location of service, branch of service,
15 and occupation and industry or business of each veteran included in such
16 report;

17 (f) Using the compilation provided for in subdivision (1)(e) of this
18 section in the Department of Veterans' Affairs' efforts to prevent
19 veteran suicides; and

20 (g) Identifying evidence-based best practices to increase awareness
21 of veteran suicide prevention hotlines in Nebraska and elsewhere and
22 other crisis resources with proven effectiveness to reduce veteran
23 suicide.

24 (2) If the program is implemented, when carrying out its duties
25 under the program, the Department of Veterans' Affairs should coordinate
26 and consult with:

27 (a) Other relevant local, state, and federal agencies and
28 departments, including, but not limited to, the behavioral health regions
29 established in section 71-807, county veterans service officers, and the
30 Department of Health and Human Services;

31 (b) Nonprofit organizations and service providers; and

1 (c) Other localities and cities that have effective mental health
2 treatment and prevention systems.

3 (3) On or before January 1, 2022, the Veterans' Heath Task Force
4 shall electronically submit a report to the Legislature regarding
5 development and implementation of the program to reduce barriers to
6 access to mental health services and treatment for veterans and their
7 families. The report shall include any recommended legislation necessary
8 to implement the program.

9 Sec. 18. (1) On or before January 1, 2022, the Veterans' Health Task
10 Force shall develop a continuing education course for mental health
11 providers in Nebraska to obtain expertise in veteran suicide assessment,
12 prevention, treatment, and risk management. The course shall incorporate
13 best practices and research from the United States Department of
14 Veterans' Affairs and service providers in Nebraska and elsewhere. The
15 course shall be made available at no cost to health care providers in
16 areas of the state the Department of Veterans' Affairs has identified as
17 lacking sufficient trained mental health care providers.

18 (2) On or before January 1, 2022, the Veterans' Heath Task Force
19 shall electronically submit a report to the Legislature regarding the
20 continuing education course developed under this section.

21 (3) On or before January 1, 2023, the Veterans' Heath Task Force
22 shall electronically submit a report to the Legislature regarding
23 utilization of the course by mental health providers.

24 2. Renumber the remaining sections accordingly.