

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

January 1, 2021

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

RE: Nebraska Health Care Funding Report

Dear Mr. O'Donnell:

The Nebraska Legislature passed LB 692 into law in the 2001 legislative session. This legislation provided for an annual \$50 million endowment for health care programs through the principal and investment income of the tobacco settlement fund and the Medicaid intergovernmental transfer (IGT) fund. Currently, this endowment has increased to \$63.1 million annually for DHHS. The purpose of this endowment was to create an ongoing funding mechanism for health care in Nebraska.

Nebraska Revised Statutes 71-7606 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 for FY2020. We appreciate the opportunity to share with the Governor and the Legislature the important work done as a result of this law.

Sincerely,

A handwritten signature in blue ink, appearing to read "Dannette R. Smith".

Dannette R. Smith, MSW
Chief Executive Officer
Nebraska Department of Health and Human Services

FY2020 LB 692 Report: Table on Appropriations, Uses and Outcomes

DHHS Divisions	Program	FY20 Appropriations	Use Sections are from LB 294 (2019)	Outcomes
Division of Public Health	Program 033 Administration	\$13,688	Sec 92- \$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 1,630 paramedics, 29 Advanced Emergency Medical Technicians (AEMT), 52 Emergency Medical Technician I (EMT-I), 5,002 Emergency Medical Technician (EMT) and 397 Emergency Medical Responders (EMR) that are licensed.
	Smoking Cessation	\$6,000	Sec 92 - \$6,000 cost related to implementation of smoking cessation.	Used to enhance the Nebraska Tobacco Quit line, provided through Tobacco Free Nebraska. In 2019 there were 3,836 callers.
	Parkinson's Disease Registry	\$26,000	Sec. 92 - 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.
	Administration	\$29,680	Sec 92. Assisted Living	<ul style="list-style-type: none"> • Design of a Parkinson's Registry Electronic data platform is completed. Plans underway with NEHLI to onboard providers and facilities to report cases electronically. • Collaboration continues to establish standard data requirements for PD with the Centers for Disease Control and Prevention (CDC), the Council of State Territorial Epidemiologists (CSTE), other States and the Michael J. Fox Foundation. • Duplicative language removed from rules and regulations and data elements were revised as requested by the Parkinson's Disease Advisory Team. <p style="text-align: center;">Use of Registry Data:</p> <ul style="list-style-type: none"> • Several well water studies are using the PD database information • A study of occupational correlation with the development of PD • Linking data from the PD database with the DHHS cancer and traumatic brain injury databases, the state death file, and hospital discharge data for research. A new surveyor was hired to conduct surveys regarding investigations of assisted living facilities
	Administration	\$100,000	Sec 92 - \$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.

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				<p>5. Develop policies and plans that support individual and community health efforts.</p> <p>6. Enforce laws and regulations that protect health and ensure safety.</p> <p>7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.</p> <p>8. Assure competent public and personal health care workforce.</p> <p>9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.</p> <p>10. Research for new insights and innovative solutions to health problems.</p>
	Office of Health Disparities and Health Equity	\$220,000 (*\$110,000 for each office)	Sec 92 – for operation a satellite office of minority health in the 2 nd and 3 rd congressional districts	Satellite office staff coordinated Minority Health Initiative projects, provided guidance, and technical assistance to 17 grantees. Minority Health Initiative grantees, worked with community partners to improve access to health services, provide health education, and reduce the risk of chronic disease through various health programming with the goal of improving health outcomes for racial and ethnic minority populations in Congressional Districts 2 and 3.
Division of Children & Family Services	Nebraska Lifespan Respite Services Program	\$404,643	Sec 92 - Respite Care Program in service areas.	The program builds upon the existing infrastructure of the Nebraska Respite Network to provide respite services across the state. The Nebraska Respite Network is a statewide system that houses and coordinates information regarding respite resources. The network recruits respite providers, offers training for providers and consumers, provides information and referrals regarding respite resources and services, markets availability and need for respite, and matches families with appropriate respite providers. Additionally, the Nebraska Respite Network extends the reach of the Lifespan Respite program by further implementing statutory requirements, developing and expanding access to resources, and enhancing partnerships in local committees
Medicaid and long Term Care	Aging	\$321,182	Sec 92 – Aging and Disability Resource Center	Aging and Disability Resource Center (ADRC) support.
Developmental Disabilities	Developmental Disabilities Admin	\$43,570	LB 570A Sec 3	Funds are used to pay for a portion of the contract for the Technical Assistance Collaborative (TAC) for activities related to the Olmstead Plan. Nebraska's Olmstead Plan is a framework designed to provide a solid structure for a flexible plan to ensure that laws, regulations, and future planning are consistent with the principles of the Olmstead decision.
	Total Program 033	\$1,164,763		
Facilities	Program 250 Juvenile Service Operations	\$1,000,000	Sec 97 – Mental Health services to juvenile offenders under section 43-407.	<p>YRTC - Kearney</p> <p>❖ \$947,776 used for salaries/benefits for Clinical Psychologist, 10 Licensed and Provisional Mental Health Practitioners and Supervisor, and 6 Living Unit/Case Manager Supervisors</p>

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				<ul style="list-style-type: none"> ❖ Female youth from YRTC-Geneva were transferred to YRTC-Kearney on August 19, 2019 with both Geneva and Kearney staff providing services to these youth after that date. The data provided below includes services to both male and female youth. ❖ Mental Health Services: <ul style="list-style-type: none"> • An average of 84 youth were provided with mental health therapy services each month • 13 male youth were admitted to Hastings Juvenile Chemical Dependency Program for long term chemical dependency treatment upon recommendation from YRTC-K. • An average of 34 youth were provided with substance abuse treatment services each month. • 78% of youth admitted to YRTC-K had substance use issues significant enough to warrant substance use treatment. • LMHP's provide substance abuse treatment using the Adolescent Community Reinforcement Approach (A-CRA), a top evidence-based juvenile substance abuse treatment program. Two therapists are trained A-CRA supervisors, allowing them to train and certify new clinicians and provide ongoing supervision. • 114.75 hours of contractual psychiatric services were provided to the female youth this year by Boys Town National Research Hospital. • 40 hours of contractual psychiatric services were provided to the male youth by Boys Town National Research Hospital. • 38 male youth were provided psychiatric services by local psychiatrists and PA's. • Mental health medication management was provided by the YRTC-K contracted doctors for an average of 21 youth each month. ❖ Case Managers made 4,014 contacts with parents and 3,342 contacts with Juvenile Service Officers, Family Permanency Specialists, and Probation Officers. <p><u>YRTC-Geneva</u></p> <ul style="list-style-type: none"> ❖ \$27,690 used for salaries/benefits for Licensed Mental Health Practitioners (LMHP) ❖ Mental Health Services: <ul style="list-style-type: none"> • A telehealth contractual LMHP provided 84 hours of mental health services to the female youth during this year. Prior to that time, mental health services were provided by an LMHP at Geneva, and by Kearney LMHP's who traveled to Geneva to provide services.
	Total Program 250	\$1,000,000		

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Division of Behavioral Health	Program 038			
	Mental Health and Substance Abuse	\$2,599,660	Sec 93 - Behavioral Health providers.	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.
		\$6,500,000	Sec 93 - to be distributed to Six Regions based on a formula.	Continued services to consumers in communities (non-state hospital based).
	Total Program 038	\$1,500,000	Sec. 97 - Emergency protective custody.	Crisis Center/hospitals reimbursed for days of service related to Emergency Protected Custody.
	Total Program 038	\$10,599,660		
Division of Children & Family Services	Program 347			
	Nebraska Lifespan Respite Services Program - Respite Subsidy	\$810,000	Sec. 99 - Aid in carrying out the NE Lifespan Respite Service payments to caregivers to purchase services.	The Lifespan Respite program provides a short-term break to the primary family caregiver from the demands of ongoing care for youth and individuals with special needs. The program serves eligible people of all ages and disabilities or healthcare conditions. The program continues to focus efforts to increase utilization and continue to meet the needs of Nebraskans In FY 2020, 64% of the total cases that applied for respite services were under the age of 19 years old. The Lifespan Respite Subsidy program received applications for 620 total individuals throughout the fiscal year. This was a slight decrease from FY 2019, as there were 699 individuals who applied that year. At the end of the fiscal year, there were 233 open cases of individuals that were utilizing the respite services. The program provides \$125 per participant, per month for respite services. Additionally, a client or their caregiver may contact DHHS to request additional services utilizing exceptional circumstance funding (crisis respite). The Lifespan Respite Subsidy program utilized \$444,596.72 of the allocated funds to provide services to the eligible cases. There is evidence of an increase in the level of need of respite clients resulting in a higher amount of additional assistance through the exceptional circumstances. In FY20, \$109,308.05 of the total utilized funds was used for exceptional circumstances.
	Total Program 347	\$810,000		The Lifespan Respite program will only provide respite services that are not covered through Medicaid services or other programs. The Respite Coordinators make necessary referrals when clients are eligible for other programs that provide respite.

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DHHS Divisions	Program	FY20 Appropriations	Use Sections are from LB 294 (2019)	Outcomes
Division of Medicaid and Long-Term Care	Program 348 Medical Assistance	\$4,765,896	Sec 100 - Continuation of the behavioral health provider rate increase and behavior health provider rate increase for managed care, inpatient and residential treatment.	For SFY20 behavioral health providers received a 4% rate increase.
	Smoking Cessation	\$450,000	Sec 100 - State Plan Amendment covering tobacco use cessation in compliance to Title XIX of federal Social Security Act smoking cessation.	Provides funding for clients to receive medication and up to four counseling sessions to support up to two quit attempts per year.
	Total Program 348	\$5,215,896		
Division of Medicaid and Long-Term Care	Program 344 Child Health Insurance	\$6,835,700	Sec 98 - CHIP	Provides health care under the Children's Health Insurance Program.
	Total Program 344	\$6,835,700		
Division of Public Health	Program 514 Health Aid	\$200,000	Sec 108 - Poison Control - UNMMC	Sub-award administered by UNMMC. Provide 24 hour telephone access to the Nebraska Regional Poison Center.
	Health Aid	\$250,000	Sec. 108 - Cannabidiol Pilot Study	Sub-award administered by UNMMC. <ul style="list-style-type: none"> Funding ended 6/30/19 UNMMC submitted final legislative report to the legislature on 9/15/19 DHHS began processing the last invoice on 10/29/19
	Total Program 514	\$450,000		
Division of Developmental Disabilities	Program 424 Developmental Disability Act	\$5,000,000	Sec 106 - State Aid/Services to Developmentally Disabled on waiting list.	Continued provision of developmental disability services to participants. In SFY20, the Division was able to fund an additional 102 participant's needs on the comprehensive waiver per funding priorities in Neb. Rev. Stat. 83-1216.
	Total Program 424	\$5,000,000		

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Division of Public Health	Program 502 Local Public Health	\$5,605,000	Sec 107 - 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. <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.
		\$1,349,000	Sec 107 - 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 among Charles Drew Community and One World community health centers funded through Federal Program 330, Public Law 104-299, of the federal health centers Consolidation Act of 1996 <p>A few outcomes for Charles Drew include:</p> <ul style="list-style-type: none"> • 299 (39%) of adult patients, aged 18 years and over, with a diagnosis of Type I or Type II diabetes reached a A1c level of less than <9% • 1,101 (53%) of adult patients, aged 18 -85 years, with a diagnosis of hypertension continued to maintain control of their hypertension (BP less than 140/90). • 77% of women initiated their prenatal care during the first trimester; the percentage of births less than <2500 grams increased from 4.9% to 6%. • 51.5% percent of patients 3-17 years of age received weight assessment and counseling for nutrition and physical activity. • 77.7% of adult patients diagnosed with tobacco use were prescribed cessation medication. <p>A few One World outcomes include:</p> <ul style="list-style-type: none"> • 1,760 minority patients had their hypertension in control. • 1,845 minority patients diagnosed with diabetes achieved A1C results below <9%. • 14,244 children received the appropriate immunizations before their second birthday. • 97.6% of adult patients were screened and counseled for tobacco use. • 93.7% of patients aged 12 and older were screened for depression and a follow-up plan was provided as appropriate. • 5,941 patients received pediatric dental services.

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		\$1,526,000	Sec 107 - 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.	19 organizations were provided funding through the Minority Health Initiative (MHI) program for FY 2017. Projects primarily focused on the priority areas of obesity, cardiovascular, and diabetes. Activities of the projects included 6,920 minorities served across the state, 5,587 referrals to additional services were provided, 647 were linked to a medical home, 6,757 screening were provided, 1,646 individuals participated in health education, and 630 individuals enrolled into a diabetes prevention, chronic disease self-management or education program. The use of evidence-based strategies used by projects resulted in outcome of the projects included 204 individuals improved their diabetes A1c rates, 395 individuals improved their blood pressure, and 407 individuals lost weight with 156 of those individuals maintaining their weight loss.
		\$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 are used to help provide health care services to the uninsured as Community Health Centers serve all people regardless of ability to pay. In the previous year 53,886 people without insurance were served by the seven Community Health Centers.
	Total Program 502	\$9,230,000		
	Program 571			
Division of Medicaid and Long Term Care	Program 571	\$613,912	Sec. 110	Aging and Disability Resource Center (ADRC) support.
	Total Program 571	\$613,912		
	Program 623			
	623 Biomedical Research	\$15,000,000	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	\$15,000,000		
	Program 030			
Division of Public Health	Tobacco Prevention	\$2,570,000	Sec 90 - 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 areas for tobacco prevention and control work.
	Total Program 030	\$2,570,000		

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Division of Children & Family	<u>Program 354</u>			
	Child Welfare Aid	\$2,734,444	Sec 102 - Child welfare	Funds are used to pay for direct services provided to children and families involved in the child welfare system. Providers are contracted to provide direct services to children and families and are reimbursed utilizing these funds. Services include, but are not limited to, out-of-home care; parenting time; transportation; family support; rent; utilities
	Total Program 354	\$2,734,444		
	<u>Program 621</u>			
Division of Public Health	Stem Cell Research	\$450,000	Sec 111 - Stem Cell Research	Five research grants were awarded. Two grants awarded to Creighton University, each for \$110,000. Three grants awarded to the University of Nebraska Medical Center: one for \$110,000, one for \$57,954, and one for \$48,546.
	Total Program 621	\$450,000		
Total DHHS		\$61,424,375		
Other Agencies	Legislative Council	\$75,000	Sec. 10, Legislative Council	
	Attorney General	\$595,807	Sec 39 - Attorney General Enforcement of tobacco settlement agreement (LB327)	Administered by Attorney General.
	Department of Revenue	\$316,482	Sec 69 - Department of Revenue. Audit and enforce provisions of the tobacco Master Settlement Agreement. (LB327)	Administered by the Department of Revenue.
		\$250,000	Sec 76 - Department of Revenue Gambler Assistance (LB327)	
	Children's Commission	\$179,779	LB 600 Sec. 4(7)	
	Telecomm Relay System	\$300,000	LB 641 Sec. 2	
Total Other Agencies		\$1,718,726		
Undistributed		(\$2,491,443)	Note: negative value indicates obligation in excess of statutory transfer	
Grand Total		\$63,141,443	FY19 Statutory Transfer (71-7611 and 77-2602) was \$62,850,000	