

LEGISLATURE OF NEBRASKA  
ONE HUNDRED EIGHTH LEGISLATURE  
SECOND SESSION

**LEGISLATIVE BILL 933**

Introduced by Bosn, 25.

Read first time January 04, 2024

Committee: Health and Human Services

- 1 A BILL FOR AN ACT relating to the Medical Assistance Act; to amend
- 2 section 68-911, Revised Statutes Supplement, 2023; to change
- 3 coverage requirements for continuous glucose monitors; and to repeal
- 4 the original section.
- 5 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 68-911, Revised Statutes Supplement, 2023, is  
2 amended to read:

3 68-911 (1) Medical assistance shall include coverage for health care  
4 and related services as required under Title XIX of the federal Social  
5 Security Act, including, but not limited to:

6 (a) Inpatient and outpatient hospital services;

7 (b) Laboratory and X-ray services;

8 (c) Nursing facility services;

9 (d) Home health services;

10 (e) Nursing services;

11 (f) Clinic services;

12 (g) Physician services;

13 (h) Medical and surgical services of a dentist;

14 (i) Nurse practitioner services;

15 (j) Nurse midwife services;

16 (k) Pregnancy-related services;

17 (l) Medical supplies;

18 (m) Mental health and substance abuse services;

19 (n) Early and periodic screening and diagnosis and treatment  
20 services for children which shall include both physical and behavioral  
21 health screening, diagnosis, and treatment services;

22 (o) Rural health clinic services; and

23 (p) Federally qualified health center services.

24 (2) In addition to coverage otherwise required under this section,  
25 medical assistance may include coverage for health care and related  
26 services as permitted but not required under Title XIX of the federal  
27 Social Security Act, including, but not limited to:

28 (a) Prescribed drugs;

29 (b) Intermediate care facilities for persons with developmental  
30 disabilities;

31 (c) Home and community-based services for aged persons and persons

1 with disabilities;

2 (d) Dental services;

3 (e) Rehabilitation services;

4 (f) Personal care services;

5 (g) Durable medical equipment;

6 (h) Medical transportation services;

7 (i) Vision-related services;

8 (j) Speech therapy services;

9 (k) Physical therapy services;

10 (l) Chiropractic services;

11 (m) Occupational therapy services;

12 (n) Optometric services;

13 (o) Podiatric services;

14 (p) Hospice services;

15 (q) Mental health and substance abuse services;

16 (r) Hearing screening services for newborn and infant children; and

17 (s) Administrative expenses related to administrative activities,  
18 including outreach services, provided by school districts and educational  
19 service units to students who are eligible or potentially eligible for  
20 medical assistance.

21 (3) No later than July 1, 2009, the department shall submit a state  
22 plan amendment or waiver to the federal Centers for Medicare and Medicaid  
23 Services to provide coverage under the medical assistance program for  
24 community-based secure residential and subacute behavioral health  
25 services for all eligible recipients, without regard to whether the  
26 recipient has been ordered by a mental health board under the Nebraska  
27 Mental Health Commitment Act to receive such services.

28 (4) On or before October 1, 2014, the department, after consultation  
29 with the State Department of Education, shall submit a state plan  
30 amendment to the federal Centers for Medicare and Medicaid Services, as  
31 necessary, to provide that the following are direct reimbursable services

1 when provided by school districts as part of an individualized education  
2 program or an individualized family service plan: Early and periodic  
3 screening, diagnosis, and treatment services for children; medical  
4 transportation services; mental health services; nursing services;  
5 occupational therapy services; personal care services; physical therapy  
6 services; rehabilitation services; speech therapy and other services for  
7 individuals with speech, hearing, or language disorders; and vision-  
8 related services.

9 (5) No later than January 1, 2023, the department shall provide  
10 coverage for continuous glucose monitors under the medical assistance  
11 program for all eligible recipients who have a prescription for such  
12 device. Eligible recipients shall include all individuals who meet local  
13 coverage determinations, as defined in section 1869(f)(2)(B) of the  
14 federal Social Security Act, as amended, as such act existed on January  
15 1, 2024, and shall include individuals with gestational diabetes.

16 (6) On or before October 1, 2023, the department shall seek federal  
17 approval for federal matching funds from the federal Centers for Medicare  
18 and Medicaid Services through a state plan amendment or waiver to extend  
19 postpartum coverage for beneficiaries from sixty days to at least six  
20 months. Nothing in this subsection shall preclude the department from  
21 submitting a state plan amendment for twelve months.

22 Sec. 2. Original section 68-911, Revised Statutes Supplement, 2023,  
23 is repealed.