

**NHA** Nebraska  
Hospital  
Association

# Legislative Wrap-Up

2015 by the numbers



# 2015 Legislative Session by the numbers

The Nebraska Hospital Association's (NHA) public policy and advocacy priorities are driven by a vision that every Nebraskan has access to affordable, safe, high-quality health care. Through effective leadership and member participation, the NHA seeks to develop a unified voice to establish effective health care policy in Nebraska.

The NHA is committed to creating and maintaining a financial and regulatory environment in which hospitals and health care systems can provide the right care at the right time. This involves collaborating with members, policymakers and other health care partners in advocating for our top priorities.

The health care industry touches many aspects of public policy, and the NHA monitors a broad spectrum of issues on behalf of its members. In 2015, the NHA Advocacy Team was deeply involved with legislation affecting workforce development, insurance, taxation, employment, academic research and health care.

## Nebraska Unicameral Legislature 104<sup>th</sup> Legislature, First Session

- 90-day session convened January 7, 2015
- 664 bills introduced
- 118 Bills of Interest to the NHA's members were identified, covering a wide range of issues
  - The NHA initially:
    - Supported 45
    - Opposed 2
    - Monitored 65
    - Neutral on 6
- The NHA submitted written testimony on 43 bills before 8 of the 14 standing committees
- First session adjourned one day early on May 29, 2015
- 28 bills of interest became law
- 5 bills of interest were indefinitely postponed
- The remainder will be carried over to 2016's second session

## Legislative Interim Studies

- 129 legislative Interim Study Resolutions (ISRs) introduced
- 16 identified as "of interest" to NHA members

## Composition of 104<sup>th</sup> Legislature

- 49 senators
  - 18 new senators at the beginning of 2015
  - 39 men, 10 women
  - 35 Republicans, 13 Democrats, 1 Independent
  - 1 senator, Sen. Jeremy Nordquist (District 7), resigned after the Legislature adjourned and will be replaced by a gubernatorial appointee

## Legislative bills of interest

The following action was taken on bills of interest to the NHA during the 2015 session:

### HEALTH & HUMAN SERVICES COMMITTEE

#### **LB 37: Adopt the Prescription Drug Safety Act and change the transfer pharmacy, prescription and drug provisions**

**Introducer:** Sen. Bob Krist (District 10)

**NHA position:** Neutral

**Status:** Signed into law

LB 37 creates the Prescription Drug Safety Act providing rules for prescribing, storage, dispensing and record keeping of non-controlled prescription drugs. The NHA supports the intent of the legislation, including the effort to certify pharmacy technicians. However, the NHA did not support new mandates requiring 24-hour pharmacy that impose an undue burden on many of our members. The NHA is currently working with the Board of Pharmacy, the Department of Health and Human Services and various invested stakeholders to obtain a workable solution for Nebraska's hospitals.

#### **LB 46: Change provisions of the Statewide Trauma System Act**

**Introducer:** Sen. Dan Watermeier (District 1)

**NHA position:** Support

**Status:** Signed into law

The Statewide Trauma System Act dictates the types of facilities that can be designated as a trauma center, as well as defines the level of designation. LB 46 includes rehabilitation hospitals in the list of qualifying facilities through accreditation or verification. The bill also modernizes the Act's statutory language.



# 2015 Legislative Session by the numbers

## **LB 196: Add medical residents to those who qualify under the Rural Health Systems and Professional Incentive Act**

**Introducer:** Sen. Kathy Campbell (District 25)

**NHA position:** Support

**Status:** Signed into law without an appropriation, currently unfunded

LB 196 adds medical residents to the list of those eligible for student loan repayment incentives under the Rural Health Systems and Professional Incentive Act. The Act extends loan repayment to health care providers, including pharmacists, dentists, physical therapists and mental health practitioners; who practice in a designated health profession shortage area in Nebraska. With the new addition, medical residents participating in the program must be enrolled or accepted into an approved medical specialty residency program and can receive up to \$40,000/year not to exceed \$120,000. LB 196 also increases the current allowable amount for each profession now eligible for the program.

## **LB 315: Modify the Medicaid recovery audit process**

**Introducer:** Sen. Sara Howard (District 9)

**NHA position:** Support as amended

**Status:** Signed into law

LB 315 amends the Medicaid recovery audit process to improve efficiency for both the auditing contractors and the providers. The bill adds specificity to the current statute, providing guidance for contracting auditors in the scope of each audit. Among other things, LB 315 limits the number of records reviewed to 200 per audit and gives the provider 45 days to respond to records requests. Reviewed claims can extend within a maximum of two years from the date of payment. The audit contractor must provide a determination letter concluding the audit within 60 days of the receiving the requested records. LB 315 excludes from the review process claims processed through a Medicaid managed care program, medical necessity reviews with prior authorizations and any claims either under review or already audited. The Department of Health and Human Services must also publish online the performance metrics for each audit contractor.

## **LB 472: Medicaid Redesign Act**

**Introducer:** Sen. Kathy Campbell (District 25)

**NHA position:** Support

**Status:** Failed to advance; did not overcome a motion to bracket on General File with a vote of 28-16

LB 472, the 2015 legislative proposal for the expansion of Medicaid, is called the Medicaid Redesign Act. The bill creates a demonstration pilot project for redesign of the Medicaid program utilizing a Medicaid demonstration waiver. The waiver, as laid out in LB 472, involves a pilot project for redesign of the Medicaid program utilizing patient-centered medical homes, health homes for “super-utilizers” of the Medicaid program, value-based payments, and cost-conscious consumer behavior.

Those eligible under the waiver would be 1) individuals with incomes between 100 percent and 133 percent of the FPL, participating in a private premium assistance program (using Medicaid program funds), 2) individuals with incomes between 50 percent and 99 percent, participating in the Medicaid program; and 3) medically frail persons, super-utilizers, and individuals with exceptional health needs with incomes not exceeding 133 percent of the FPL, participating in health homes. Participants between 100 percent and 133 percent of the federal poverty level will be required to contribute 2 percent of their income towards the premium assistance program unless certain exceptions are met.

## **LB 549: Health Care Transformation Act**

**Introducer:** Sen. Kathy Campbell (District 25)

**NHA position:** Support

**Status:** Held in Committee

LB 549 creates the Health Care Transformation Act to encourage collaboration among all health care system stakeholders to develop a 15-year vision that includes eight building blocks: assure health care is available for all; support effective models of health care delivery, financing and payment; assure public transparency of health care quality and patient safety; establish and support a statewide database; utilize population health-based interventions; promote personal responsibility for wellness; address health care workforce shortages; and coordinate statewide health planning. The goal of LB 549 is to strengthen Nebraska’s health care system by (1) improving the experience of care for health care consumers and patients, including, but not limited to, quality and satisfaction, (2) improving the health of Nebraskans, and (3) reducing the per-capita cost of health care in Nebraska.

## **APPROPRIATIONS COMMITTEE**

## **LB 233: Appropriate funds to create the Nebraska Perinatal Quality Improvement Collaborative**

**Introducer:** Sen. Sara Howard (District 9)

**NHA position:** Support

**Status:** Signed into law

LB 233 appropriates funds for the University of Nebraska Medical Center to create the Nebraska Perinatal Quality Improvement Collaborative. Perinatal Quality Collaboratives (PQCs) are networks of providers and public health professionals improving health outcomes for woman and newborns. The network includes hospitals, obstetricians, pediatricians, nurses and state health department staff. The collaborative utilizes evidence-based clinical practices and processes to improve the quality of care provided within the state. Currently, 38 states, including Iowa, Kansas and Colorado, have established PQCs.

# 2015 Legislative Session by the numbers

## **LB 332: Create the Statewide Prescription Drug Disposal Project**

**Introducer:** Sen. John Kuehn (District 38)

**NHA position:** Support

**Status:** Signed into law

LB 332 appropriates funds for a program facilitating safe and efficient disposal of unwanted or expired prescription drugs. The federal Prescription Drug Take-Back Day initiative, sponsored through the Drug Enforcement Administration, announced late last year that it will no longer offer free disposal. Currently, few Nebraska facilities accept prescriptions for disposal at no cost. LB 332 helps mitigate inappropriate disposal or unsafe storage of unwanted or expired medications.

## **LB 593: Fund a study to assess current health data systems in Nebraska and provide recommendations for future needs**

**Introducer:** Sen. Jeremy Nordquist (District 7)

**NHA position:** Support as amended

**Status:** Signed into law

LB 593 appropriates \$250,000 for an independent, third-party analysis of specific system components of current health data systems in Nebraska. The study also calls for recommendations to increase efficiency and effectiveness of the public's health care dollars. The Department of Health and Human Services will contract with a consultant through the request for proposals contracting process. The consultant must provide a complete picture of the current system, a comprehensive analysis of potential capabilities and recommendations on key system needs.

## **LB 657: Biennial budget recommendations**

**Introducer:** Speaker Galen Hadley, at the request of the Governor

**NHA position:** Supported budget proposal as amended by the Appropriations Committee

- Mainline appropriations bill for the biennium that begins July 1, 2015 and ends June 30, 2017
- Includes appropriations for all state operations and aid programs
  - 2% per annum Medicaid provider rate increase
  - 2% per annum CHIP provider rate increase
  - Additional 0.25% provider rate increase for behavioral health, nursing facilities, assisted living and ICF-DD providers
  - Coverage for Hepatitis C medication and other therapies newly approved by the FDA
  - Restoration of behavioral health aid previously reduced in 2013 for an average increase of 4.8% per year

- Health Aid Program: \$6.4 million
  - Variety of initiatives, including:
    - Newborn screening & genetics
    - Chronic renal disease
    - EMS training
    - HIV/AIDS prevention
    - Breast & cervical cancer screening
- University of Nebraska
  - \$1.8 million per year for pediatric cancer research and specialists
  - Expansion of UNK nursing and allied health programs (\$1,424,000 in FY15 and \$2,424,000 in FY 16)
- Additional \$200,000 allocated for tobacco prevention
- Nebraska Health Information Initiative (NeHII): \$500,000 per annum
- Oral Health Training and Services Fund
  - \$8,000,000 appropriation to contract for reduced-fee and charitable oral health services, oral health workforce development and telehealth services
  - Creighton University School of Dentistry and University of Nebraska College of Dentistry will compete for the funds
- Reduction of \$360,000 per annum for the Medical Student Assistance Program

## JUDICIARY COMMITTEE

### **LB 31: Eliminate motorcycle and moped helmet requirements**

**Introducer:** Sen. Dave Bloomfield (District 17)

**NHA position:** Opposed

**Status:** Failed to advance; did not overcome a filibuster on General File with a vote of 24-18

LB 31 would eliminate the mandatory helmet requirement for motorcycle and moped riders which has been state law since 1989. This issue is debated almost annually and NHA members have remained steadfastly opposed to repealing the law or enacting a partial coverage law requiring application only to young riders.

# 2015 Legislative Session by the numbers

## Interim Studies

Each year at the close of the legislative session, senators introduce interim study resolutions (ISR) authorizing a legislative committee to study a specific issue while the Legislature is in recess. The ISR often indicates a senator's special interest in an issue that he or she intends to address through a legislative proposal the following year.

Every fall, the standing legislative committees choose two ISRs to research in partnership with the senator who introduced the resolution, often holding public hearings to obtain feedback from interested stakeholders and affected parties. The NHA often participates in exploring ISRs, providing research assistance, proposal development and testimony in support or opposition.

**LR 22** (Sen. Mike Gloor) – Monitor medical care transformation in Nebraska including the health care delivery process of patient-centered medical homes.

**LR 185** (Sen. Sue Crawford) – Examine issues faced by Nebraska's licensed mental health practitioners, doctoral-level graduate students, nurses and psychiatrists.

**LR 231** (Sen. Sara Howard) – Examine the effectiveness of the prescription drug monitoring program currently housed within the Nebraska Health Information Initiative.

**LR 245** (Sen. Burke Harr) – Review reimbursement rates for ambulatory surgical centers and outpatient hospitals with respect to workers' compensation services in Nebraska.

**LR 257** (Sen. John Kuehn) – Examine how to create a sustainable and adequate stream of state funds to local public health departments to ensure the departments are able to meet their core responsibilities and functions.

**LR 261** (Sen. Heath Mello) – Examine implementing use of body cameras for state and local law enforcement.

**LR 291** (Sen. Kathy Campbell) – Examine stroke systems of care.

**LR 298** (Sen. Dan Watermeier) – Examine ways to improve the state's emergency medical services system.

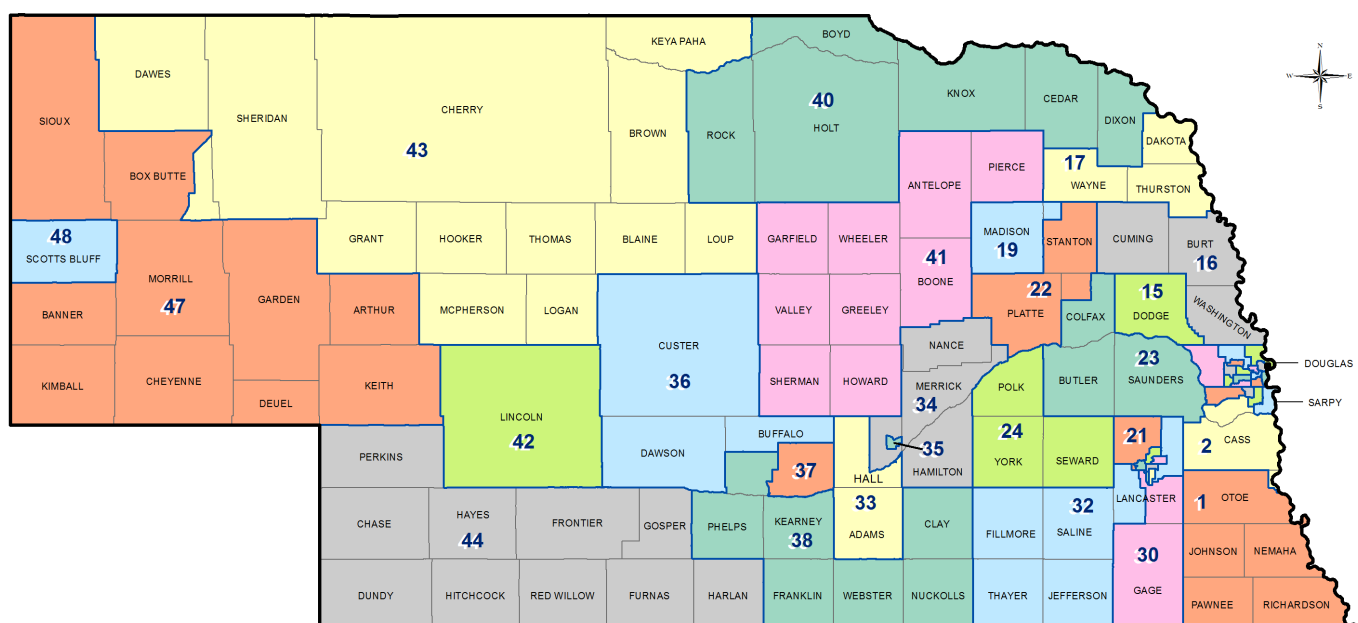
**LR 304** (Sen. Kathy Campbell) – Examine and assess the behavioral health needs of children and youth in Nebraska and the resources available to meet those needs.

**LR 306** (Sen. John McCollister) – Examine ways in which Medicaid expansion can be implemented in Nebraska under the ACA for medical assistance for newly eligible individuals.

**LR 310** (Sen. Burke Harr) – Examine services provided by community paramedics.

**LR 312** (Sen. Burke Harr) – Examine ways to improve and fund child behavioral health programming.

## Nebraska Legislative Districts



## Effective tools for year-round advocacy

Traditional ways of doing business in the development of health care policy are quickly becoming obsolete. Term limits in Nebraska's Legislature and health care reform, coupled with the current economic conditions, have intensified and accelerated the need for innovative and resourceful efforts that advance the NHA's advocacy agenda.

Hospital leaders must be proactive in public policy development—identifying important issues and developing strategies to address them. When Nebraska's hospitals adapt, adjust and respond to new health care policy initiatives in a timely and informed manner, they position themselves as reliable, trusted resources and empower policymakers to make informed decisions.

Effective advocacy that produces substantive change is a year-round effort. During the legislative session, NHA members and staff take active roles on numerous bills by promoting those that positively impact the delivery of health care and opposing those that would have an adverse affect on the health of the Nebraskans served by our state's community hospitals; however, there is a great deal more to be done.

The NHA encourages all of its members to participate in activities throughout the year that build stronger working relationships with those who have the power to change health care policy with their vote. Strong working relationships with legislators are the foundation for thoughtful, informed and substantive public policy changes. In cooperation with its members, the NHA staff has developed several programs and tools that hospital leaders can use to implement successful advocacy efforts.

- **Policy Development Committee:** Each year, after the legislative session ends, the policy development process is initiated when the NHA surveys its members on state and federal issues. The Policy Development Committee (PDC), a group of more than 20 hospital executives, meets to evaluate the outcome of the annual membership survey. The PDC reviews the members' comments and prioritizes the issues. The PDC then forwards its recommendations to the entire NHA membership for review during the fall NHA district meetings. Final action on each issue is determined by the NHA board of directors in October of each year.
- **Advocacy Teams:** Advocacy teams are employees selected by the hospital's chief executive officer to serve as advisors, planners and active participants in the hospital's political and community advocacy efforts. The team gathers information and helps develop and implement strategies to influence policymakers at the state and federal levels. Advocacy teams also coordinate grassroots political action, such as letter writing, meetings with legislators and hosting policymakers when they visit their facility.
- **CEO/Policymaker Meetings:** CEO meetings with state senators and members of Nebraska's congressional delegation are designed to educate policymakers about health care issues and further develop comfortable working relationships. Such meetings may take place at the hospital, Nebraska State Capitol, Washington, DC or other locations.
- **American Hospital Association Political Action Committee (AHAPAC) and Nebraska Hospital Association Political Action Committee (NHA PAC):** Contributions to the AHAPAC and NHA PAC are crucial for electing champions of responsible health care policy. As the premier vehicle for collecting candidate contributions, the AHAPAC and NHA PAC both contribute funds to champions of health care, serving in both Nebraska and in Washington, DC.
- **NHA Advocacy Day:** The NHA hosts its annual Advocacy Day event in the spring. All members of the NHA are invited and encouraged to attend. The agenda includes presentations on key legislative and regulatory issues, provides hospital representatives the opportunity to meet with state senators and advances the NHA's advocacy agenda during the legislative luncheon.

For more information, contact Elisabeth Hurst, JD, director of advocacy, at 402-742-8153 or [ehurst@nebraskahospitals.org](mailto:ehurst@nebraskahospitals.org).



# Thank You for your support!

The NHA staff would like to thank everyone who participated in the development of public policy during the 2015 legislative session. Your efforts of attending NHA meetings, participating in conference calls and contacting policymakers on behalf of Nebraska's hospitals, are invaluable. The NHA's advocacy priorities are driven by our vision of providing high-quality, affordable health care to the patients we serve.

Through the board of directors and Policy Development Committee, NHA PAC Steering Committee, Priority Issue Teams, membership and staff, the NHA strives to promote public policy issues to make positive changes in Nebraska's health care environment.

## **Together, we are the influential voice for Nebraska health care.**

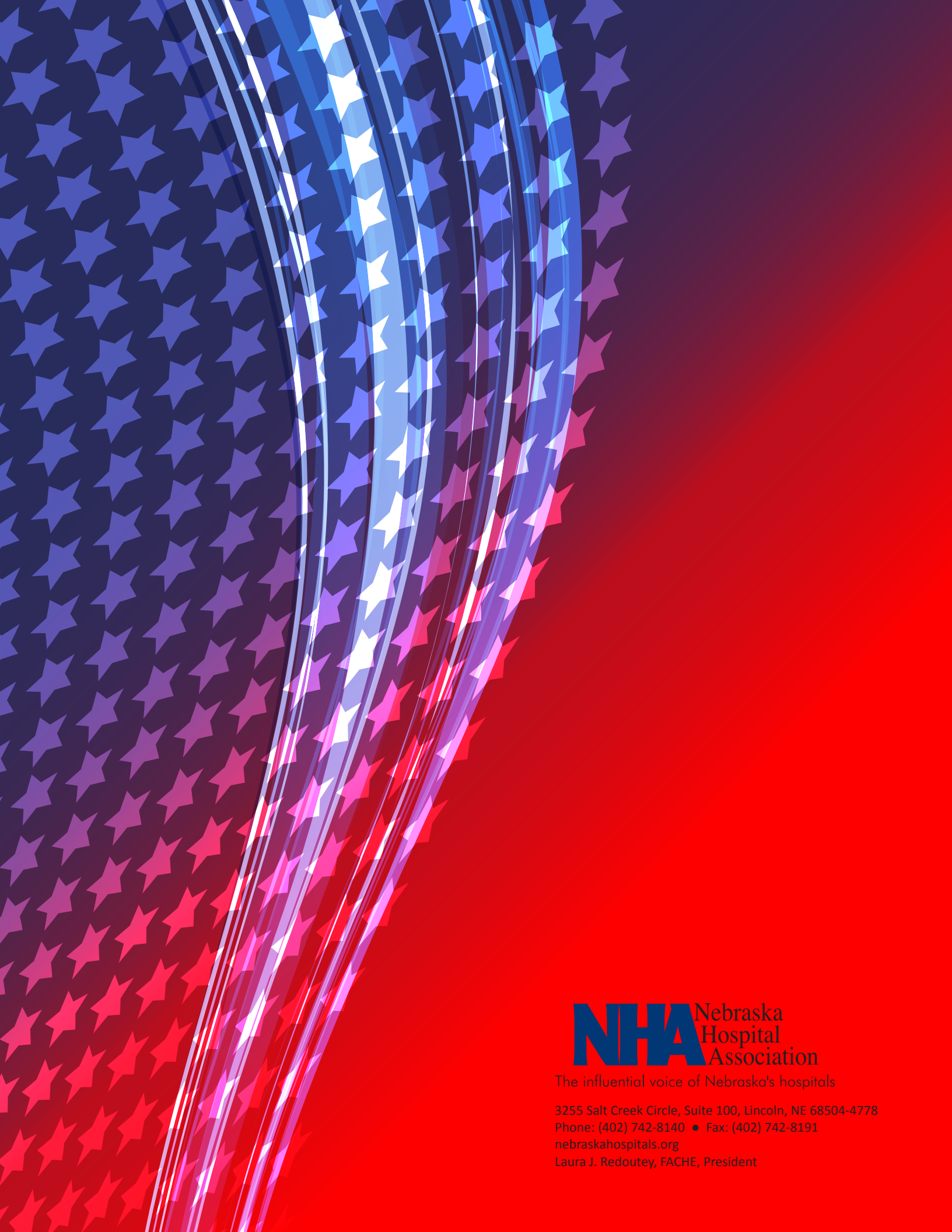
Throughout the upcoming years, hospitals will need champions in the Legislature to deal with the issues that impact the operations and success of hospitals. Hospital representatives must be ready to engage in discussions vital to the communities they serve and to the mission of hospitals across Nebraska.

For more information about how you can become involved in this critical effort or for more information about legislative bills or resolutions, contact Elisabeth Hurst, JD, director of advocacy, at 402-742-8153 or [ehurst@nebraskahospitals.org](mailto:ehurst@nebraskahospitals.org).

To keep you informed about legislative activities, the NHA publishes *The Advocate*, a daily electronic newsletter during the legislative session, and twice a week during the interim. *The Advocate* highlights key health care-related legislative issues, NHA testimony and news. You may also visit the Advocacy home page: [nebraskahospitals.org/advocacy/index.htm](http://nebraskahospitals.org/advocacy/index.htm)

For more information or to subscribe to *The Advocate*, contact the Nebraska Hospital Association at (402) 742-8140 or visit [nebraskahospitals.org](http://nebraskahospitals.org).





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