

LEGISLATURE OF NEBRASKA
ONE HUNDRED FOURTH LEGISLATURE
FIRST SESSION

LEGISLATIVE BILL 320

FINAL READING

Introduced by Bolz, 29; Campbell, 25; Davis, 43; Stinner, 48.

Read first time January 15, 2015

Committee: Health and Human Services

1 A BILL FOR AN ACT relating to public health; to amend sections 68-1107,
2 68-1108, and 68-1109, Revised Statutes Cumulative Supplement, 2014;
3 to adopt the Aging and Disability Resource Center Demonstration
4 Project Act; to require the Aging Nebraskans Task Force to develop a
5 state plan regarding persons with Alzheimer's or related disorders;
6 to change a termination date; to harmonize provisions; to provide
7 operative dates; to repeal the original sections; and to declare an
8 emergency.
9 Be it enacted by the people of the State of Nebraska,

1 Section 1. Sections 1 to 9 of this act shall be known and may be
2 cited as the Aging and Disability Resource Center Demonstration Project
3 Act.

4 Sec. 2. The Legislature finds that:

5 (1) The state should anticipate and prepare for significant growth
6 in the number of older Nebraskans and the future needs of persons with
7 disabilities, both of which will require costly long-term care services;

8 (2) The state should improve access to existing services and support
9 for persons with disabilities;

10 (3) The state should provide a streamlined approach to identify the
11 needs of older Nebraskans and persons with disabilities through uniform
12 assessments and a single point of contact; and

13 (4) Nebraskans would benefit from statewide public information
14 campaigns to educate older Nebraskans, persons with disabilities, and
15 their caregivers on the availability of services and support.

16 Sec. 3. The purpose of the Aging and Disability Resource Center
17 Demonstration Project Act is to evaluate the feasibility of establishing
18 aging and disability resource centers statewide to provide information
19 about long-term care services and support available in the home and
20 community for older Nebraskans or persons with disabilities, family
21 caregivers, and persons who request information or assistance on behalf
22 of others and to assist eligible individuals to access the most
23 appropriate public and private resources to meet their long-term care
24 needs.

25 Sec. 4. For purposes of the Aging and Disability Resource Center
26 Demonstration Project Act:

27 (1) Aging and disability resource center means a community-based
28 entity established to provide information about long-term care services
29 and support and to facilitate access to options counseling to assist
30 eligible individuals and their representatives in identifying the most
31 appropriate services to meet their long-term care needs;

1 (2) Area agency on aging has the meaning found in section 81-2208;

2 (3) Center for independent living has the definition found in 29
3 U.S.C. 796a, as such section existed on January 1, 2015;

4 (4) Department means the State Unit on Aging of the Division of
5 Medicaid and Long-Term Care of the Department of Health and Human
6 Services or any successor agency designated by the state to fulfill the
7 responsibilities of section 305(a)(1) of the federal Older Americans Act
8 of 1965, 42 U.S.C 3025(a)(1), as such section existed on January 1, 2015;

9 (5) Eligible individual means a person who has lost, never acquired,
10 or has one or more conditions that affect his or her ability to perform
11 basic activities of daily living that are necessary to live
12 independently;

13 (6) Options counseling means a service that assists an eligible
14 individual in need of long-term care and his or her representatives to
15 make informed choices about the services and settings which best meet his
16 or her long-term care needs and that uses uniform assessments and
17 encourages the widest possible use of community-based options to allow an
18 eligible individual to live as independently as possible in the setting
19 of his or her choice;

20 (7) Representative means a person designated as a legal guardian,
21 designated by a power of attorney or a health care power of attorney, or
22 chosen by law, by a court, or by an eligible individual seeking services,
23 but use of the term representative shall not be construed to disqualify
24 an individual who retains all legal and personal autonomy;

25 (8) Uniform assessment means a single standardized tool used to
26 assess a defined population at a specific time; and

27 (9) University Center for Excellence in Developmental Disability
28 Education, Research and Service means the federally designated University
29 Center for Excellence in Developmental Disability Education, Research and
30 Service of the Munroe-Meyer Institute at the University of Nebraska
31 Medical Center.

1 Sec. 5. The department shall award grants for three aging and
2 disability resource center demonstration projects. The department shall
3 adopt criteria for evaluating proposals to operate an aging and
4 disability resource center demonstration project based on the
5 requirements in section 6 of this act and release a request for proposals
6 within sixty days after the operative date of this section.

7 Sec. 6. The aging and disability resource center demonstration
8 projects shall be established to evaluate the feasibility of establishing
9 aging and disability resource centers statewide as a means of promoting
10 appropriate, effective, and efficient use of long-term care resources.
11 The aging and disability resource center demonstration projects shall
12 operate through June 30, 2018. Each aging and disability resource center
13 demonstration project shall provide one or more of the following
14 services:

15 (1) Comprehensive information on the full range of available public
16 and private long-term care programs, options, financing, service
17 providers, and resources within a community, including information on the
18 availability of integrated long-term care;

19 (2) Assistance in accessing and applying for public benefits
20 programs;

21 (3) Options counseling;

22 (4) A convenient point of entry to the range of publicly supported
23 long-term care programs for an eligible individual;

24 (5) A process for identifying unmet service needs in communities and
25 developing recommendations to respond to those unmet needs;

26 (6) Facilitation of person-centered transition support to assure
27 that an eligible individual is able to find the services and support that
28 are most appropriate to his or her need;

29 (7) Mobility management to promote the appropriate use of public
30 transportation services by a person who does not own or is unable to
31 operate an automobile; and

1 (8) A home care provider registry that will provide a person who
2 needs home care with the names of home care providers and information
3 about his or her rights and responsibilities as a home care consumer.

4 Sec. 7. (1) Within sixty days after the release date of a request
5 for proposals under section 5 of this act, an area agency on aging, after
6 consultation with a collaboration of organizations that serve aging
7 persons and persons with disabilities, including, but not limited to,
8 centers for independent living and the University Center for Excellence
9 in Developmental Disability Education, Research and Service, and with
10 other organizations, including, but not limited to, organizations
11 providing advocacy, protection, and safety for aging persons and persons
12 with disabilities, may submit to the department a proposal to establish
13 an aging and disability resource center demonstration project. The
14 proposal shall specify how organizations currently serving eligible
15 individuals will be engaged in the process of delivery of services
16 through the aging and disability resource center demonstration project.
17 The proposal shall be developed in consultation with eligible individuals
18 and their representatives. The proposal shall indicate how resources will
19 be utilized by the collaborating organizations to fulfill the
20 responsibilities of an aging and disability resource center demonstration
21 project.

22 (2) Two or more area agencies on aging may develop a joint proposal
23 to establish an aging and disability resource center demonstration
24 project to serve all or a portion of their planning-and-service areas. A
25 joint proposal shall provide information on how the services described in
26 section 6 of this act will be provided in the counties to be served by
27 the aging and disability resource center demonstration project described
28 in the joint proposal.

29 Sec. 8. Within thirty days after receipt of a proposal developed
30 pursuant to subsection (1) or (2) of section 7 of this act, the
31 department shall review the proposal and determine whether the proposal

1 is eligible for funding. The department shall select three proposals for
2 funding. The department shall enter into a contract with an independent
3 institution having experience in evaluating aging and disability programs
4 for an evaluation of the aging and disability resource center
5 demonstration projects. The contract shall require that a report
6 evaluating the demonstration projects be presented to the Clerk of the
7 Legislature prior to December 1 of 2016, 2017, and 2018.

8 Sec. 9. The department shall reimburse each area agency on aging
9 operating an aging and disability resource center demonstration project
10 on a schedule agreed to by the department and the area agency on aging.
11 Such reimbursement shall be made from (1) state funds appropriated by the
12 Legislature, (2) federal funds allocated to the department for the
13 purpose of establishing and operating aging and disability resource
14 centers, and (3) other funds as available.

15 Sec. 10. Section 68-1107, Revised Statutes Cumulative Supplement,
16 2014, is amended to read:

17 68-1107 (1) The Aging Nebraskans Task Force is created. The purposes
18 purpose of the task force are (a) is to develop and facilitate
19 implementation of a statewide strategic plan for addressing the needs of
20 the aging population in the state and (b) to develop a state plan
21 regarding individuals with Alzheimer's or related disorders as provided
22 in section 13 of this act. The task force shall provide a forum for
23 collaboration among state, local, community, public, and private
24 stakeholders in long-term care programs.

25 (2)(a) The executive committee of the task force shall include as
26 voting members the chairperson of the Health and Human Services Committee
27 of the Legislature, a member of the Appropriations Committee of the
28 Legislature appointed by the Executive Board of the Legislative Council,
29 a member of the Health and Human Services Committee of the Legislature
30 appointed by the Executive Board of the Legislative Council, a member of
31 the Legislature's Planning Committee appointed by the Executive Board of

1 the Legislative Council, and an at-large member appointed by the
2 Executive Board of the Legislative Council. The voting members of the
3 executive committee shall choose a chairperson and vice-chairperson from
4 among the voting members.

5 (b) The chief executive officer of the Department of Health and
6 Human Services or his or her designee and the Chief Justice of the
7 Supreme Court or his or her designee shall be nonvoting, ex officio
8 members of the executive committee of the task force.

9 (c) The remaining four members of the task force shall be nonvoting
10 members appointed by the executive committee of the task force through an
11 application and selection process, representing stakeholders in the long-
12 term care system and may include a representative of the Division of
13 Medicaid and Long-Term Care Advisory Committee on Aging, representatives
14 of health care providers, elder law attorneys, representatives of the
15 long-term care ombudsman program, health care economists, geriatric
16 specialists, family caregivers of seniors in at-home care, providers of
17 services to the elderly, seniors currently or previously in institutional
18 care, and aging advocacy organizations.

19 (3) The executive committee of the task force shall advise the task
20 force regarding the interaction among the three branches of government
21 related to long-term care programs and services. The members of the
22 executive committee shall each represent his or her own branch of
23 government, and no member of the executive committee shall participate in
24 actions that could be deemed to be the exercise of the duties and
25 prerogatives of another branch of government or that improperly delegate
26 the powers and duties of any branch of government to another branch of
27 government.

28 (4) The task force shall work with administrators of area agencies
29 on aging, nursing home and assisted-living residence providers,
30 hospitals, rehabilitation centers, managed care companies, senior citizen
31 centers, community stakeholders, advocates for elder services and

1 programs, the Center for Public Affairs Research of the College of Public
2 Affairs and Community Service at the University of Nebraska at Omaha, and
3 seniors statewide to establish effective community collaboration for
4 informed decisionmaking that supports the provisions of effective and
5 efficient long-term care services.

6 (5) The task force shall create a statewide strategic plan for long-
7 term care services in Nebraska which shall consider, but not be limited
8 to:

9 (a) Promotion of independent living through provision of long-term
10 care services and support that enable an individual to live in the
11 setting of his or her choice;

12 (b) Provision of leadership to support sound fiscal management of
13 long-term care budgets so that Nebraska will be able to meet the
14 increasing demand for long-term care services as a growing portion of the
15 state's population reaches the age of eighty years;

16 (c) Expedited creation of workforce development and training
17 programs specific to the needs of and in response to Nebraska's growing
18 aging population;

19 (d) The identification of gaps in the service delivery system that
20 contribute to the inefficient and ineffective delivery of services; and

21 (e) Development of a process for evaluating the quality of
22 residential and home and community-based long-term care services and
23 support.

24 Sec. 11. Section 68-1108, Revised Statutes Cumulative Supplement,
25 2014, is amended to read:

26 68-1108 (1) On or before December 15, 2014, the Aging Nebraskans
27 Task Force shall present electronically to the Legislature a report of
28 recommendations for the statewide strategic plan described in section
29 68-1107. The Department of Health and Human Services shall also annually
30 report electronically to the Legislature the percentage growth of
31 medicaid spending for people over sixty-five years of age for no fewer

1 than five years following acceptance of the application to the State
2 Balancing Incentive Payments Program pursuant to section 81-3138.

3 (2) The task force shall develop a state plan as provided in section
4 13 of this act and electronically deliver the state plan to the Governor
5 and the Legislature on or before December 15, 2016. The task force shall
6 make a presentation of the state plan to the Health and Human Services
7 Committee of the Legislature on or before December 15, 2016.

8 Sec. 12. Section 68-1109, Revised Statutes Cumulative Supplement,
9 2014, is amended to read:

10 68-1109 The Aging Nebraskans Task Force terminates on January 1,
11 2017 June 30, 2016, unless extended by the Legislature.

12 Sec. 13. (1) The Aging Nebraskans Task Force shall develop a state
13 plan regarding individuals with Alzheimer's and related disorders. The
14 task force shall work with the chief executive officer of the Department
15 of Health and Human Services, the Public Guardian, the area agencies on
16 aging, organizations advocating for patients and caregivers for patients
17 with Alzheimer's or related disorders, the law enforcement community,
18 patients with Alzheimer's or related disorders, caregivers for patients
19 with Alzheimer's or related disorders, client advocacy organizations,
20 health care provider advocacy organizations, private health care
21 providers, and community-based health professionals.

22 (2) The task force shall:

23 (a) Assess the current and future impact of Alzheimer's and related
24 disorders on residents of the state;

25 (b) Determine the existing services and resources in the state that
26 address the needs of individuals with Alzheimer's and related disorders
27 and their families and caregivers; and

28 (c) Develop recommendations to respond to escalating needs for the
29 services and resources described in subdivision (b) of this subsection.

30 (3) In fulfilling the duties described in subsection (1) of this
31 section, the task force shall examine:

1 (a) Trends and needs in the state relating to populations with
2 Alzheimer's or related disorders, including (i) the state's role in the
3 provision of long-term care, (ii) family caregiver support, (iii) the
4 provision of early-stage diagnoses, assistance, support, and medical
5 services, (iv) younger onset of Alzheimer's or related disorders, (v)
6 ethnic populations at higher risk, and (vi) risk reduction;

7 (b) Existing services, resources, and capacity available to
8 individuals with Alzheimer's or related disorders, including:

9 (i) The type, cost, availability, and adequacy of services,
10 including, (A) home and community-based resources, (B) respite care, (C)
11 residential long-term care, and (D) geriatric-psychiatric units for
12 individuals with associated behavioral disorders;

13 (ii) Dementia-specific training requirements for individuals who are
14 employed to provide care to individuals with Alzheimer's or related
15 disorders;

16 (iii) Quality of care measures for services delivered across the
17 continuum of care;

18 (iv) The capacity of public safety and law enforcement to respond to
19 individuals with Alzheimer's or related disorders; and

20 (v) State support to institutions of higher learning for research on
21 Alzheimer's or related disorders;

22 (c) The need for state policy or action in order to provide clear,
23 coordinated services and support to individuals with Alzheimer's or
24 related disorders and their families and caregivers; and

25 (d) Strategies to identify gaps in services.

26 Sec. 14. Sections 1, 2, 3, 4, 5, 6, 7, 8, and 9 of this act become
27 operative three calendar months after the adjournment of this legislative
28 session. The other sections of this act become operative on their
29 effective date.

30 Sec. 15. Original sections 68-1107, 68-1108, and 68-1109, Revised
31 Statutes Cumulative Supplement, 2014, are repealed.

1 Sec. 16. Since an emergency exists, this act takes effect when
2 passed and approved according to law.