

# LB 1175

Prohibit a health insurer from removing a provider as an in-network provider under certain circumstances. A health insurer in this state shall not remove a provider as an in-network provider for only financial reasons if such provider wishes to remain as an in-network provider and agrees to remain in contract with such health insurer.

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# LB 238

Change provisions of the Ground Emergency Medical Transport Act. The department shall design and implement, in consultation with eligible providers a supplemental reimbursement program, including such a program utilizing certified public expenditures, for ground emergency medical transport services, including services provided by emergency medical technicians at the basic, advanced, and paramedic levels in prestabilization and preparation for transport, in order to increase reimbursement to eligible providers.

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# LB 678

Adopt the Pharmacy Benefit Manager Regulation Act. A BILL FOR AN ACT relating to pharmacy benefits; to amend sections 68-901 and 71-2484, Revised Statutes Cumulative Supplement, 2020; to adopt

the Pharmacy Benefit Manager Regulation Act; to transfer provisions related to pharmacy benefits; to require an audit as prescribed; to harmonize provisions; to provide a duty for the Revisor of Statutes; to repeal the original sections; and to declare an emergency.

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## **LB 966**

Section 1. Sections 1 to 5 of this act shall be known and may be cited as the Discretionary Clause Prohibition Act.<sup>2</sup> Sec. 2. The purpose of the Discretionary Clause Prohibition Act is to ensure that health insurance benefits and disability income protection coverage are contractually guaranteed and to avoid the conflict of interest that occurs when the health carrier or insurer responsible for providing benefits has discretionary authority to decide what benefits are due.

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## **LR 214**

The purpose of this resolution is to examine and analyze how state regulated health plans and state employee health plans use programs to limit contributions made by, or on behalf of, a consumer, known as copay accumulator adjustment programs. The issues addressed by this interim study include, but are not limited to, an examination of: (1) What year such health plan or pharmacy benefit manager initiated a copay accumulator adjustment program; (2) All years the health plan or pharmacy

benefit manager utilized copay accumulator adjustment programs; (3) The number of consumers affected by a copay accumulator adjustment program for each year the program has been in place; (4) The average deductible and out-of-pocket maximums of consumers affected by a copay accumulator adjustment program, per tier level if applicable; (5) Whether copay accumulator adjustment programs are implemented across all health plan policies or restricted based on other factors including, but not limited to, disease state, type of plan, type of drug or treatment, and whether such drug or treatment has a generic equivalent; (6) The yearly amount of money excluded from all consumers' out-of-pocket costs per health plan and how the savings were utilized; and (7) The premium amounts paid by health plans, employers, and consumers for the two years before the copay accumulator adjustment program and all years after the copay accumulator adjustment programs were implemented.

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## **LB 895**

A BILL FOR AN ACT relating to the Medical Assistance Act; to amend section 68-901, Revised Statutes Supplement, 2021; to provide requirements and limits on the use of prior authorizations by managed care organizations; to harmonize provisions; to repeal the original section; and to declare an emergency.

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# **LB 737**

Adopt the Primary Care Investment Act. LB737 creates the Primary Care Investment Council which will: (1) determine an appropriate definition of primary care spending; (2) develop policies and procedures for the collection of information necessary to measure primary care spending levels in Nebraska; (3) determine the appropriate target level of primary care spending for carriers in Nebraska; and (4) develop recommendations to the Legislature for achieving and sustaining primary care spending in Nebraska at the target level.

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# **LB 863**

Adopt the Travel Insurance Act and the Primary Care Investment Act and change provisions relating to premium rebates, insurance coverage, the Insurance Holding Company System Act, and the Insurers Investment Act. The legislation proposes to adopt the latest National Association of Insurance Commissioners (NAIC) amendments to the NAIC

Insurance Holding Company System Regulatory Act, codified in Nebraska as the Insurance Holding Company Systems Act, Neb. Rev. Stat. §§ 44-2120 – 44-2155.

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# **LR 101**

Interim study to examine whether legislation should be enacted to provide for comprehensive regulation of pharmacy benefit managers

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# **LB 497**

Provide for compensation under the Nebraska Crime Victim's Reparations Act for health care providers examining or treating victims of sexual assault, domestic assault, or child abuse.