



Nebraska Hospital Association
106th Legislature, 2nd Regular Session

Document	Senator	Position	Committee	Status	Description
LB19	Briese	Monitor	Business and Labor 03/25/2019	In Committee 01/14/2019	<p>Allow withholding from public of reports of injury under the Nebraska Workers' Compensation Act as prescribed and provide duties for the Nebraska Workers' Compensation Court</p> <p><i>Mandates that reports filed with the Workers' Compensation Court to be confidential unless confidentiality is waived by the employee. Access to the report is granted to the employee (or their attorney or authorized agent); employer; worker's compensation insurer; risk management pool; third-party administrator that is a party to the report or their attorney or authorized agent; a third-party for purposes of identifying the number and nature of injuries to employees of a given employer identified in a request (employee identification redacted in such a request); a non-profit for the purposes of sending condolences to, providing memorials for, and offering grief counseling to family members of an employee whose death was caused by a workplace accident; or the State for the purposes of investigating the claim and completing the workers' compensation process.</i></p>
LB24	Kolterman	Support	Appropriations 03/25/2019	In Committee 01/14/2019	<p>Appropriate funds to the Department of Health and Human Services</p> <p><i>Provides \$600,000 annually for the next two years from the General Fund to DHHS to contract for services to carry out the statewide prescription drug disposal program.</i></p>
LB37	Hilkemann	Monitor	Health and Human Services 01/30/2019	In Committee 01/14/2019	<p>Change the Podiatry Practice Act to authorize a physician assistant to assist a podiatrist</p> <p><i>Provides that a PA may provide services that are delegated by and provided under the supervision of a licensed podiatrist; appropriate to their level of competence; form a component of the supervising podiatrist's scope of practice; and are not otherwise prohibited by law. To supervise a PA a podiatrist shall be licensed; have no relevant restrictions imposed by the board; maintain a mutually signed written agreement with the PA that defines the scope of the podiatrist's practice and provides that the podiatrist will retain professional and legal responsibility for the PA. The podiatrist must provide continuous supervision but need not be physically present at all times. A podiatrist may not supervise more than 4 PAs at a time.</i></p> <p><i>LB37 amended into LB755.</i></p>



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LB43	Bolz	Monitor	Judiciary 02/22/2019	Select File 03/05/2020 Bolz Priority Bill	Adopt the Sexual Assault Survivors' Bill of Rights Act

Establishes sexual assault survivor rights, including the right to consult with an advocate during any medical evidentiary or physical exam. No costs incurred by a medical provider for the medical evidentiary exam shall be charged to a survivor as provided under current law (Sexual Assault Payment Program). Provides a survivor has the right to shower at no cost of the exam, unless facilities are not available. Provides that a survivor has the right to have an advocate or victim and witness assistance center representative present during any interview by a peace officer, prosecutor, or defense attorney, unless one cannot appear in a reasonably timely manner. Requires the peace officer, prosecutor, or defense attorney to contact the advocate or representative before beginning the interview, unless declined by the survivor. Provides that a survivor has the right to be interviewed by a peace officer of the survivor's choosing and who speaks the survivor's language, if the request can be reasonably accommodated. Prohibits a peace officer, prosecutor, or defense attorney from discouraging a survivor from receiving an exam. Provides a survivor has the right to have an attorney present during all stages. Provides that a survivor has the right to prompt analysis of sexual assault forensic evidence, to be provided with information on the processing of the evidence, to have the results uploaded to the appropriate data bases, to be informed of the results, and to request a free and complete copies of all law enforcement reports concerning the assault upon the conclusion of the case. At the discretion of the county attorney, such reports may be redacted to exclude personal identifying information of other witnesses. Prohibits use of evidence to prosecute a survivor for any misdemeanor crimes or controlled substances crimes or to use it as a basis to search for further evidence of any such crimes. Provides a survivor has the right to be reasonably protected from defendant during any related civil or criminal proceeding, including separate waiting rooms and the right to be heard through a victim impact statement. Requires health care providers and peace officers (or DHHS, in the case of a minor) to provide the survivor with certain required information about the survivor's rights.

AM2037 (Judiciary): Strikes section 3 (provided when the rights applied); 5 (provided that a person accused or convicted of a crime against the victim has standing to object or otherwise seek relief based on noncompliance with this act); 10 (provided a survivor the right to be protected in any civil or criminal proceeding from the perpetrator of the sexual assault); and 11 (prohibited law enforcement from disclosing the name and identifying information of a survivor, except as necessary to prosecute the crime or carry out the rights in LB43 and provided that the identities of victims are not public records). Section 4 and 5 no longer contain a right to consult with an advocate, but retain the right to have an advocate present during examinations and interviews. Section 6 no longer contains a requirement that law enforcement reports provided to survivors be provided free of charge. Section 9 is new and would require prosecutors to consult with survivors before reaching a plea agreement. Section 10 and 11 are new and would make changes to the rules of criminal procedure to include references to advocates attending criminal depositions and depositions of child victims.-ADOPTED 3/3/20

FA107 (Albrecht): Substitutes the word "sex" for "gender."-LOST 3/3/20

Proposed AM2748 (Chambers): Substitutes the word "victim" for "survivor."



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<i>Proposed AM2864 (Bolz): Substitutes the word "victim" for "survivor." Changes definition of advocate to include a representative from a victim and witness assistance center "or a similar entity affiliated with a law enforcement agency or prosecutor's office." Adds language to privilege section: "Nothing in this section shall relieve the prosecutor of the prosecutor's duty to disclose and make known to the defendant or the defendant's attorney any and all exculpatory material or information suitable for impeachment which is known to the prosecutor." States: "A victim has the right to counsel." Removes previous language that stated: "A survivor has the right to have an attorney present during all stages of any interview, deposition, or other interaction with representatives from the legal or criminal justice systems within this state." Provides that a victim has the right to "timely" (rather than "prompt") analysis of sexual assault forensic evidence. Adds language to right to be informed of forensic evidence analysis results: "so long as the provision of such information would not hinder or interfere with investigation or prosecution of the case associated with such information."</i>					
<i>WFO Legislation</i>					
LB110	Wishart	Monitor	Judiciary 01/25/2019	General File 05/10/2019	<p>Adopt the Medical Cannabis Act</p> <p><i>Creates a marijuana enforcement division that is responsible for maintaining a registry of patients who may: consume marijuana legally and legally possess 3 ounces or less of marijuana on his or her person, 6 or fewer mature marijuana plants, 6 or fewer seedling marijuana plants, 1 ounce or less of concentrated marijuana, 72 ounces or less of edible marijuana, and 8 ounces or less of marijuana in his or her residence. The application created by the division must include a certification from the patient's participating health care practitioner which certifies that the patient has been diagnosed with a qualifying medical condition. The division shall register up to 10 producers, processors, and dispensaries in each congressional district in Nebraska for the production and processing of all cannabis within Nebraska by Nov. 1, 2020. Any dispensary may distribute cannabis and cannabis products but shall not distribute any cannabis in a form other than those forms allowed under the Medical Cannabis Act. Producing, processing or dispensing outside of the act or submitting false documents under the act is a Class IV felony. Creates a Medical Cannabis Board with at least 1 person from each congressional district, at least 1 person who is employed by a law enforcement agency, at least 1 person licensed to practice medicine and surgery, and at least 3 persons who are advocates for the use of cannabis.</i></p>



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					<p><i>Proposed AM21 (Wishart): Replaces the bill. Creates a Cannabis Enforcement Department division that is responsible for maintaining a registry of patients who may consume marijuana legally and legally possess 3 ounces or less of marijuana on his or her person, 6 or fewer mature marijuana plants, 6 or fewer seedling marijuana plants, 1 ounce or less of concentrated marijuana, 72 ounces or less of edible marijuana, and 8 ounces or less of marijuana in his or her residence. Any dispensary may distribute cannabis and cannabis products but shall not distribute any cannabis in a form other than those forms allowed under the Act. Producing, processing or dispensing outside of the act or submitting false documents under the act is a Class IV felony. Creates a Medical Cannabis Board, with 9 members, 7 appointed by the Governor and approved by majority of the legislature, with at least 1 person from each congressional district, at least 1 person who is employed by a law enforcement agency, at least 1 person licensed to practice medicine and surgery, and at least 3 persons who are advocates for the use of cannabis. States that cannabis constituted under this act, for purposes of the act, does not constitute a drug. Requires enrollment application to the department for enrollment in the registry program by submitting an application. Prior to the enrollment in the registry by a patient, a participating health care practitioner must determine whether a patient suffers from a qualifying medical condition and if so provide the patient with a written certification. Health care practitioners are not required to participate under the act by providing recommendations, limitations, or restrictions on dosage. The division shall register up to 10 producers, processors, and dispensaries in each congressional district in Nebraska for the production and processing of all cannabis within Nebraska by Nov. 1, 2020. Requires the department adopt and promulgate rules for dispensaries to begin dispensing cannabis to patients in the registry program and public notice of the proposed rules before May 1, 2020. If all jurisdictions in a congressional district prohibit producer operations, the department may register additional producers in another district. Producers, processors, and dispensaries many not employ those under 21. Schools or landlords may not refuse enrollment or lease to a person based on enrollment in the registry program. Requires revocation of registry for cardholder selling cannabis to a person who is not allowed to possess cannabis under the act. An individual selling cannabis to any person other than a patient, nonresident cardholder, registered designated caregiver, or, if listed on the registry verification, may be prosecuted. Application fees as a producer, processor, or a dispensary are \$25,000 and there should be an annual fee not to exceed \$40,000, for the costs of regulating and inspecting. Requires department to adopt and promulgate rules to establish requirements for law enforcement and health care professional to report an adverse event involving cannabis to the department.</i></p> <p><i>Proposed AM1680 (Judiciary): Adds a definition for allowable amount of cannabis (Two and one-half ounces or less of cannabis in any form other than a cannabis product; or a cannabis product containing no more than two thousand milligrams of THC) and changes the list of "qualifying medical conditions." Adds provisions that protect employers who prohibit marijuana use. Provides protections for nonresident patients and caregivers who possess allowable amounts of cannabis.</i></p> <p><i>Adds certain requirements, including continuing education requirements, for participating healthcare practitioners, and requires assessments of patients for potential drug and alcohol abuse, and assessment for family history of schizophrenia and psychotic disorders. Prohibits the prescription of cannabis for pregnant women. Adds protections for pharmacists who dispense cannabis.</i></p> <p><i>Allows for the prosecution of lawful possessors who transfer cannabis to others, under 28-416 - eliminates the Class IV felony specified in the original bill. Adds a section providing that it is unlawful for patients to smoke cannabis. Section 48 of the AM lists what shall not be grounds for enforcement.</i></p>



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					<p><i>Requires the department to create and implement a written certification program for healthcare practitioners, including a process for the granting of a waiver to dispense a larger amount of cannabis than allowed, and including a system of at least 3 tiers of producers based on size and quantity produced. Allows the department to suspend or revoke a license after a public hearing, and requires that the department immediately prohibit further participation by a licensee who sells cannabis to a person not authorized to possess it. Requires the department to immediately revoke the certification of a patient or caregiver who sells cannabis to those not authorized to possess it</i></p> <p><i>Adds a section that provides that no state or local entity may deny a person's right to own or possess a firearm based on their status as a patient or caregiver. Adds requirements for the composition of the Medicinal Cannabis Board. Requires that by December 20, 2020, the Medicinal Cannabis Board make recommendations to the legislature about whether anxiety and PTSD should be on the list of conditions treatable with cannabis.</i></p> <p><i>Proposed AM1865 (Crawford): Provides that cannabis products do not include edibles.</i></p>
LB140	Kolowski	Support (with letter)	Health and Human Services 01/25/2019	In Committee 01/15/2019	<p>Change provisions relating to the Indoor Tanning Facility Act</p> <p><i>Prohibits use of indoor tanning facilities by anyone under the age of 18. Eliminates section of the old law that allowed use of indoor tanning for anyone over 16 or under 16 with parental consent. Imposes a \$100 civil penalty for those who allow customers under 18 to tan. Requires the posting of warning signs on the dangers of tanning.</i></p>
LB205	Kolterman	Support	Health and Human Services 01/23/2019	Failed to Advance 02/11/2020	<p>Adopt the Surgical Technologist Registration Act</p> <p><i>Beginning Jan. 1, 2020, requires any surgical technologist to register with the Surgical Technologist Registry no later than 180 days after the commencement of the contract period or the date of employment or July 1, 2020, whichever is later. To be eligible to register as a surgical technologist, an individual shall: be at least 19 years of age; have a high school diploma or equivalent; and be of good moral character. The individual must provide one of the following: documentation of current certification as a surgical technologist by the State of Nebraska or a national certifying body approved by the board; documentation of completion of an accredited program in surgical technology accredited by the Commission on Accreditation of Allied Health Education Programs or the Accrediting Bureau of Health Education Schools; or certification of competency assessment completed by a licensed health care professional.</i></p> <p><i>AM1436 (Health and Human Services): Adds definitions. Provides that tasks of a registered surgical technologist may only be performed under the authority of a practitioner licensed under the Uniform Credentialing Act who is directing (not delegating) surgical tasks. Provides procedures and time constraints for informal conferences, if requested, after a decision to deny or refuse renewal of a registration. Requires facilities to report technologist incompetence to the department and provides such reports are confidential. Provides that complaints, records, and reports are confidential and may not be used as evidence in legal proceedings except in front of the department and upon judicial review of such proceedings. Allows, but does not require, the department to promulgate rules and regulations.-LOST 2/11/20</i></p>



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LB216	Kolterman	Support	Judiciary 02/06/2019	In Committee 01/15/2019	<p>Prohibit releasing a person in custody to avoid medical costs</p> <p><i>Provides that a law enforcement having custody of a person shall not release such person from custody merely to avoid the cost of necessary medical services while the person is receiving such services from a health care provider unless the provider consents to release or unless the release is ordered by a court. If the law enforcement is satisfied that probable cause no longer exists to believe such person committed a crime based upon an ongoing investigation or if the prosecuting attorney gives notice that no charges will be filed at the time such person is in custody, the law enforcement officer may release such person from custody. Upon the date of notification to the health care provider that the person is being released from custody for the reasons above, the law enforcement agency shall no longer be responsible for the cost of such person's medical services.</i></p> <p>NHA Legislation</p>
LB240	Hansen, M.	Monitor	Judiciary 02/20/2019	In Committee 01/16/2019	<p>Change procedures for determining competency to stand trial</p> <p><i>For the purposes of competency restoration, provides that the judge shall order the defendant to be committed to DHHS to provide appropriate treatment to restore competency, which may include commitment to a state hospital for the mentally ill; another appropriate state-owned or state-operated facility; a facility, other than a jail, operated by a political subdivision; or on an outpatient basis at any such facility until such time as the disability may be removed. If DHHS determines that treatment outside of a state hospital for the mentally ill is appropriate, DHHS shall file a report outlining its determination with the court. The court may approve or deny the alternative treatment plan. A defendant shall not be eligible for outpatient competency restoration treatment if he or she is charged with an offense for which bail is prohibited or if the judge determines that the public's safety would be at risk.</i></p> <p>LB240 amended into LB686.</p>
LB245	Erdman	Monitor	Health and Human Services 03/28/2019	In Committee 01/16/2019	<p>Eliminate an exception to the medicaid preferred drug list</p> <p><i>Removes exception that excludes antidepressant, antipsychotic, and anticonvulsant drugs from consideration for inclusion in the Medicaid preferred drug list.</i></p>
LB247	Bolz	Monitor	Judiciary 02/01/2019	Select File 03/09/2020 Speaker Priority Bill	<p>Adopt the Advance Mental Health Care Directives Act</p> <p><i>Provides for binding advance mental healthcare directives to set forth instructions for mental health care and consent to various treatments. Requires directives be in writing, signed by principal or representative, state whether it is revocable during incapacity, and have witnesses. Provides for special requirements for directives that are irrevocable. Sets out requirements for agents and for the revoking of directives by the principal.</i></p>



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					<i>AM2206 (Judiciary): White copy amendment that includes a new section to allow the attorney in fact to consent to inpatient care and psychotropic medication without a specific grant of authority if general authority is broad enough. If incapacitated principal refuses inpatient or medication, attorney in fact can authorize if directive irrevocable. If a principal has capacity, principal decision overrides attorney in fact. An additional new section provides that a principal with capacity prevails over the directive even if irrevocable and if a principal has both a power of attorney for health care and a directive, the directive prevails over the general for mental health instructions. Provides for liability limitations (criminal/civil/disciplinary) for health professionals acting within reasonable medical standards, good faith reliance on directive or attorney in fact. Includes a form for the directive.- ADOPTED 3/4/20</i>
LB254	McCollister	Monitor	Business and Labor 02/04/2019	Final Reading 03/12/2019	<p>Adopt the Fair Chance Hiring Act</p> <p><i>Prohibits an employer (defined as having 15 or more employees) or employment agency from asking a job applicant to disclose information concerning the applicant's criminal record or history, including any inquiry on any employment application, until it is determined that the applicant meets the minimum employment qualifications. Prior to determining whether an applicant meets the minimum employment qualifications, an employer or employment agency may ask the applicant to disclose information concerning the applicant's criminal record or history if the applicant is applying for a position for which a criminal history record information check is required by federal or state law, or federal or state law specifically disqualifies an applicant with a criminal background even if such law allows for a waiver that would allow such applicant to be employed; and the inquiry is limited to the types of criminal offenses related to the required check. This does not prohibit a criminal history check after it is determined that the applicant meets the minimum employment qualifications, but the applicant must be afforded an opportunity to explain the information and circumstances regarding any convictions.</i></p> <p><i>AM384 (Hansen, B.): Replaces the bill. Provides that an employer who asks an applicant to disclose information about their criminal history must give the applicant an opportunity to explain the information and circumstances.-ADOPTED 2/20/19</i></p>
LB276	McCollister	Monitor	Revenue 02/13/2019	In Committee 01/17/2019	<p>Change provisions relating to the taxation of income from certain small business corporations and limited liability companies</p> <p><i>Beginning in 2020, eliminates a tax break enacted in 1987 that allows Nebraskans to avoid paying income taxes on earnings from S-corporations and limited liability companies that are generated from goods or services sold outside Nebraska, even when the income isn't taxed in another state.</i></p>



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LB305	Crawford	Monitor	Business and Labor 02/04/2019	General File 03/07/2019	<p>Adopt the Healthy and Safe Families and Workplaces Act</p> <p><i>Requires that employees accrue a minimum of one hour of paid sick and safe time for every 30 hours worked, but not more than 40 hours in a calendar year unless the employer sets a higher limit. Paid sick and safe time may be used for an employee's mental or physical illness, injury, or health condition; care of a family member with a mental or physical illness, injury, or health condition; and absence necessary due to domestic abuse, domestic assault, sexual assault, or stalking, regardless of whether a charge has been filed or a conviction obtained, if leave is to allow the employee to obtain certain services for themselves or a family member. If the use of paid sick and safe time exceeds more than 3 consecutive workdays, an employer may require reasonable documentation that the time has been used for an appropriate purpose. Any information provided to an employer regarding paid sick and safe time shall be confidential. Makes unlawful any interference, restraint, or other denial of the exercise of any right protected by the Healthy and Safe Families and Workplaces Act.</i></p> <p><i>Proposed AM592 (Business and Labor): Eliminates "domestic partner" from the definition of family member.</i></p> <p><i>Proposed FA91 (Hansen, B.): Strikes section 9 from AM592, which enabled the Department of Labor to administer and enforce the Act and, in addition, adopt and promulgate rules and regulations to carry out the Act—Filibuster amendment.</i></p>
LB306	Crawford	Monitor	Business and Labor 01/28/2019	Final Reading 02/22/2019	<p>Change provisions relating to good cause for voluntarily leaving employment under the Employment Security Law</p> <p><i>Adds leaving employment to care for a family member with a serious health condition to the list for good cause for voluntarily leaving employment.</i></p> <p><i>AM71 (Business and Labor): Adds that individual must have used all reasonable efforts to preserve employment but voluntarily leaves employment for the purpose of caring for a family member. - ADOPTED 2/7/19</i></p>
LB311	Crawford	Monitor	Business and Labor 02/04/2019	General File 03/07/2019	<p>Adopt the Paid Family and Medical Leave Insurance Act</p> <p><i>Allows covered employees to take paid family medical leave for qualifying reasons beginning July 1, 2021, for a maximum of 6 to 12 weeks during any year depending on the reason. Payment to individuals using the leave ranges from 66% to 95% of their average weekly wage and is based upon their average wage in relation to the state's average weekly wage. In order to receive the leave benefits, employees must file a claim with the Commissioner of Labor. The Commissioner shall run the Paid Family Medical Leave Insurance Fund, and it shall be funded by private donations, legislative transfers, and required contributions from covered employers as determined by the Commissioner (applicable to employers with an annual payroll of \$100,000 or more). Specifies other requirements.</i></p> <p><i>Proposed AM570 (Business and Labor): Changes the payback to the Health Care Cash Fund from two years to four years. Allows one year of contribution collections prior to benefit payout as opposed to six months in the original bill. Allows employees to take 6 weeks of medical leave instead of 12. Removes the term domestic partner.</i></p>



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					<i>Proposed FA24 (Slama): Amends the amounts of leave allowed under the bill from 12 weeks to 6 weeks for certain qualifying reasons and from 6 weeks to 4 weeks for other qualifying reasons.</i>
LB313	Bolz	Support	Executive Board 02/20/2019	In Committee 01/18/2019	<p>Provide the office of Inspector General of the Nebraska Correctional System with oversight authority over regional center</p> <p><i>Brings the regional centers within the oversight provided by the Correctional System and Mental Health Facilities Oversight Act (formerly named "Office of Inspector General of the Nebraska Correctional System Act"); includes mental health facilities among the responsibilities of the office of Inspector General (IG); includes violations of rules of the Division of Behavioral Health related to the regional centers within the purview of the office of IG; provides that the Division of Behavioral Health shall provide the Public Counsel and IG with direct computer access to all computerized records maintained in connection with the regional centers (access to patient records subject to patient consent); provides that on or before Nov. 1, 2020, and every year thereafter, the IG shall provide each member of the Judiciary Committee, the Health and Human Services Committee, the Governor, and the Clerk of the Legislature a summary of reports and investigations of regional centers and the Division of Behavioral Health made under the Act for the preceding year.</i></p>
LB314	Briese	Monitor	Revenue 02/14/2019	In Committee 01/18/2019	<p>Adopt the Remote Seller Sales Tax Collection Act and change revenue and taxation provisions</p> <p><i>Imposes and increases a number of taxes and directs the proceeds to Property Tax Credit Relief Fund and school aid. Creates the Remote Seller Sales Tax Collection Act, which subjects out-of-state, remote sellers of property for delivery into the state to sales tax in Nebraska (see also LB 18), if there are more than \$100,000 of revenue or completed 200 or more transactions into Neb; increases sales tax from 5.5% to 6% and adds sales taxes on certain services including animal specialty and pet-related services, including veterinary services, specialty services performed on livestock, and animal grooming performed by a licensed veterinarian or a licensed veterinary technician in conjunction with medical treatment; provides that, for taxable years beginning on or after Jan. 1, 2020, residents who are shareholders of a small business corporation or who are members of an LLC, shall include in their Neb. taxable income, to the extent includable in federal gross income, their proportionate share of such corporation's or LLC's federal income; such residents shall include in Neb. taxable income fair compensation for services rendered to such corporation or LLC; the tax on wholesalers and manufacturers of beer is raised to \$1.38/gallon, and \$3.51/gallon of wine; revenue derived from increased tax rates shall be credited to the Property Tax Credit Cash Fund; increases the amount of paid documentary stamp taxes required to make a transaction of real property to be considered a sale from \$2.25 to \$2.75; increases cigarette tax to \$2.14 (up from \$0.64 and adds vapor products to the list of tobacco products); provides that beginning Jan. 1, 2020, \$1.50 of this tax shall be placed in the Property Tax Credit Cash Fund; on or after Jan. 1, 2020, a surtax is imposed on any individual who: is subject to state income taxes and has federal adjusted gross income for the taxable year of 500k or more at a rate of 7.84%; provides that for school fiscal year 2020-21 and each thereafter, each local system's allocated income tax funds shall be calculated by multiplying the local system's income tax liability by 20%; creates the School Financing Review Commission and establishes member qualifications and duties.</i></p>
LB327	Bolz	Support	Appropriations 03/26/2019	In Committee 01/18/2019	<p>State intent to appropriate funds for an increase in rates paid to behavioral health service providers</p> <p><i>Provides intent to increase funding for behavioral health providers: 5% increase each year of the biennium in rates paid by DHHS for psychiatric services for individuals age 21 and older, mental health and substance abuse treatment services for children and adolescents, and rehabilitative psychiatric services, and 5% increase for behavioral health services under Probation Community Corrections.</i></p>



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<i>LB327 amended into LB294.</i>					
LB364	Quick	Oppose	Business and Labor 03/04/2019	In Committee 01/18/2019	<p>Change provisions relating to a limit on fees under the Nebraska Workers' Compensation Act</p> <p><i>Authorizes the court to establish a fee for any opinion or report addressing the medical condition, causation, or disability of an employee in a workers comp claim.</i></p> <p><i>Proposed AM475 (Quick): Requires the compensation court to establish schedules of fees for any opinion or report addressing the medical condition, causation, or disability.</i></p>
LB365	Crawford	Support	Judiciary 02/27/2019	In Committee 01/18/2019	<p>Adopt the Health Care Directives Registry Act</p> <p><i>An adult who has executed a written advance health care directive may register such document with the registry, and access to the registry is allowed when there is a lawful order of a court of competent jurisdiction, requested by the registrant or the registrant's legal representative, requested by the Public Guardian, requested by an emergency service agency for the purpose of providing or assisting with the provision of medical care to the registrant, or requested by a health care provider only for the purpose of providing health care to the registrant.</i></p>
LB378	Hansen, B.	Oppose	Transportation and Telecommunications 02/12/2019	General File 05/01/2019	<p>Change helmet provisions for autocycles, motorcycles, and mopeds</p> <p><i>Makes persons above the age of 21 exempt from having to wear a helmet on a motorcycle. Requires all motorcycle operators to wear eye protection.</i></p> <p><i>Proposed AM1659 (Hilkemann): Replaces the original sections with sections that require hearing protection for motorcycle drivers and passengers in addition to the eye protection required in the original bill and retains the helmet requirement. (Filibuster Amendment)</i></p> <p><i>Proposed AM1662 (Hilkemann): Adds a section providing that persons under 16 shall not be a passenger on a motorcycle or moped on any highway in the state. (Filibuster Amendment)</i></p> <p><i>Proposed AM1663 (Hilkemann): Strikes the original sections and replaces them with new section that requires eye protection (and keeps the current helmet requirement). (Filibuster Amendment)</i></p> <p><i>Proposed AM1664 (Hilkemann): Adjusts the motorcycle registration fee from \$600 to \$100. (Filibuster Amendment)</i></p> <p><i>Proposed AM1665 (Hilkemann): Adds a section which requires that holders of class M licenses over 16 years old be organ and tissue donors absent a medical or religious exemption (Filibuster Amendment)</i></p>
LB403	Stinner	Support	Appropriations 03/25/2019	In Committee 01/22/2019	<p>Provide a duty for the Department of Health and Human Services when calculating certain medicaid rates</p> <p><i>DHHS shall not include application of the inflation factor when calculating medicaid nursing facility rates for FY2019-20 and all future fiscal years. For purposes of the methodology for computing future nursing facility rates, the department shall use the amounts appropriated by the Legislature.</i></p>



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<i>LB403 amended into LB294.</i>					
LB404	Stinner	Support	Appropriations 03/25/2019	In Committee 01/22/2019	State intent relating to medicaid budgeting <i>Appropriations for the medicaid aid obligations of the state shall be made in three separate and distinct appropriations programs: Medicaid Expansion, Medicaid Long-Term Care, and Other Medical Assistance. The Medicaid Long-Term Care budget program shall include a separate subprogram for nursing facilities appropriations and expenditures.</i>
<i>LB404 amended into LB294.</i>					
LB439	Crawford	Monitor	Health and Human Services 02/21/2019	In Committee 01/23/2019	Require coverage for chiropractic services under the Medical Assistance Act <i>Covers 24 treatments per benefit year.</i>
LB455	Arch	Support	Judiciary 03/27/2019	In Committee 01/23/2019	Change medical services payment provisions relating to jails <i>Places responsibility on apprehending or arresting agency for costs relating to medical examinations to determine fitness for confinement, which are required by the governmental agency operating the institution or facility where the individual requiring services will be lodged. Adds examinations of determination of fitness for confinement to the definition of the term "medical services."</i>
LB480	Quick	Monitor	Appropriations 03/25/2019	In Committee 01/24/2019	State intent relating to appropriations to local public health departments <i>States the intent to appropriate to DHHS \$900,000; requires the department to distribute \$50,000 to each public health department for the purpose of improving preventative health and promoting workplace wellness initiatives.</i>
LB484	Lowe	Support	Judiciary 03/15/2019	In Committee 01/24/2019	Change provisions relating to assault on certain employees and officers <i>Defines the term "public safety officer" to include peace officer, probation officer, firefighter, out-of-hospital emergency care provider, a DHHS employee working at a youth rehabilitation and treatment center, or a DHHS employee if the person committing the offense is committed as a dangerous offender under the Sex Offender Commitment Act. Amends the penalty enhancer for crimes against a pregnant woman to include assault on a public safety officer. Amends assault offenses related to offenses assault on a public safety officer or a health care professional, establishing that such offenses apply when assault occurs while the public safety officer is engaged in official duties or while the health care professional is on duty at a hospital or health clinic.</i>



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LB487	La Grone	Neutral	Business and Labor 03/04/2019	In Committee 01/24/2019	Require the Nebraska Workers' Compensation Court to adopt an evidence-based drug formulary <i>Requires the Workers' Compensation Court to adopt an evidence-based drug formulary consisting of Schedule II, III, IV, and V controlled substance prescription drugs dispensed in connection with any workers' compensation claim. Provides that prescription drugs included in the formulary be presumed reasonable and may be prescribed or dispensed without prior authorization. Drugs not included in the formulary are presumed to be reasonable if prior authorization is obtained from the workers' compensation insurer, risk management pool, or self-insured employer. Requires the compensation court to meet with various stakeholders in the adoption of the drug formulary. Allows any party to request an independent finding if they are denied payment for drugs not in the formulary.</i>
LB488	Howard	Monitor	Education 03/25/2019	In Committee 01/24/2019	Adopt school district requirements for mental health education and change school district requirements for drug awareness and prevention <i>Requires school districts to adopt age-appropriate mental health education that includes defining mental health, recognizing mental health warning signs, identifying characteristics of mental wellness, and utilizing resources for assistance with mental health issues. Requires schools to adopt age-appropriate drug awareness and prevention education including strategies to prevent and reduce use of tobacco, alcohol, and other drugs, strategies to reduce student risk factors, development of school environments and activities free of alcohol, tobacco, and drug use, and at least 60 minutes of instruction on opioid use.</i>
LB489	Howard	Monitor	Health and Human Services 03/28/2019	In Committee 01/24/2019	Require registration for the prescription drug monitoring system <i>Requires credential holders under the Uniform Credentialing Act who are prescribers or dispensers to register for the prescription drug monitoring system. Requires the establishment of a system of registration for credential holders and that registration be a requirement for renewal of the credential. Provides that no fee be charged for registration.</i>
LB497	Friesen	Monitor	Revenue 02/14/2019	In Committee 01/24/2019	Adopt the School District Property Tax Authority Act and change revenue and taxation provisions <i>Limits school district's property tax authority and establishes minimum local school aid funding. Increases taxes on beer and wine wholesalers and manufacturers. Decreases school district taxation on ag land over time to 40% by 2020. Ends the Personal Property Tax exemption after tax year 2020. Eliminates several tax exemptions, including food for home consumption; non-business vehicle maintenance and repair, clothing cleaning, real property maintenance, personal care services, pet-related services, and storage services. Increases the cigarette tax from 64 cents to \$.14 per package.</i>
LB498	Wishart	Monitor	Health and Human Services 02/22/2019	In Committee 01/24/2019	Provide for medical assistance coverage of family planning services as prescribed <i>Requires state plan amendment be submitted to the federal Centers for Medicare and Medicaid to provide assistance for family planning services for persons whose income is at or below eligibility levels set by the state. Defines family planning services to include preventative care such as cancer screenings, FDA-approved contraception, interpersonal violence screening, treatment for STDs, and other routine care. Excludes elective abortion.</i>



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LB499	Morfeld	Monitor	Health and Human Services 03/27/2019	In Committee 01/24/2019	Provide requirements for services by psychologists <i>Provides that a psychologist shall not accept a professional role that is outside the psychologist's scope of confidence. A psychologist shall not accept a professional role when the psychologist has a conflict of interest that could adversely affect the provision of such service. When a psychologist is unable to provide a service with an established patient, the psychologist shall make a professional referral.</i>
LB501	Hunt	Monitor	Banking, Commerce and Insurance 03/04/2019	In Committee 01/24/2019	Require insurance coverage for in vitro fertilization procedures <i>Requires that benefits for in vitro fertilization procedures be provided to the same extent as benefits provided for other pregnancy-related procedures under the policy if patient has been unable to attain a successful pregnancy through any less costly applicable infertility treatments.</i>
LB503	Hunt	Monitor	Judiciary 03/20/2019	In Committee 01/24/2019	Eliminate requirement that physician be physically present in same room when an abortion is performed <i>Removes language that provides that no abortion shall be performed, induced, or attempted unless the physician who uses or prescribes any instrument, device, medicine, drug, or other substance to perform, induce, or attempt the abortion is physically present in the same room with the patient with the physician performs, induces, or attempts to perform or induce the abortion. Any person who knowingly or recklessly violates this subsection shall be guilty of a Class IV felony.</i>
LB518	Linehan	Support	Health and Human Services 03/06/2019	Final Reading 02/11/2020	Adopt the Support for Trafficking Survivors Act <i>Establishes the Office of Support for Trafficking Survivors within DHHS, which is to oversee and support the programs in this act and coordinate and monitor the department's efforts, other agencies, and funding related to human trafficking. Creates the Support for Trafficking Survivors Advisory Board to award grants and create a state plan for support and services for trafficking victims. Sets out requirements for membership of the board to include survivors of trafficking, representatives of service providers, representatives of child advocacy centers and law enforcement, a county attorney with experience working with sex trafficking victims, an expert in behavioral health, as well as non-voting members from non-profits and other state agencies, including the Attorney General's Office. Provides for no compensation for the board members but allows reimbursement for their expenses. Gives board the power to create and review state plans to respond to and prevent human trafficking. Requires board to establish a competitive grant program in support of the state plan. Allocates funds in the Support for Trafficking Survivors fund to programs that identify, prevent, and respond to human trafficking. Establishes requirements for programs receiving grant money including that they use trauma-informed and victim-centered approaches, ensure case management is provided, inform victims of their option to work with the criminal justice system, and maintain confidentiality. States intent to appropriate \$450,000 from the General Fund to the Support for Trafficking Survivors Fund for each the next two fiscal years in order to implement the Support for Trafficking Survivors Act and \$50,000 in each of the next two years to the Human Trafficking Investigation Assistance Fund, administered by the Crime Commission to provide funding to state and local law enforcement for investigations, operations, and prosecution of sex trafficking.</i>



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					<p>AM899 (Health and Human Services): Replaces the bill. Strikes the appropriations for the two Funds. Without the appropriations, the competitive grant program for supportive services for victims and all related requirements are contingent on public or private funding becoming available, and language is inserted in several sections accordingly. Removes the reference to the start of the grant program. The reporting requirement and requirement that the board contract with an independent consultant to evaluate the state plan are also made contingent on funding. Amends the Funds created in LB518. Under AM899, the existing Human Trafficking Victim Assistance Fund would become the fund for supportive services and treatment for victims of human trafficking, replacing the Support for Trafficking Survivors Fund that was newly created original bill. Under AM899, the Sex Trafficking Investigation Assistance Fund would be newly created to reimburse state or local law enforcement for expenses associated with victim-centered, trauma-informed investigations, operations, or prosecutions. It will be administered by the Nebraska Commission on Law Enforcement and Criminal Justice. AM899 removes the anti-discrimination provision for grantees. Removes the coordinator required for the Office of Support for Trafficking Survivors and removes that position from the Advisory Board. Under AM899 the board will elect a chairperson.-ADOPTED 1/27/20</p> <p>FA92 (Chambers): Amends AM899 to include recognition and acknowledgment of renowned members of the All-American Pantheon of Human Traffickers, including George Washington, Thomas Jefferson, James Madison, Andrew Jackson, James Monroe, Alexander Hamilton, Patrick Henry, and Francis Scott Key.-WITHDRAWN 1/27/20</p> <p>AM2243 (Chambers): Another creative amendment calling out the Founding Fathers.-LOST 2/6/20</p> <p>AM2327 (Blood): Amends in LB745.-ADOPTED 2/6/20</p> <p>Proposed AM2588 (Chambers): Another amendment calling out our slaveholding Founding Fathers.</p> <p>LB745 amended into LB518</p> <p>WFO Legislation</p>
LB526	McDonnell	Monitor	Business and Labor 03/04/2019	In Committee 01/24/2019	<p>Change provisions relating to compensation for temporary disability under the Nebraska Workers' Compensation Act</p> <p><i>Provides that the compensation for temporary disability shall continue until the later of any permanent disability has been determined or until a loss of earning capacity evaluation has been issued or 30 days after employee has been given notice as specified.</i></p>
LB529	Groene	Oppose	Revenue 02/28/2019	In Committee 01/24/2019	<p>Change provisions relating to a property tax exemption for hospitals</p> <p><i>Provides the additional requirement that a hospital, in order to qualify for a property tax exemption, must permit licensed medical practitioners to use the hospital's facilities whether the practitioner is employed there or not, unless good cause is shown. If a hospital meets this requirement, the property of such hospital shall be exempt in proportion to the percentage of the hospital's services that are provided gratuitously. A hospital shall establish such percentage by providing documentation to the applicable county assessor showing the hospital's gross revenue for the most recently completed fiscal year and an estimate of the value of the services that the hospital provided gratuitously during such year.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB541	Walz	Monitor	Health and Human Services 03/13/2019	Approved by Governor on February 19, 2020 02/20/2020	<p>Change provisions related to the bone marrow registry</p> <p><i>Requires DHHS to educate Nebraska residents about patient populations benefitting from bone marrow donations and how to acquire a free buccal swab kit from a bone marrow registry.</i></p> <p><i>AM950 (Health and Human Services): Adds a section to allow a physician to ask new patients between ages 18 and 45 if they are on the bone marrow registry and provide information to them from DHHS if they are not on the registry. Requires the department to provide information to the public about marrow donation using the assistance of a national marrow donor program. -ADOPTED 1/29/20</i></p>
LB554	Wishart	Monitor	Health and Human Services 02/22/2019	In Committee 01/24/2019	<p>Change provisions relating to prescription drugs not on the preferred drug list under the Medical Assistance Act</p> <p><i>Provides that a practitioner may prescribe an antidepressant, antipsychotic, or anticonvulsant medication to a Medicaid patient if it is medically necessary and no longer requires a showing of therapeutic failure. Further provides that a managed care organization shall not substitute a generic equivalent for an antidepressant, antipsychotic, or anticonvulsant medication.</i></p>
LB555	Hunt	Monitor	Health and Human Services 03/14/2019	In Committee 01/24/2019	<p>Adopt the Sexual Assault Emergency Care Act and provide for disciplinary action against hospitals</p> <p><i>A hospital which provides emergency care for a sexual assault survivor shall: provide the survivor with medically and factually accurate and objective written and oral information about emergency contraception; provide the survivor with written and oral information in a language the sexual assault survivor understands about the option to receive emergency contraception at the hospital; and dispense a complete course of emergency contraception, in accordance with best practices and established protocols for sexual assault forensic medical examinations, to the survivor who accepts or requests it.</i></p>
LB557	Lindstrom	Support	Health and Human Services 02/13/2019	In Committee 01/24/2019	<p>Change provisions relating to prescriptions for controlled substances</p> <p><i>Requires the prescribing practitioner involved in the course of treatment as the primary prescribing practitioner or as a member of the patient's care team who is under the direct supervision or in consultation with the primary prescribing practitioner to discuss with the patient the risks of controlled substances and opiates, unless such conversation has already taken place within the last 60 days. Does not apply to hospice, cancer, or palliative care treatment. For purposes of the requirement above and the limitation on prescriptions for patients under 18 years of age, prescribing practitioner includes: physician, a physician assistant, a dentist, a veterinarian, a pharmacist, a podiatrist, an optometrist, a certified nurse midwife, a certified registered nurse anesthetist, a nurse practitioner, a scientific investigator, a pharmacy, a hospital, or any other person licensed, registered, or otherwise permitted to distribute, dispense, prescribe, conduct research with respect to, or administer a controlled substance in the course of practice or research in this state, including an emergency medical service.</i></p>

LB557 amended into LB556.



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Document	Senator	Position	Committee	Status	Description
LB558	Hilkemann	Monitor	Appropriations 03/26/2019	In Committee 01/24/2019	<p>Appropriate funds to the Department of Health and Human Services</p> <p><i>Provides \$10,269,035 in each of the next two years for an increase in rates paid to providers of developmental disability services.</i></p> <p><i>Proposed AM920 (Hilkemann): Adds specificity. Appropriates federal funds to DHHS for program 348 (Medical Assistance) for Program 424 (DD) for rates paid to providers of developmental disability services as determined by the rate study conducted by the Division of Developmental Disabilities and completed in 2018.</i></p>
LB563	Bolz	Support	Education 02/05/2019	General File 02/26/2020	<p>Adopt the Access College Early Tech Promise Program Act</p> <p><i>Directs the Coordinating Commission for Post Secondary Education to award scholarships to eligible students studying for an in-demand occupation (as determined by a committee within the Commission) at a community college. The award for an academic year shall not exceed the sum of tuition and fees plus \$1,500 for educational expenses minus any Federal Pell Grant granted to the eligible student for such academic year. No award for an academic year shall be less than \$1,500.</i></p> <p><i>Proposed AM2526 (Education): Strikes "any tribally controlled community college in Nebraska" from the definition of eligible institution and replaces it with "any not-for-profit, two-year college in Nebraska which is a member institution of an accrediting body recognized by the United States Department of Education." The language continues to include tribal colleges, but opens the class to other qualifying colleges as well.</i></p>
LB567	Morfeld	Monitor	Health and Human Services 02/13/2019	In Committee 01/24/2019	<p>Adopt the Prescription Drug Cost Transparency Act</p> <p><i>Applies to the manufacturer of a drug that is purchased or the price of which is reimbursed by the state (or entity acting on behalf of a state purchaser), a health maintenance organization, a health insurer, a fraternal benefit society, or a pharmacy benefit manager.</i></p> <p><i>-A manufacturer of a drug with a wholesale acquisition cost (WAC) of more than \$40 for a course of therapy shall provide notice to purchasers if the increase in the WAC is more than 16%, including the proposed increase and any cumulative increase that occurred within the previous two calendar years prior to the year in which the sale is made. The written notice shall be provided at least 60 days prior to the planned effective date of the increase and shall include the date of the increase, the WAC at the time of the notice, the dollar amount of the increase in the WAC, and a statement regarding whether a change or improvement in the drug necessitated the price increase, and, if so, a description of such.</i></p> <p><i>-The pharmacy benefit manager shall provide notice of the increase to contracting public and private purchasers which provide coverage to more than 500 lives.</i></p> <p><i>-A manufacturer shall quarterly report to the Department of Administrative Services information for each drug for which notice to purchasers is required under this Act, including a schedule of WAC increases for the drug for the previous years; acquisition information, if any; patent expiration date if so protected; federal drug categorization; a description of the change or improvement in the drug, if any, that necessitated the increase in WAC; and the manufacturer's U.S. sales volume for the calendar year prior to the increase in the WAC.</i></p>



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					<p>-A manufacturer shall provide written notification to the department if it introduces a new drug to market at a WAC that exceeds the threshold set for a specialty drug under the Medicare Modernization Act within 3 days after the release of the drug in the commercial market. Within 30 days after notification, the manufacturer shall report to the department: a description of the pricing plans used in the launch of the new drug in the U.S. and internationally; the estimated volume of patients that may be prescribed the drug; an indication of whether the prescription drug was granted breakthrough therapy designation or priority review prior to final approval by FDA; and the date and price of acquisition if the drug was not developed by the manufacturer.</p> <p>-The manufacturer may limit all reported information to that which is otherwise publicly available, and the department shall publish such information on its website within 60 days of receipt.</p> <p>(See LB 862 from 2018)</p>
LB569	Morfeld	Monitor	Banking, Commerce and Insurance 03/05/2019	In Committee 01/24/2019	<p>Adopt the Out-of-Network Consumer Protection, Transparency, and Accountability Act</p> <p>Prior to scheduling an appointment for a nonemergency procedure, a health care facility shall disclose to the person whether the health care facility is in-network or out-of-network with respect to the person's health benefits plan and advise the person about certain insurance matters, including that "unless the covered person, at the time of the disclosure required pursuant to this subdivision, has knowingly, voluntarily, and specifically selected an out-of-network health care provider to provide services, the covered person will not incur any out-of-pocket costs in excess of the charges applicable to an in-network procedure." Requires health care facilities to post on their website: the health benefits plans in which the health care facility is a participating health care provider; a statement that physician services provided in the health care facility are not included in the facility's charges; and a statement that health care providers who provide services in the health care facility may or may not participate with the same health benefits plans as the health care facility. Requires disclosures of the health care provider. Provides that if a covered person receives medically necessary services at any health care facility on an emergency or urgent basis as defined by EMTALA, the facility shall not bill the covered person in excess of any deductible, copayment, or coinsurance amount applicable to in-network services pursuant to the covered person's health benefits plan. If inadvertent out-of-network services or services provided at an in-network or out-of-network health care facility on an emergency or urgent basis are performed, the out-of-network health care provider may bill the carrier for the services rendered. The carrier may pay the billed amount or notify the health care provider within 20 days that the carrier considers the claim to be excessive; the carrier and the health care provider then have 30 days to negotiate a settlement.</p>



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LB596	Quick	Monitor	Executive Board 02/20/2019	In Committee 01/25/2019	Adopt the Office of Inspector General of Nebraska Public Health <i>Creates the Office of Inspector General of Nebraska Public Health within the Office of Public Counsel to review of state-owned and state-licensed health facilities. Sets term limits and requirements for inspector general and his or her powers. Lists the issues the office is to investigate, including allegations from employees or contractors. Requires law enforcement agencies and prosecuting attorneys to cooperate with investigations. Requires cooperation from facilities, their management, and their employees and protects whistleblowers from retaliation. Allows the inspector to subpoena individuals and records. Provides for confidentiality in reports by the Office of the Inspector. Requires the Inspector General to submit their reports along with recommendations to the Office of Public Counsel and then presented to the facility or agency that was the subject of the report. Inspector is not required to investigate all complaints, but may select those that further the intent of the act and assist legislative oversight. Requires that each Sept., the Inspector General provide copies of all of their reports to the HHS Committee and the Governor and make recommendations.</i>
LB597	Walz	Monitor	Health and Human Services 03/01/2019	In Committee 01/25/2019	Require reporting of incidents and development of policies for assisted-living facilities <i>Requires administrators of assisted living facilities to report to the Division of Behavioral Health incidents of violence between residents, violence between residents and employees, and any incident involving an injury of a resident or employee that requires immediate treatment and restricts the person's usual activities. Also requires them to report any incident involving bedbugs.</i>
LB598	Walz	Monitor	Executive Board 02/27/2019	In Committee 01/25/2019	Provide the Public Counsel with access to data from the Adult Protective Services Central Registry <i>Requires DHHS to provide data in the Adult Protective Services Registry to the Public Counsel on request.</i>
LB614	Crawford	Monitor	Revenue 03/01/2019	In Committee 01/25/2019	Change revenue and taxation provisions <i>Changes school funding and property tax provisions and adds to the Property Tax Credit Relief Fund. Adds new revenue by increasing cigarette tax. Changes the subchapter S apportionment (see LB 276).</i> <i>Proposed AM186 (Crawford): In the provision on the use of the special privilege tax on sellers of wholesale cigarettes, eliminates the requirement that State Treasurer place \$1.50 of the tax in the Property Tax Credit Cash Fund.</i>
LB631	Morfeld	Support	Executive Board 02/22/2019	In Committee 01/25/2019	Create the Medicaid Expansion Implementation Task Force <i>Establishes a Medicaid Expansion Implementation Task Force consisting of 6 voting members from the Legislature and 7 nonvoting members chosen by the Legislature's Executive Board, including a health care provider, behavioral health care provider, a health care consumer or consumer advocate, a hospital representative, a business representative, a representative from a political subdivision likely to have its constituency impacted by Medicaid expansion, and a rural health care provider. Requires the task force to hold at least 3 public hearings. Allows the task force to request, review, and analyze information related to public health issues. Requires the task force to submit a report detailing findings and recommendations to the Legislature by Dec. 1, 2019, and Dec. 1, 2020.</i>



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LB654	Wayne	Monitor	Health and Human Services 03/13/2019	In Committee 01/25/2019	Provide for a type 1 diabetes pilot study <i>Requires DHHS to administer a type 1 diabetes pilot study to identify ways to reduce costs under the medical assistance program by awarding a competitive grant to a postsecondary institution having a college of medicine. Specifies study requirements and requires legislative recommendations to improve population health management. Provides intent to appropriate \$550,000 for each of the next 5 fiscal years.</i>
LB669	Kolterman	Monitor	Appropriations 03/12/2019	In Committee 01/25/2019	Change Nebraska Health Care Cash Fund provisions and state intent relating to an appropriation for pancreatic cancer research <i>Appropriates \$15 million from the Nebraska Health Care Cash Fund for pancreatic cancer research at the University of Nebraska Medical Center. Stipulates the appropriation is to be matched with \$15 million in private or other funds.</i>
LB692	Cavanaugh	Monitor	Health and Human Services 03/14/2019	In Committee 01/25/2019	Change provisions relating to commemorative certificates for a nonviable birth <i>Eliminates requirement that a health care provider advise the patient about the availability of the certificate; provides instead that a patient can request.</i>
LB710	Cavanaugh	Support	Revenue 02/28/2019	In Committee 01/25/2019	Change provisions relating to tobacco including sales, crimes, a tax increase, and distribution of funds <i>Raises the cigarette tax from 64 cents to \$2.14 per package and specifies distribution for various programs, including 25% for Medicaid expansion. Creates the Behavioral Health Provider Rate Stabilization Fund to support reimbursement of behavioral health services providers through provider rates within, but not limited to, the Children's Health Insurance Program, the Medical Assistance Act, the Nebraska Behavioral Health Services Act, and the Nebraska Community Aging Services Act. Changes language listing various tobacco products with the term "tobacco products," grouping all of these products together, including in criminal offense statutes. Expands the definition of tobacco product to include any product that is made from or derived from tobacco, or that contains nicotine, that is intended for human consumption or is likely to be consumed. Changes tax on snuff from 44 cents per ounce to 65% of the purchase price or price at which the maker sells the product to others.</i>
LB716	Hilkemann	Monitor	Health and Human Services 03/15/2019	In Committee 01/25/2019	Create the Medicaid Cost and Quality Data and Analysis Center of Nebraska <i>Requires the creation of the Medicaid Cost and Quality Data and Analysis Center of Nebraska by the state and the University of Nebraska Medical Center with the purpose of managing data to create policy recommendations to decrease the cost of the medical assistance program and improve access to care. Requires the Center have access to health data collected by the Division of Medicaid and Long-Term Care, Division of Public Health, Division of Developmental Disabilities, Division of Children and Family Services, and the Division of Behavioral Health of the department. Requires that every Dec. beginning in 2020, the center report to the HHS and Appropriations Committees on the work of the center and any policy recommendations. Requires the department to submit an application to the federal Centers for Medicare and Medicaid Services to amend the medicaid state plan or seek a waiver to provide for the creation and administration of the Medicaid Cost and Quality Data and Analysis Center of Nebraska, funded through the Nebraska Health Care Cash Fund.</i>



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					<i>Proposed AM524 (Hilkemann): Strikes the original sections and creates the Health Information Initiative Act. Requires DHHS to designate a health information exchange to provide the data and infrastructure needed to assist in operating the medical assistance program. Requires the designated health information exchange provide the governance oversight necessary to ensure that any health information in the designated health information exchange received from the department may be accessed, used, or disclosed in compliance with federal law. Requires DHHS provide the designated health information exchange with data related to health care delivery and claims to carry out the act. Requires healthcare facilities participate in and connect to the designated health information exchange. Creates the Health Information Initiative Fund with funds appropriated by the legislature and provided by healthcare facilities.</i>
LB730	Walz	Monitor	Health and Human Services 02/06/2019	In Committee 01/25/2019	Change, transfer, and eliminate provisions relating to advanced practice registered nurses <i>Collapses the 4 APRN practice acts into one. Removes the requirement for written practice agreements for Certified Nurse Midwives, but not for lower level midwives in order that Nebraska laws would comply with the rest of the compact states' laws.</i>
LB735	Chambers	Monitor	Health and Human Services 03/21/2019	In Committee 01/25/2019	Provide a duty for the Department of Health and Human Services <i>The Department of Health and Human Services shall establish a protocol that specifies when and how a pelvic exam of a female is to be performed by any person licensed by the department.</i>
LB748	Blood	Monitor	Judiciary 01/30/2020	In Committee 01/10/2020	Adopt the Fertility Fraud Act <i>A health care provider shall not knowingly or intentionally treat a woman for infertility by using the health care provider's own spermatozoon or ovum unless the woman has previously given written, informed consent. A violation of this section is a Class IV felony.</i>
LB750	Blood	Monitor	Judiciary 02/27/2020	In Committee 01/10/2020	Prohibit discrimination based on military or veteran status



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LB752	Blood	Monitor	Government, Military and Veterans Affairs 02/27/2020	General File 03/03/2020	<p>Provide duties and programs relating to veterans</p> <p><i>Requires a review of licensing requirements to determine necessary and appropriate steps that may be taken to increase acceptance of military training and experience toward fulfilling licensure requirements and to submit a report to the Legislature on such findings. Includes Advanced Practice Registered Nurses, out-of-hospital emergency care providers, PAs, and nurses. Requires the Labor Department veterans' program coordinator to collaborate with DED to conduct an annual review of job training and placement programs for veterans. Requires the Labor Department to generate monthly electronic reports of workforce need projections by industry, job type, geography, and needed credentials and to include a mapping of which jobs would leverage veterans' skills. Requires the DMV to increase the number of servicemembers and veterans who take advantage of the CDL driving skills exam exemption. Requires DHHS to compile a report on suicides by servicemembers and veterans. Requires the Veterans' Affairs Department to study the development of a veteran health care navigator program to increase health care access and to study the development of a program to reduce barriers to access to mental health services. Requires an analysis of the impact of Medicaid expansion on veterans and their families. Requires the Department of Veterans' Affairs to develop a continuing education course for mental health providers to obtain expertise in veteran suicide prevention and to undertake a study to end veteran homelessness. Requires DHHS and the Veterans' Affairs Department to identify state and local agencies that could better serve veterans. Requires DED to conduct an analysis of existing economic development programs to determine ways to increase support for veteran-owned small businesses.</i></p> <p><i>Proposed AM2102 (Blood): Creates a Veterans' Health Task Force to carry out the studies otherwise required of the Department under the bill related to veterans' health.</i></p> <p><i>Proposed AM2353 (Blood): Provides that DHHS and the Department of Veterans' Affairs shall work jointly to encourage service providers to ask the question, "Have you or a family member ever served in the military?". Such question should be added to intake forms and interviews, where appropriate, at places such as hospitals, mental health care centers, senior centers, employment office, courts, and schools and encounters with law enforcement.</i></p> <p><i>Proposed AM2727 (Government, Military and Veterans Affairs): Strikes the original bills. Retains one section that requires DHHS and the Department of Veterans' Affairs to work jointly to encourage service providers in their respective departments and in other state and local agencies and departments to inquire about personal or family military service history in intake forms and interviews, including at hospitals, mental health care centers, senior centers, employment offices, courts, and schools and in encounters with law enforcement.</i></p> <p><i>One provision of LB752 amended into LB790.</i></p>



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LB753	Blood	Support (with letter)	Health and Human Services 01/22/2020	In Committee 01/10/2020	Adopt the Audiology and Speech-Language Pathology Interstate Compact <i>A license issued to an audiologist or speech-language pathologist by a home state to a resident in that state shall be recognized by each member state as authorizing an audiologist or speech-language pathologist to practice audiology or speech-language pathology, under a privilege to practice, in each member state. An audiologist or speech-language pathologist practicing in a member state must comply with the state practice laws of the state in which the client is located at the time service is provided.</i>
LB755	Blood		Health and Human Services 01/23/2020	Select File 03/09/2020 Blood Priority Bill	Provide for and change home services permits for barbers, cosmetology, and nail technology <i>Vehicle for HHS Committee package for Scope of Practice Bills.</i> <i>AM2480 (Health and Human Services): Adds in:</i> <ul style="list-style-type: none"> -LB772 (Williams) PA Scope of Practice Bill -LB37 (Hilkemann) Authorize a PA to assist a Podiatrist (as amended to harmonize with LB772) -LB811 (McCollister) Change pharmacist reporting requirements under the Parkinson's Disease Registry Act -LB825 (Hilkemann) Add Spinal Muscular Atrophy to newborn health screenings -LB834 (Arch) Change provisions of the Engineers and Architects Regulation Act -ADOPTED 3/3/20 <i>Proposed AM2829 (Hilkemann): Adds NMA-proposed changes to LB37 provisions. Clarifies requirements for a podiatrist to supervise a PA.</i> <i>LB722, LB37, LB811, LB825, LB834 amended into LB755.</i>
LB760	Kolterman	Support (with letter)	Banking, Commerce and Insurance 02/03/2020	Select File 03/10/2020 Speaker Priority Bill	Require health carriers to provide coverage for asynchronous review by a dermatologist by way of telehealth <i>An insurer shall not exclude asynchronous review by a dermatologist from coverage solely because the service is delivered through telehealth. An insurer shall reimburse the health care provider for asynchronous review by a dermatologist delivered through telehealth on the same basis and at the same rate as the insurer would apply to those services if the services had been delivered in person.</i> <i>AM2232 (Banking, Commerce and Insurance): An insurer shall not exclude asynchronous review by a dermatologist from coverage solely because the service is delivered through telehealth. An insurer shall reimburse the health care provider for asynchronous review by a dermatologist delivered through telehealth at a rate negotiated between the provider and the insurer.-ADOPTED 3/5/20</i>



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Document	Senator	Position	Committee	Status	Description
LB761	Dorn	Support (with letter)	Transportation and Telecommunications 01/27/2020	In Committee 01/10/2020	<p>Change motor vehicle registration fees and provide funding for the simulation in motion program</p> <p><i>Establishes the University of Nebraska Medical Center Simulation in Motion-Nebraska Fund to carry out the SIM program. Authorizes the collection of 50 cents for each motor vehicle registration to be remitted to the fund. Any money in the fund not used to defray the annual operating expenses of the SIM program shall be used to establish a subaccount to fund expenses related to the depreciation of the equipment used in the program.</i></p>
LB766	Lindstrom	Monitor	Judiciary 02/20/2020	In Committee 01/10/2020	<p>Prohibit sexual assault of a minor by an authority figure, change statute of limitations for failure to make a report of child abuse or neglect, and change provisions relating to sexual offenses</p> <p><i>Provides that evidence of the victim's consent is not admissible in any civil proceeding involving alleged sexual penetration or contact when the actor is an authority figure and the victim is under 19. Authority figure means an actor in a position of trust and authority over a victim, and includes, but is not limited to, the victim's guardian or foster parent, temporary caretaker, coach, counselor, principal, teacher or health care provider. Provides that a person commits first-degree sexual assault if such person subjects another person to sexual penetration when the actor is an authority figure and the victim is under 19, and a person commits second- or third-degree sexual assault of a child if he subjects another person under 19 to sexual contact and the actor is an authority figure. Establishes that sexual assault of a child is in the second degree if the actor commits three or more separate violations of with the same victim over a period of three months or longer, regardless of whether serious personal injury to the victim results; a person shall not be convicted for such a violation unless the jury unanimously agrees that the requisite number of violations occurred over the requisite time period; however, the jury need not agree as to which violations constitute the requisite number; a person shall not be convicted of both this violation and another under this section if the violations involve the same victim and arise out of the same set of facts or pattern of conduct. Changes the statute of limitations for failing to make a report of child abuse or neglect from 18 months from the offense to the later of that or the date such failure to report is first discovered by law enforcement.</i></p>

NeCAA Legislation



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Document	Senator	Position	Committee	Status	Description
LB772	Williams	Support (with letter)	Health and Human Services 01/24/2020	In Committee 01/10/2020	<p>Change the scope of practice for physician assistants</p> <p><i>Adds "collaborative agreement" language. Amends definition of supervision to mean the ready availability of the supervising physician for consultation and collaboration of the PA. Provides that a PA may render services in a setting that is geographically remote from the supervising physician. Beginning Dec. 1, 2020, requires that one of the six professional members of the Board of Medicine and Surgery shall be a physician with experience in practice with PAs. Authorizes a PA to perform medical services that form a component of the scope of practice of a physician working in the same physician group as the PA if delegated and provided under the supervision and collaboration with such physician, are medical services for which the PA has been prepared by education, experience, and training and that the PA is competent to perform. Strikes language that a PA shall be considered an agent of his supervising physician. Clarifies PA authority to pronounce death and complete death certificates. Strikes restrictions regarding PA practice in hospitals and requirements for physician-PA agreements. Provides that a PA may prescribe drugs and devices, removing language "as delegated to do so by a supervising physician" and provides authority to distribute drug samples and plan and initiate therapeutic regimens that include nonpharmacological interventions. Changes the PA committee so that the member from the Board of Medicine and Surgery would be a nonvoting member.</i></p> <p>NAPA legislation.</p> <p>LB772 amended into LB755.</p>
LB774	Williams	Support bill amended into this bill	Banking, Commerce and Insurance 01/21/2020	Select File 03/23/2020 Banking, Commerce and Insurance Priority Bill	<p>Change requirements regarding credit for reinsurance</p> <p><i>AM2558 (Banking, Commerce and Insurance): Adds in:</i></p> <ul style="list-style-type: none"> -LB886 (Arch) Prohibit certain acts by health insurers and network providers and list a deceptive trade practice -LB954 (Lindstrom) Change insurance provisions relating to dental service fees -LB1199 (Lindstrom) Change provisions relating to motor vehicle service contract reimbursement insurance -ADOPTED 3/9/20
LB778	Stinner	Support	Appropriations 02/18/2020	In Committee 01/10/2020	<p>State intent regarding appropriations for the Rural Health Systems and Professional Incentive Act</p> <p><i>Appropriates \$2 million to be used for the repayment of qualified educational debts owed by eligible health professionals as determined pursuant to the Rural Health Systems and Professional Incentive Act: a pharmacist, dentist, physical therapist, occupational therapist, mental health practitioner, psychologist, nurse practitioner, PA, or physician in an approved specialty; licensed to practice in Nebraska; not enrolled in a residency program; not practicing under a provisional or temporary license; and practicing in a designated health profession shortage area in Nebraska.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB783	Lowe	Neutral	Health and Human Services 02/20/2020	General File 03/12/2020 Lowe Priority Bill	<p>Change the definition of ambulatory surgical center</p> <p><i>Amends the definition of ambulatory surgical center to mean a facility where surgical services are provided to persons who are admitted to and discharged from such facility within the same working day for person for whom no anesthesia is administered or within 24 hours after the introduction of anesthesia for persons for whom anesthesia is administered, striking language that prohibited overnight stays at such facilities.</i></p> <p><i>Proposed AM2775 (Health and Human Services):</i> <i>-Amends LB783: Defines an ambulatory surgical center as a facility where the patient is discharged within 23 hours and 59 minutes from the time of the admission of the patient. Removes the requirement that the patient be discharged within the same working day.</i> <i>-Adds in:</i> <i>-LB1104 (Arch) Redefine a term under the Health Care Quality Improvement Act. Amends the definition of professional health care service entity to include entities organized under the Nebraska Nonprofit Corporation Act which render health care services, so as to extend protections to non-profit entities.</i> <i>-LB838 (Arch) Provide an exemption from licensure under the Medicine and Surgery Practice Act (as amended). Amends 38-2025 regarding exemptions to the unauthorized practice of medicine and adds a new exemption for specific individuals. These individuals are people who are not licensed, certified, or registered under the Uniform Credentialing Act, to whom are assigned tasks by a licensed physician. Those tasks must be routine care, activities, and procedures that: 1) are part of the routine functions of such person; 2) reoccur frequently in the care of a patient or group of patients; 3) do not require such persons to exercise clinical judgment; 4) do not require performance of a complex task; 5) have predictable results and minimal potential risk; and 6) utilize a standard, unchanging procedure.</i></p>
LB790	Slama	Monitor bill amended into this bill	Government, Military and Veterans Affairs 01/31/2020	Select File 02/26/2020 Government, Military and Veterans Affairs Priority Bill	<p>Change the Political Subdivisions Construction Alternatives Act and certain state bidding requirements and contract approval procedures</p> <p><i>Authorizes the Department of Administrative Services the use of group contracts entered into with political subdivisions of other states. The bill also authorizes the state purchasing bureau to take the lead in negotiations with other governmental entities.</i></p> <p><i>AM2436 (Slama): Provides that a political subdivision may use a design-build contract or construction management at risk contract under the Political Subdivisions Construction Alternatives Act for a project, in whole or in part, for water, wastewater, utility, or sewer construction. Adds to the current requirement of the governing body's adoption of a resolution for design-build by a two-thirds vote: The resolution shall include a statement that the political subdivision has made a determination that the design-build contract or construction management at risk contract delivery system is in the public interest based, at a minimum, on one of the following criteria: (a) Savings in cost or time; or (b) requirement of specialized or complex construction methods suitable for the design-build contract or construction management at risk contract delivery system.-ADOPTED 2/24/20</i></p>



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Document	Senator	Position	Committee	Status	Description
					<p><i>AM2768 (Blood): Adds in one provision of LB752 (Blood) that requires DHHS and the Department of Veterans' Affairs to work jointly to encourage service providers in their respective departments and in other state and local agencies and departments to inquire about personal or family military service history in intake forms and interviews, including at hospitals, mental health care centers, senior centers, employment offices, courts, and schools and in encounters with law enforcement. - ADOPTED 3/6/20</i></p> <p><i>AM2758 (Hilgers): Makes NRDs an eligible political subdivision under the Political Subdivisions Construction Alternatives Act. - ADOPTED 3/6/20</i></p> <p><i>Proposed AM2797 (Pansing Brooks): Specifies that the bill may not be interpreted to allow for the privatization of the administration of facilities operated by DHHS or the Department of Correctional Services.</i></p> <p><i>Proposed FA108 (Chambers): Specifies that if a portion of the bill is declared invalid or unconstitutional, such declaration will not affect the validity or constitutionality of the remaining portions of the bill.</i></p> <p><i>Proposed AM2912 (Wayne): Amends in the Historically Underutilized Business Program Act (LB 1218).</i></p> <p><i>Proposed AM2922 (Crawford): Adds to section that provides when a state of emergency has been proclaimed by the Governor, the Adjutant General, upon order of the Governor, shall have authority to expend funds for purposes, including, but not limited to: Paid sick and family leave for any private or public employee who is unable to work due to being diagnosed with an infectious disease, due to being quarantined or secluded for suspected infectious disease, or due to caring for a family member diagnosed with an infectious disease or quarantined or secluded for suspected infectious disease. Defines family member.</i></p> <p><i>LB890 and one provision of LB752 amended into LB790.</i></p>
LB804	Wayne	Support	Banking, Commerce and Insurance 02/18/2020	In Committee 01/10/2020	<p>Provide for insurance coverage of epinephrine autoinjectors</p> <p><i>Provides that Beginning Jan. 1, 2021, any insurance policy in this state shall provide coverage for a prescription epinephrine autoinjector for persons 18 or younger. Defines epinephrine autoinjector as a medical device approved by the federal FDA for the administration of epinephrine that contains a pre-measured dose of epinephrine.</i></p>
LB810	McCollister	Monitor (Submit letter)	Revenue 01/30/2020	In Committee 01/10/2020	<p>Impose sales tax on bottled water, candy, and soft drinks</p>



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Document	Senator	Position	Committee	Status	Description
LB811	McCollister	Monitor	Health and Human Services 01/23/2020	In Committee 01/10/2020	<p>Change pharmacist reporting requirements under the Parkinson's Disease Registry Act</p> <p><i>Changes the requirement for pharmacists filing a semiannual report with DHHS listing persons to whom the pharmacist has dispensed drugs on the list of drugs required to be reported for Parkinson's disease to include the date of birth rather than the social security of the person for whom the drugs were prescribed.</i></p> <p><i>LB811 amended into LB755.</i></p>
LB814	Geist	Monitor	Judiciary 02/20/2020	In Committee 01/10/2020 Geist Priority Bill	<p>Prohibit dismemberment abortion</p> <p><i>It shall be unlawful for any person to purposely perform or attempt to perform a dismemberment abortion unless a dismemberment abortion is necessary due to a medical emergency. The intentional and knowing performance of an unlawful dismemberment abortion is a Class IV felony.</i></p> <p><i>Proposed AM2867 (Geist): Strikes language providing court discretion to grant anonymity to a woman upon whom an abortion has been performed or attempted to be performed that is involved in a court proceeding under the act. Instead, provides that, upon request, a court shall take every possible measure allowable under the law to protect the anonymity of any woman upon whom an abortion has been performed or attempted to be performed who is involved in a court proceeding under the act.</i></p>
LB815	Morfeld	Support	Health and Human Services 02/27/2020	In Committee 01/10/2020	<p>Prohibit certain section 1115 waivers under the Medical Assistance Act</p> <p><i>The department shall not pursue, apply for, or implement any experimental, pilot, or demonstration project waiver under section 1115 of the Social Security Act.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB817	Stinner	Monitor	Health and Human Services 01/24/2020	In Committee 01/10/2020	<p>Adopt the Prescribing Psychologist Practice Act</p> <p><i>Provides that a licensed psychologist may apply to DHHS for a provisional prescription certificate. Requires that the applicant: (1) Possesses a doctoral degree in health service psychology and holds an unrestricted license to practice psychology in Nebraska; (2) Has successfully completed a postdoctoral degree in clinical psychopharmacology, or the equivalent as determined by the board, from an institution of higher education; (3) Has passed a national proficiency examination in clinical psychopharmacology developed by a nationally recognized body and approved by the board; (4) Has completed a practicum in clinical assessment and pathophysiology; (5) Has completed a practicum focused on treating patients with mental disorders; (6) Has malpractice insurance sufficient to meet rules and regulations adopted by the board and promulgated by DHHS; (7) Has completed the requirements of subdivisions (4) and (5) of this section within three years immediately preceding the date of the application; (8) Possesses current certification in Basic Life Support; and (9) Has submitted a proposed supervision plan for the provisional prescription certificate. The supervision plan shall include information regarding the supervising physician, any backup supervisors as needed, and proposed arrangement for supervision sessions with the prescribing psychologist that involve a minimum of four hours of supervision each month. A licensed psychologist holding a provisional prescription certificate shall have prescriptive authority subject to supervision. A licensed psychologist shall have a minimum of two years of experience with prescriptive authority subject to supervision prior to application for a prescription certificate. Each prescribing psychologist shall complete no fewer than 40 hours of professional activities directed at maintaining continuing competency during each 24-month period. A prescribing psychologist shall not prescribe to treat conditions that include chronic pain; endocrine, cardiovascular, orthopedic, neurological, and gynecological illness. Unless specifically agreed to by the primary health care practitioner, a prescribing psychologist shall not prescribe a psychotropic medication for a patient with serious co-morbid disease of the central nervous system, cardiac arrhythmia, or blood dyscrasia. Creates the Prescribing Psychologist Advisory Committee within DHHS to assist the board and the department in developing and recommending rules and regulations related to prescription certificates.</i></p> <p><i>Proposed AM2416 (Stinner): Adds a definition of "collaborative practice agreement" and requires the collaborative practice agreement to establish clinic protocols and guidelines relevant to the scope of practice of the prescribing psychologist with a prescription certificate.</i></p>
LB825	Hilkemann	Support (testify)	Health and Human Services 01/22/2020	In Committee 01/10/2020	<p>Change provisions relating to infant health screenings</p> <p><i>Requires infant screening for spinal muscular atrophy.</i></p> <p><i>LB825 amended into LB755.</i></p>
LB827	Hilkemann	Monitor	Appropriations 02/10/2020	In Committee 01/10/2020	<p>Appropriate funds to the Department of Health and Human Services</p> <p><i>Appropriates \$3,730,149 General Funds and \$4,507,813 federal funds for an increase in rates paid to providers of developmental disability services.</i></p> <p><i>Proposed AM2266 (Hilkemann): Technical amendment.</i></p>



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<i>Proposed AM2320 (Hilkemann): Technical amendment.</i>					
<i>LB827 amended into LB1008.</i>					
LB833	Crawford	Monitor	Health and Human Services 02/12/2020	In Committee 01/10/2020	Exclude certain elderly care programs from the Health Care Facility Licensure Act <i>Any health care facility or health care service that is operating a program of all-inclusive care for the elderly, as provided in 42 U.S.C. 1395eee, as such section existed on Jan. 1, 2020, is exempt from the provisions of the Health Care Facility Licensure Act relating to operation of the program.</i>
LB836	Arch	Support	Health and Human Services 01/22/2020	In Committee 01/10/2020	Change provisions governing certain contracts and agreements relating to the medical assistance program <i>Provides that all Medicaid managed care contracts for after July 21, 2020, shall provide for the return to DHHS of any remittance if the contractor does not meet the minimum loss ratio and any unearned incentive funds. The funds shall be remitted for credit to the Nebraska Health Care Cash Fund. Any performance contingencies imposed by the department shall be reinvested by the contractor to fund additional health services.</i>
LB837	Arch	Support	Health and Human Services 02/21/2020	In Committee 01/10/2020	Change provisions relating to background checks under the Child Care Licensing Act and the Children's Residential Facilities and Placing Licensure Act <i>DHHS shall seek to maximize federal funding to develop and implement a program to assist child care providers and child care staff members with the costs of the fingerprinting and national criminal history record information check. If DHHS does not receive federal funds sufficient to fund the implementation, administration, and maintenance of such program, then a child care staff member being screened shall pay the actual cost of the fingerprinting and national criminal history record information check, except that the department may pay all or part of the cost if funding becomes available.</i> <i>LB837 amended into LB1185.</i>
LB838	Arch	Support	Health and Human Services 02/26/2020	In Committee 01/10/2020	Provide an exemption from licensure under the Medicine and Surgery Practice Act <i>Creates an exception from the unauthorized practice of medicine for persons who are not licensed, certified, or registered under the Uniform Credentialing Act, to whom are assigned tasks by a physician or osteopathic physician licensed under the Medicine and Surgery Practice Act, if such assignment of tasks is in a manner consistent with accepted medical standards and appropriate to the skill and training, on the job or otherwise, of the persons to whom the tasks are assigned.</i>
LB840	Quick	Support (with letter)	Health and Human Services 02/12/2020	Select File 03/03/2020 Quick Priority Bill	Prohibit the use of electronic smoking devices as prescribed under the Nebraska Clean Indoor Air Act <i>Adds vaping to the already-banned smoking of cigarettes inside tobacco retail stores, while still allowing people to smoke cigars and pipes.</i>



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Document	Senator	Position	Committee	Status	Description
					<i>AM2512 (Health and Human Services): All provisions of the green copy are included in AM 2512 and new sections are added to exempt electronic smoking device retail outlets from the ban on smoking indoors for purposes of electronic smoking devices only. -ADOPTED 2/26/20</i>
					<i>AM2598 (Wayne): Amends definition of electronic smoking device retail outlet. Provides for preemption of any local law on the subject. -WITHDRAWN 2/27/20</i>
					<i>Proposed AM2677 (Wayne): withdrawn.</i>
					<i>FA103 (Quick): Edits the defining language of electronic smoking device to be "an electronic nicotine delivery system as defined in Section 28-1418.01." -ADOPTED 2/27/20</i>
					<i>Proposed AM2770 (Quick): Changes the definition of electronic smoking device to mean an electronic nicotine 3 delivery system as defined in section 28-1418.01. The term includes any such device regardless of whether it is manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, e-hookah, or vape pen or under any other product name or descriptor. The term also includes any substance that can be used in an electronic smoking device. The term does not include a diffuser, humidifier, or prescription inhaler. Electronic smoking device retail outlet means a store that: (1) Is licensed as provided under sections 28-1421 and 28-1422; (2) Sells electronic smoking devices and products directly related to electronic smoking devices; (3) Does not sell alcohol, groceries, or gasoline; and (4) Does not allow a person under 21 to enter such store.</i>
					<i>Proposed AM2877 (Quick): Changes the definition of electronic smoking device to include any substance that is used in an electronic smoking device. The term does not include a diffuser, humidifier, or prescription inhaler. Electronic smoking device retail outlet means a store that: (1) Is licensed as provided under sections 28-1421 and 28-1422; (2) Sells electronic smoking devices and products directly related to electronic smoking devices; (3) Does not sell alcohol or gasoline, (4) derives no more than 20% of its revenue from the sale of groceries (including coffee, soft drinks, and candy, (5) Does not allow a person under 21 to enter such store but may allow an employee who is under 21 to work in the store prior to January 1, 2022. (After January 1, 2022, such store may not allow an employee under 21 to work in the store.)</i>
					<i>Proposed AM2925 (Quick): Changes definition of electronic smoking device to include any device regardless of whether it is manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, e-hookah, or vape pen or under any other product name or descriptor. The term also includes any substance that is used in an electronic smoking device. The term does not include a diffuser, humidifier, prescription inhaler, or similar device. Electronic smoking device retail outlet means a store that: (a) Is licensed as provided under sections 28-1421 and 28-1422; (b) Sells electronic smoking devices and products directly related to electronic smoking devices; (c) Does not sell alcohol or gasoline; (d) Derives no more than 20% of its revenue from the sale of food and food ingredients; and (e) Prohibits persons under 21 from entering the store. Prior to Jan. 1, 2022, an electronic smoking device retail outlet shall not allow a person under 21 to enter the store but may allow an employee who is under 21 to work in the store. On and after Jan. 1, 2022, an electronic smoking device retail outlet shall not allow a person under 21 to enter the store and shall not allow an employee who is under 21 to work in the store.</i>



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Document	Senator	Position	Committee	Status	Description
LB846	Quick	Monitor	Business and Labor 01/27/2020	In Committee 01/10/2020	Change provisions relating to compensation under the Nebraska Workers' Compensation Act <i>Provides that no workers' compensation shall be allowed for the first three (rather than seven) calendar days of disability, except as provided in section 48-120, but if disability extends beyond the period of three (rather than seven) calendar days, compensation shall begin on the fourth (rather than eighth) calendar day of disability, except that if such disability continues for two (rather than six) weeks or longer, compensation shall be computed from the date disability began.</i>
LB847	Arch	Support	Health and Human Services 01/30/2020	In Committee 01/10/2020	Change requirement for dispensing drugs in certain health care facilities <i>States that a pharmacist may package drugs and devices at the request of a patient or patient's caregiver if the drugs and devices were originally dispensed from a different pharmacy. Includes labeling and relabeling provision for drugs in an assisted-living facility, a nursing facility, or a skilled nursing facility. Updates provisions in the Emergency Box Drug Act.</i>
LB851	McCollister	Monitor	Health and Human Services 01/29/2020	In Committee 01/10/2020	Change provisions relating to eligibility for services under the Medical Assistance Act <i>Provides that a child deemed eligible for medical assistance under the Medical Assistance Act remains eligible for one full year or until the child turns 19, whichever is sooner. Additionally, the Department shall submit a waiver to CMS to provide that groups, including the Subsidized Adoption and Guardianship Assistance, Institution for Mental Disease, Parent-Caretaker Relatives, and Heritage Health Adult, would receive a twelve-month continuous eligibility waiver.</i>
LB857	Lowe	Monitor	Government, Military and Veterans Affairs 01/31/2020	In Committee 01/13/2020	Require state agency review of rules and regulations <i>Each state agency shall review the rules and regulations adopted and promulgated by the agency on the schedule prescribed in the bill and provide a report to the Legislature. The report shall include the statutory authorization for the rules and regulations and an assessment of whether the rules and regulations are accomplishing the statutory purposes or need revision.</i>
LB862	Hughes	Monitor	General Affairs 02/03/2020	In Committee 01/13/2020	Prohibit possession by minors of tobacco and nicotine products <i>Prohibits the possession of tobacco products by persons under 19. Provides that a product or device may constitute a prohibited electronic nicotine delivery system regardless of whether the product or device actually contains nicotine, tobacco, or tobacco derivatives.</i>
LB864	Wayne	Support (with letter)	Urban Affairs 02/11/2020	In Committee 01/13/2020	Adopt the Bed Bug Detection and Treatment Act for cities of the metropolitan class <i>Requires landlords to promptly respond to tenant concerns regarding bed bugs, including inspection within 96 hours of receipt of report of potential bed bugs. Specifies that a landlord is responsible for all costs associated with an inspection for, and treatment of, bed bugs, and is liable to the tenant for any related damages. Applies only to landlords in Omaha.</i>



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Document	Senator	Position	Committee	Status	Description
LB865	Wayne	Monitor	Revenue 01/29/2020	Select File 03/09/2020 Speaker Priority Bill	<p>Change income tax provisions relating to the Nebraska educational savings plan trust and authorize employer contributions to the trust</p> <p><i>For taxable years beginning after Jan. 1, 2021, a participant in the Nebraska educational savings plan trust may include any employer contribution that is made to such participant's account in any income tax reduction to the extent such employer contribution is included in such participant's federal adjusted gross income. Beginning with tax year 2021, the Tax Commissioner shall include space on the individual income tax return form in which the individual taxpayer may, if a refund is due, designate any amount of such refund as a contribution to an account established under the Nebraska educational savings plan trust. Any government program administered by any agency of the state that provides benefits or aid to individuals based on financial need shall not take into account employer contributions to a participant's NEST account in determining the income of such participant.</i></p> <p><i>AM2732 (Wayne): Strikes all sections of the bill, except section 3, which provides that beginning with tax year 2021, the Tax Commissioner shall include space on the individual income tax return form in which the individual taxpayer may, if a refund is due, designate any amount of such refund as a contribution to an account established under the Nebraska educational savings plan trust. The Tax Commissioner shall determine the total amount of contributions designated pursuant to this section each year, and the State Treasurer shall transfer such amount from the General Fund to the College Savings Plan Program Fund for deposit into the appropriate accounts.-ADOPTED 3/4/20</i></p>
LB872	Hunt	Monitor	Judiciary 02/21/2020	In Committee 01/13/2020	<p>Eliminate requirements for the provision of information and materials regarding finding medical assistance and continuing a viable pregnancy after taking mifepristone</p> <p><i>Removes the information requirements regarding mifepristone passed in last year's LB209.</i></p>
LB874	Howard	Monitor	Appropriations 02/10/2020	In Committee 01/13/2020	<p>Restate intent regarding funding programs from the Nebraska Health Care Cash Fund</p> <p><i>States legislative intent that any additional program funded out of the Health Care Cash Fund after June 1, 2020, may only be funded from investment income derived from the principal of the Nebraska Tobacco Settlement Trust Fund from the previous fiscal year.</i></p>
LB875	Howard	Monitor	Health and Human Services 02/27/2020	In Committee 01/13/2020	<p>Require a medicaid state plan amendment for outpatient assisted therapy</p> <p><i>Requires DHHS to submit a state plan amendment or waiver to CMS by Oct. 1, 2020, to provide Medicaid coverage for outpatient assisted therapy for all eligible recipients under Medicaid.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB886	Arch	Support (testify)	Banking, Commerce and Insurance 02/04/2020	General File 02/13/2020	<p>Prohibit certain acts by health insurers and network providers and list a deceptive trade practice</p> <p><i>A facility shall not advertise or hold itself out as a network provider, including any statement that the facility takes or accepts any health insurer, unless the facility is a network provider of the health insurer. A facility shall not place the name or logo of a health insurer in any signage or marketing materials if the facility is not a network provider for the plan. Any contract entered into between a facility and a person covered by a health insurer is voidable at the option of the covered person if the facility violates this section. Facility means an institution providing health care services or a health care setting, including, but not limited to, a hospital or other licensed inpatient center, an ambulatory surgical or treatment center, a skilled nursing center, a residential treatment center, a diagnostic, laboratory, or imaging center, or any rehabilitation or other therapeutic health setting. Facility does not include a physician's office.</i></p> <p><i>Proposed AM2276 (Banking, Commerce and Insurance): Specifies that health care facilities may advertise or hold itself out as a network provider if the facility is a network provider of the health insurer. Provides that a facility may not place the name or logo of a health insurer on any signage or marketing materials if the facility is not a network provider for the health insurer. Removes the provisions of the bill from the Deceptive Trade Practices Act.</i></p> <p><i>LB747 amends in LB886.</i></p>
LB887	Arch	Monitor	Health and Human Services 01/30/2020	In Committee 01/13/2020	<p>Authorize pharmacists to adapt prescriptions to aid consumers</p> <p><i>A pharmacist who is acting in good faith and exercising reasonable care and who has obtained patient consent may: Change the quantity of a drug prescribed; Change the dosage form of the prescription if it is in the best interest of patient care and if the directions for use are also modified to equate to an equivalent amount of drug dispensed as prescribed; Extend a one-time refill for the quantity prescribed in the most recent fill or a thirty-day supply, whichever is less, if in the professional judgment of the pharmacist the drug is essential to sustain the life of the patient or continue therapy for a chronic condition of the patient and failure to dispense the drug to the patient could result in harm to the health of the patient; Dispense multiple months' supply of a drug if a prescription is written with sufficient refills; and Substitute any drug that has the same active ingredient and dose.</i></p>
LB893	Bostelman	Monitor	Health and Human Services 02/13/2020	In Committee 01/13/2020	<p>Change provisions relating to emergency care providers and provide for community paramedicine and critical care paramedics</p> <p><i>Defines "emergency care provider" to include emergency medical responders, emergency medical technicians, advanced emergency medical technicians, community paramedics, critical care paramedics, and other paramedics licensed and classified under the EMSPractice Act. Strikes references to "out-of-hospital" emergency care providers. Defines "community paramedicine practice of emergency medical care" and "critical care paramedic practice of emergency medical care." Requires the EMS Board to establish criteria for community paramedicine and critical care paramedics. Changes reference to performance of activities within scope of practice and "as determined by a licensed health care practitioner," requiring physician medical directors to supervise emergency care providers for an emergency medical service; a physician, PA, or APRN to supervise in a setting other than an incident to which an emergency medical service has been called, and a nurse to direct in a setting other than an emergency medical setting.</i></p>



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LB897	Cavanaugh	Support	Appropriations 02/11/2020	In Committee 01/13/2020	Appropriate funds for behavioral health aid <i>Appropriates \$4,350,000 from the General Fund for the fiscal year 2020-2021 to the Department of Health and Human Services for behavior health aid, including community-based mental health and substance abuse services.</i>
LB901	Cavanaugh	Support	Appropriations 02/18/2020	In Committee 01/13/2020	Appropriate funds for the Nebraska Perinatal Quality Improvement Collaborative <i>Appropriates \$200,000 from the General Fund for the fiscal year 2020-2021 to the Department of Health and Human Services to contract with the University of Nebraska Medical Center for the Nebraska Perinatal Quality Improvement Collaborative. The Department shall secure federal matching funds for this purpose.</i>
LB917	Wayne	Support	Health and Human Services 02/21/2020	In Committee 01/13/2020	Provide for a diabetes pilot study <i>Appropriates \$2 million in each of the next 5 years for a statewide diabetes pilot study (done at a Nebraska postsecondary institution with a medical school) that identifies ways to reduce the financial costs of diabetes to the Medicaid program. The program will test the hypothesis that the integration of technology into the case management protocol of a Medicaid patient with diabetes, including use of remotely monitored glucose sensors, interdisciplinary coaching, and telehealth communication, will lead to improved health outcomes and decreased health care costs; and use technology-based platforms for the delivery of effective diabetes self-management education, support, and treatment for up to 1,000 diabetic Medicaid patients.</i>
LB922	Kolterman	Monitor	Health and Human Services 01/30/2020	In Committee 01/13/2020	Require electronic issuance of prescriptions for controlled substances as prescribed <i>Beginning in 2021 prescriptions for controlled substances must be issued using electronic prescription technology from the prescriber issuing the prescription to a pharmacy. This requirement does not apply to prescriptions issued by veterinarians; issued when the prescriber and the dispenser are the same entity; issued for a drug for which the FDA requires the prescription to contain certain elements that are not able to be accomplished with electronic prescribing; issued for dispensing a non-patient-specific prescription which is a standing order, approved protocol for drug therapy, collaborative drug management, comprehensive medication management, in response to a public health emergency, or in other circumstances where the prescriber may issue a non-patient-specific prescription; issued under circumstances in which the prescriber reasonably determines that it would be impractical for the patient to obtain substances prescribed by electronic prescription in a timely manner and that such delay would adversely impact the patient's medical condition; or Issued for drugs requiring compounding. A violation of this section shall not be grounds for disciplinary action under the Uniform Credentialing Act.</i>
LB932	Wishart	Monitor	Health and Human Services 01/29/2020	In Committee 01/13/2020	Require expansion of the medical assistance program as prescribed <i>Requires DHHS to, on or before Oct. 1, 2020, expand eligibility for and to provide Medicaid to adults between the ages of 19 and 64 whose income level is less than or equal to 138% of the federal poverty level.</i>



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Document	Senator	Position	Committee	Status	Description
LB946	Briese	Oppose	Revenue 02/26/2020	In Committee 01/14/2020	<p>Change the sales tax rate and impose sales tax on additional services</p> <p><i>Makes sales tax applicable to all services (services shall be presumed taxable unless a specific sales tax exemption applies). Service includes all activities that are engaged in for other persons for a consideration and that involve predominantly the performance of a service as distinguished from selling or leasing tangible personal property. The term does not include services rendered by an employee to his or her employer. Provides that beginning Oct. 1, 2021, the sales tax rate be lowered from 5.5% to 4% and that it then be adjusted to provide approximately the same amount of sales tax revenue as would have been generated had the changes to the sales tax base made by this bill not gone into effect.</i></p>
LB948	Crawford	Support	Banking, Commerce and Insurance 02/18/2020	In Committee 01/14/2020	<p>Change provisions relating to insurance coverage for mammography</p> <p><i>Amends requirements for mammography insurance coverage to include: for a woman who is 40 or older, one screening mammogram every year (increased from every two years); and based on the recommendation of the patient's physician because of increased risk for breast cancer, a screening digital breast tomosynthesis every year or a diagnostic MRI. Provides that a screening mammogram or screening digital breast tomosynthesis shall be covered without application of a deductible, coinsurance, copayment, or other cost-share requirement.</i></p>
LB949	Bolz	Support	Banking, Commerce and Insurance 02/18/2020	In Committee 01/14/2020	<p>Limit the amount an insured individual pays for prescription insulin drugs</p> <p><i>Any insurance policy which provides reimbursement for prescription insulin drugs shall limit the total amount that a covered individual is required to pay for covered prescription insulin drugs at \$100 per 30-day supply of insulin.</i></p> <p><i>Proposed AM2292 (Bolz): Modifies that the bill shall not apply to contracts, plans, or policies if the associated implementation costs exceed one percent (formerly three percent) of all annual premiums collected under that contract, plan, or policy.</i></p>
LB955	Walz	Monitor	Health and Human Services 01/29/2020	In Committee 01/14/2020	<p>Change provisions relating to eligibility for medical assistance</p> <p><i>Provides that notice of a decision to discontinue eligibility or to modify Medicaid shall include an explanation of the proposed action, including contact information for DHHS personnel to address questions, information on the right to appeal, and an explanation of the availability of continued benefits pending such appeal. If a Medicaid recipient of appeals a decision within 30 days, no action to discontinue eligibility or modify Medicaid shall be taken until a decision is rendered on such appeal.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB956	Walz	Support	Health and Human Services 01/29/2020	General File 03/12/2020 Walz Priority Bill	<p>Provide duties for managed care organizations under the Medical Assistance Act</p> <p><i>If a managed care organization makes any material change to a provider agreement, the MCO shall provide the provider with at least 90 days' notice of the material change. Material change means a change to a provider agreement, the occurrence and timing of which is not otherwise clearly identified in the provider agreement, that decreases the provider's payment or compensation or changes the administrative procedures in a way that may reasonably be expected to significantly increase the provider's administrative expense, including altering an existing prior authorization, precertification, notification, or referral program or an edit program or specific edits. Provides process for providers to object to such changes and unwind relationship with MCO. The notice of proposed material change shall be sent in an orange-colored envelope with the phrase ATTENTION! PROVIDER AGREEMENT AMENDMENT ENCLOSED!</i></p> <p><i>Proposed AM2827 (Health and Human Services):</i></p> <p><i>-Amends LB956: Changes the notification of a material change requirement from the proposed 90 days to 60 days. It also removes the proposed "referral program" from inclusion as a material change. Changes the requirement for an orange envelope to an envelope conspicuously marked "contract change." Removes provisions relating to a negotiation period and an unwinding of the relationship. Adds language stating that notice of a material change may also include real-time communications such as email or teleconferencing, if requested by the provider. If there are 3 material changes in a 12-month period, a provider may ask for a copy of the provider contract with changes consolidated in a single document.</i></p> <p><i>-Adds in:</i></p> <p><i>-LB955 (Walz) Change provisions relating to eligibility for medical assistance (as amended). DHHS is currently required to mail notice to a Medicaid applicant or recipient if services are to be discontinued, denied, or modified. Requires that DHHS, except in the case of an emergency, send notice on the same day or the day after the decision is made which adversely effects the applicant's or recipient's receipt of services. DHHS may contact the applicant or recipient through electronic communication, if agreed upon, in addition to mailing such notice. The notice of a decision to discontinue or modify eligibility must include an explanation of the action; the reason for the action; the information used to make the decision; contact information for DHHS personnel; information on the right to appeal; and an explanation of the availability of continued benefits pending appeal.</i></p> <p><i>-LB1105 (Hansen, B) Change audit provisions under the Medical Assistance Act. Requires each investigation or program integrity audit to be reviewed within 4 years of payment, and conclude an audit within 180 days after receipt of all requested material. Limits extrapolations and double or simultaneous audits.</i></p>
LB970	Wayne	Support	Banking, Commerce and Insurance 02/18/2020	In Committee 01/14/2020	<p>Limit the cost of prescription insulin drugs</p> <p><i>Any insurance policy which provides reimbursement for prescription insulin drugs shall limit the total amount that a covered individual is required to pay for covered prescription insulin drugs at \$100 per 30-day supply of insulin.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB974		Monitor	Revenue 01/22/2020	General File 02/13/2020 Revenue Priority Bill	<p>Change taxation and school funding provisions</p> <p><i>Uses excess state tax revenue to increase state aid to K-12 schools, as well as gradually lower the tax valuation of property for paying school taxes. For tax year 2020, real property (not ag land) shall be valued at 95% of its actual value for purposes of taxes levied by school districts and at its actual value for purposes of taxes levied by any other political subdivision; for tax year 2021, valued at 90% of its actual value for purposes of taxes levied by school districts and; and for tax year 2022 and each tax year thereafter, valued at 85% of its actual value for purposes of taxes levied by school districts. For tax years prior to tax year 2020, ag land shall be valued at 75% of its actual value; for tax year 2020, such real property shall be valued at 65% of its actual value for purposes of taxes levied by school districts and at 75% of its actual value for purposes of taxes levied by any other political subdivision; and for tax year 2021 and each tax year thereafter, valued at 55% for purposes of taxes levied by school districts and at 75% of its actual value for purposes of taxes levied by any other political subdivision. "Foundation aid" would be sent to each school district in the state, beginning with \$695 per student in the first year and increasing to \$2,265 per student by the third year.</i></p> <p><i>Proposed AM2433 (Revenue): Repeals the Personal Property Tax Exemption. Makes additional changes to real property valuations, school levy allowances, and transition aid to be given to schools.</i></p> <p><i>Proposed AM2499 (Linehan): Placeholder amendment.</i></p> <p><i>Proposed AM2500 (Linehan): Placeholder amendment.</i></p> <p><i>Proposed AM2518 (La Grone): Placeholder amendment.</i></p> <p><i>Proposed AM2519 (La Grone): Placeholder amendment.</i></p> <p><i>Proposed AM2520 (La Grone): Placeholder amendment.</i></p> <p><i>Proposed AM2521 (La Grone): Placeholder amendment.</i></p> <p><i>Proposed AM2452 (McCollister): Provides that for tax year 2020, the amount of relief granted under the Property Tax Credit Relief Fund shall be \$380 million. Strikes other sections.</i></p>
LB988	Hilgers	Oppose	Banking, Commerce and Insurance 02/10/2020	In Committee 01/15/2020	<p>Provide restrictions on business entity ownership with respect to certain professional services</p> <p><i>A business entity formed for the purpose of rendering professional service, the performance of which is subject to credentialing under the Uniform Credentialing Act, may have owners who are persons not credentialed in a professional service regulated under the Uniform Credentialing Act or persons who are credentialed in a professional service regulated under the Uniform Credentialing Act other than the professional service for which the business entity was formed. Such owners shall not, in the aggregate, directly or beneficially, comprise a majority of the owners of such business entity.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB992	Friesen	Support (with letter)	Transportation and Telecommunications 02/03/2020	In Committee 01/15/2020 Transportation and Telecommunicati ons Priority Bill	<p>Adopt the Broadband Internet Service Infrastructure Act and provide for certain broadband and Internet-related services</p> <p><i>-For real property subject to an electric utility easement, if an electric utility, or any commercial broadband supplier designated to act on its behalf, complies with the requirements set forth (30 day notice sent by certified mail to all landowners with interest), the electric utility holding the easement may, without the consent of an interest holder in the real property subject to the easement, take the following actions: (a) Install, maintain, or own, or permit any commercial broadband supplier to install, maintain, or own, an attached facility for operation by a supplier in providing commercial broadband service; and (b) Lease or otherwise provide to a supplier any excess capacity of attached facilities for purposes of providing commercial broadband service. Limits liability and damages for any action brought by interested landowner. An electric utility that exercises any such action shall: (a) Not discriminate among commercial broadband suppliers in offering or granting rights to install or attach any attached facilities; or (b) Charge fees that are nondiscriminatory among suppliers for a substantially similar lease or use of the capacity of attached facilities owned or controlled by the electric utility.</i></p> <p><i>-It is the intent of the Legislature to encourage local and regional broadband planning, and to encourage public-private partnerships to enhance broadband services in unserved and underserved areas of the state. Creates the position of state broadband coordinator to be located in the office of the Chief Information Officer. The coordinator shall: (a) Encourage each county or region to appoint a broadband coordinator to facilitate broadband planning and coordination; (b) Encourage each county or region to work with groups of stakeholders, (c) Assist in determining what broadband assets are available, the areas for improvement, and strategies to improve broadband availability and use; and (d) Explore the creation of broadband cooperatives in unserved or underserved areas of the state.</i></p> <p><i>-It is the intent of the Legislature to better utilize public libraries in providing Internet and computer access in unserved and underserved areas or in areas with a high percentage of students who have limited or no access to the Internet. The Legislature finds that the E-Rate Schools and USF Libraries Program is underutilized and that many public libraries need support . The Nebraska Library Commission shall employ 4 regional technicians who shall provide technical support for public libraries across the state. The PSC shall establish the Nebraska E-Rate Special Construction Matching Fund Program. Beginning July 1, 2021, the program shall receive funding from the NUSF to provide incentives for fiber to be constructed to benefit public libraries. The PSC shall establish criteria and priorities for funding by establishing a support mechanism for eligible telecommunications carriers to deploy fiber for the benefit of public library access to E-Rate special construction matching funding.</i></p> <p><i>-Requires the PSC to establish a safe harbor range of market rates for leases of public fiber using a competitive price determination. If a public fiber lease submitted to the PSC utilizes rates within the safe harbor range, the PSC shall publish the application within 5 business days of receipt. If no objection is filed within 14 business days, the lease shall be deemed approved. If an objection is filed, the commission shall hold a hearing to determine whether the lease meets the market rate. Directs 50% of the lease profits to the NUSF (instead of NIEF). Terminates NIEF June 30, 2021, with any remaining funds directed to NUSF.</i></p> <p><i>-Provides that Rural Broadband Task Force members appointed by the Governor shall serve for a term of 2 years and may be reappointed.</i></p>



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Document	Senator	Position	Committee	Status	Description
NAG Legislation					
LB994	Murman	Monitor	Judiciary 01/30/2020	In Committee 01/15/2020	Adopt the Organ Transplant Fairness Act <i>A covered entity (a licensed provider of health care services, including a hospital) shall not, solely on the basis of a qualified individual's mental or physical disability: (a) Deem the individual ineligible to receive an organ transplant; (b) Deny services related to organ transplantation; (c) Refuse to refer the individual to a transplant center or other related specialist for the purpose of evaluation or receipt of an organ transplant; (d) Refuse to place the individual on an organ transplant waiting list; (e) Place an individual at a lower-priority position on an organ transplant waiting list than the position at which the individual would have been placed if not for the individual's disability; or (f) Decline insurance coverage for any procedure associated with the receipt of an organ transplant, including post-transplantation care. A covered entity may take an individual's disability into account when making treatment or coverage recommendations or decisions, solely to the extent that the physical or mental disability has been found by a physician or surgeon, following an individualized evaluation of the individual, to be medically significant to the organ transplant. A person aggrieved by a violation of the Act may bring a civil action against a covered entity. A successful plaintiff shall be entitled to appropriate relief, including attorney's fees, and costs. The state may be sued upon claims arising under Act in the same manner. All proceedings pursuant to the Act have the highest priority and shall be advanced on the court docket to provide for the earliest practical disposition.</i>
LB997	Morfeld	Support	Banking, Commerce and Insurance 02/11/2020	Final Reading 03/11/2020 Morfeld Priority Bill	Adopt the Out-of-Network Emergency Medical Care Act <i>If a covered person receives emergency services at any health care facility, the facility shall not bill the covered person in excess of any deductible, copayment, or coinsurance amount applicable to in-network services pursuant to the covered person's health benefits plan. If a covered person receives emergency services at an in-network or out-of-network health care facility, the health care provider shall not bill the covered person in excess of any deductible, copayment, or coinsurance amount applicable to in-network services pursuant to the covered person's health benefits plan—the carrier shall ensure that the covered person incurs no greater out-of-pocket costs than the covered person would have incurred with an in-network health care provider for covered services. If emergency services provided at an in-network or out-of-network health care facility are performed, the out-of-network health care provider may bill the carrier for the services rendered. The carrier may pay the billed amount or notify the health care provider within 20 days after the date of the receipt of the claim that the carrier considers the claim excessive. (A claim shall be presumed reasonable if it is based on the higher of the carrier's contracted rate or 125% of the payment rate received from CMS for the same or similar services in the same geographic area.) If the carrier provides this notice, the carrier and the health care provider shall have 30 days to negotiate a settlement or engage in mediation. The carrier and the health care provider shall reach agreement through the mediation process. The cost of mediation shall be split evenly by the carrier and the health care provider.</i>



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Document	Senator	Position	Committee	Status	Description
					AM2431 (Banking, Commerce and Insurance): Provides that a claim "or a payment" shall be presumed reasonable if it is based on the higher of (a) the contracted rate "under any then-existing in-network contractual relationship between the insurer and the out-of-network health care provider for the same or similar services" or (b) 175% of the payment rate "for Medicare services" for the same or similar services in the same geographic area. Provides that if an out-of-network health care provider deems the payment made by the insurer unreasonable, the out-of-network health care provider shall return payment to the insurer and utilize the dispute resolution procedure set out in the bill. Provides that if an insurer "or an out-of-network health care provider" provides notification that it considers a claim or payment to be unreasonable, the insurer and the health care provider shall have 30 days after the notification to negotiate a settlement. Provides that if a settlement is not reached, the insurer and the health care provider shall engage in mediation.-ADOPTED 2/20/20
LB1002	Bostelman	Monitor	Health and Human Services 02/13/2020	General File 03/12/2020 Bostelman Priority Bill	<p>Change provisions relating to wholesale drug distribution for emergency medical reasons</p> <p><i>Exempts from the Wholesale Drug Distribution Act the sale, purchase, or trade of a prescription drug for an emergency medical service to use for the provision of emergency medical care.</i></p> <p><i>Proposed AM2774 (Health and Human Services):</i> -Amends LB1002: Adds that "emergency medical reasons" does not include the regular and systemic sales of prescription drugs to emergency medical services. Removes the provision that "wholesale drug distribution does not include the sale, purchase, or trade of a prescription drug for an emergency medical services to use for the provision of emergency medical care, not to exceed five percent of sales." Instead, adds that "wholesale drug distribution" does not include the restocking of prescription drugs by a hospital for an emergency medical service if the drug was used in treating a patient prior to or during transportation to the hospital. However, "wholesale drug distribution" would include restocking of prescription drugs if the drugs were not used to treat a patient prior to or during transportation to the hospital. -Adds in: -LB893 (Bostelman) Change provisions relating to emergency care providers and provide for community paramedicine and critical care paramedics -LB1184 (Arch) Require standards for certain psychiatric services under the Medical Assistance Act -LB1044 (B. Hansen) Change provisions relating to the practice of medical nutrition therapy</p>
LB1008	Scheer	Monitor	Appropriations 01/29/2020	Select File 03/23/2020	<p>Provide, change, and eliminate provisions relating to appropriations</p> <p><i>Makes the Governor's recommended mid-biennium budget adjustments. More information is available here: https://budget.nebraska.gov/assets/2019-2021_Biennium/2019-2021_Mid-Biennium_Budget_Adjustments/Mid-BienniumBudgetAdjustments.pdf. Recommends/holds back funding for up to \$520 million in new property tax relief over the next 3 years. Includes \$31.1 million over the next 3 years for LB153 (exempting 50% of military retirement benefits from income tax). For disaster relief, provides \$50 million to finance the state cost share (12.5%) of the \$400 in disaster relief projects submitted to FEMA, \$9.2 million to assist counties most affected by the cost share, and \$3 million to the Governor's Emergency Program to reserve against possible emergency events this year. Includes a grant of up to \$3.8 million for reimbursement to the Gering-Fort Laramie Irrigation District for canal breach repairs. Provides \$16 million for a career scholarship program. Includes a \$6 million reduction for FY 2019-20 and a \$27 million reduction for FY 2020-21 for child welfare contract services based on the new Eastern Service Area contractor bid proposal.</i></p>



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Document	Senator	Position	Committee	Status	Description
					<i>AM2737 (Appropriations): Advances the Appropriations Committee's budget adjustment recommendations. More information is available here: https://nebraskalegislature.gov/pdf/reports/fiscal/2020proposal.pdf. Includes funding for:</i>
					<i>-LB773 (Williams) Appropriates \$10 million to DED for the Rural Workforce Housing Investment Fund</i>
					<i>-LB779 (Stinner) Adds \$250,000 of additional funding for child advocacy centers</i>
					<i>-LB827 (Hilkemann) Appropriates \$3,730,149 General Funds and \$4,507,813 federal funds for an increase in rates paid to providers of developmental disability services</i>
					<i>-LB894 (Stinner) Appropriates \$7 million to community college aid for dual enrollment</i>
					<i>-LB1017 (Geist) Appropriates \$617,788 to provide for a pilot program for mental health problem-solving courts</i>
					<i>-LB1018 (Vargas) Appropriates \$1.5 million in additional funding for local public health departments (\$6.5 million request)</i>
					<i>-LB1019 (Vargas) Appropriates \$500,000 to federally qualified health centers (\$3 million request)</i>
					<i>-LB1026 (Bolz) Appropriates \$500,000 to the University of Nebraska Daugherty Water for Food Institute (\$2.5 million request)</i>
					<i>-LB1079 (Wishart) Appropriates \$250,000 to the Nebraska State Patrol to provide funding for processing of sexual assault forensic evidence</i>
					<i>-LB1093 (Stinner) States intent regarding appropriations for nursing facility services under Medicaid</i>
					<i>-LB1096 (McDonnell) Appropriates \$500,000 to the Department of Correctional Services to provide grants for vocational and life skills programming and services to adults and juveniles who are incarcerated or recently released</i>
					<i>-LB1097 (McDonnell) Appropriates \$457,887 for problem-solving courts for young adults</i>
					<i>-LB1098 (McDonnell) Appropriates \$230,000 to DED to provide state aid to development districts</i>
					<i>-LB1100 (Bolz) Appropriates \$4.1 million to fund rate increases for rates paid to Medicaid providers of mental health and behavioral health services</i>
					<i>-LB1102 (Walz) Appropriates \$250,000 to provide reimbursement for tuition and fees for the initial and ongoing training of volunteer EMS providers</i>
					<i>-LB1161 (Hansen, M.) Appropriates \$300,000 to DHHS for competency restoration treatment provided pursuant to alternative treatment plans (\$500,000 request)</i>
					<i>-Provides increased funding and spending authority for the DHHS Homeless Assistance Program, increasing funding by \$1.6 million in FY2020-21 which brings funding levels to the FY2019-20 level.</i>
					<i>-Provides \$3.8 million to DNR to provide a grant to an irrigation district to offset costs for repairing the Gering-Fort Laramie canal breach.</i>
					<i>-Appropriates \$4 million to fund Governor's recommendation for the Nebraska Career Scholarship Program through the University of Nebraska, State Colleges, and Community Colleges (through DED).</i>
					<i>-Yields a projected balance that is \$133.8 million above the 3% minimum reserve. -ADOPTED 3/12/20</i>



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					<i>Proposed AM2884 (Slama): Appropriates \$425,000 to the Department of Natural Resources Soil and Water Conservation Program from the cash fund in FY2020-21. Specifies \$125,000 shall only be used for state aid, \$125,000 shall be used only to provide a grant to a city with a population less than 1,000 residents to carry out an engineering study to develop cost estimates for repair of a breached levee system that resulted in the flooding of drinking water and wastewater treatment facilities.</i>
					<i>AM2911 (Stinner): Makes minor correction. -ADOPTED 3/12/20</i>
					<i>AM2916 (Linehan): Provides legislative intent to appropriate \$130 million in FY2020-21 for property tax relief and state aid to schools. -WITHDRAWN 3/12/20</i>
					<i>Proposed AM2929 (La Grone): Changes \$57,000 to \$57,001 for appropriation to Legislative Council, Program No. 501, Intergovernmental Cooperation.</i>
					<i>FA110 (Scheer): Strikes from AM2737: \$10 million for Rural Workforce Housing, \$7 million to community college aid for dual enrollment, \$4 million for the Nebraska Career Scholarship Program, \$500,000 for the UNL Water for Food Institute, and \$3.8 million to DNR for a grant to repair the Gering-Fort Laramie canal breach. -LOST 3/12/20</i>
					<i>Proposed AM2900 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2901 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2902 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2903 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2904 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2905 (Wayne): Filibuster amendment.</i>
					<i>Proposed AM2936 (Stinner): Appropriates \$20 million in General Funds for public health emergency response to the Coronavirus Disease 2019 (COVID-19). \$10 million in funding that may be distributed to public health departments that develop partnerships with federally qualified health centers. Funding provided shall only be used for activities relating to the emergency response to the disease. Any funding not needed for the emergency response shall lapse to the General Fund on June 30, 2021. On Dec. 1, 2020, the department shall provide a report to the Legislature's Health and Human Services and Appropriations Committees regarding use of such funds. \$10 million additionally appropriated to the Governor's Emergency Program.</i>
					<i>Proposed AM2951 (Linehan): Provides legislative intent to appropriate \$130 million in FY2020-21 for property tax relief and state aid to schools.</i>



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Document	Senator	Position	Committee	Status	Description
<i>LB773, LB779, LB827, LB894, LB1017, LB1018, LB1019, LB1026, LB1079, LB1093, LB1096, LB1097, LB1098, LB1100, LB1102, LB1161 amended into LB1008.</i>					
LB1011	Arch	Support	Health and Human Services 02/20/2020	In Committee 01/21/2020	Require certain hospitals to accept reimbursement from the medicare program <i>Requires that hospitals, other than rehabilitation, long term care, critical access, psychiatric, or mental hospitals, accept reimbursement from the Medicare program.</i>
LB1016	Hansen, M.	Monitor	Business and Labor 02/03/2020	Final Reading 03/11/2020 Business and Labor Priority Bill	Change provisions regarding the worker training program, the Nebraska Wage Payment and Collection Act, the Contractor Registration Act, and the Employee Classification Act and eliminate provisions regarding service letters, high voltage lines, and private employment companies <i>An employer shall not retaliate or discriminate against an employee because the employee files a suit or complaint under the Nebraska Wage Payment and Collection Act; or testifies, assists, or participates in an investigation, proceeding, or action concerning a violation of the act. The bill modifies attorney's fees payable under the Act to reasonable fees and costs. Any employer who has an unpaid citation for a violation of the Act shall be barred from contracting with the state or any political subdivision until the citation is paid. The Department of Labor shall post information on its web site regarding compliance with and enforcement of the Act, including the number and names of employers with more than two citations in the previous five years, and the number and names of employers with at least one unpaid citation from the previous five years. Citations issued under the act may be used in court.</i> <i>AM2350 (Business and Labor): -Amends LB1016 to clean up the damages provisions generally and as it relates to the awarding of reasonable attorney's fees, minimizing concerns related to the admissibility of citations into evidence and limiting its applicability to only those individuals not covered by the Nebraska Fair Employment Practice Act.</i> <i>-Adds in LB926 (Business and Labor) Change provisions relating to violations of the Employee Classification Act</i> <i>-Adds in LB788 (Slama) Change and eliminate provisions relating to the Department of Labor - ADOPTED 2/20/20</i> <i>Proposed FA112 (Hansen, M): Placeholder amendment.</i>
LB1018	Vargas	Monitor	Appropriations 02/18/2020	In Committee 01/21/2020	Appropriate funds to the Department of Health and Human Services <i>Appropriates \$6,500,000 to be provided for local public health departments.</i> <i>LB1018 amended into LB1008.</i>
LB1019	Vargas	Monitor	Appropriations 02/18/2020	In Committee 01/21/2020	Appropriate funds to the Department of Health and Human Services <i>Appropriates \$3,000,000 for the seven community health centers. Each center is to receive an amount to be distributed proportionally based on the previous fiscal year's number of uninsured clients as reported on the Uniform Data System Report.</i> <i>LB1019 amended into LB1008.</i>



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Document	Senator	Position	Committee	Status	Description
LB1036	Morfeld	Monitor	Judiciary 01/31/2020	In Committee 01/22/2020	<p>Allow persons eighteen years of age to make health care decisions and persons under nineteen years of age in correctional facilities to consent to medical and mental health care</p> <p><i>Adds new exemptions to the law making 19 the age of majority in Nebraska to state: A person 18 or older may make health care decisions for himself or herself without the consent of his or her parent or guardian; and a person less than 19 years old who is committed to the Department of Correctional Services for secure care may consent to, and make decisions regarding, such person's medical care, mental health services, and related services during the period of the person's commitment to the department without the consent of such person's parent or guardian.</i></p>
LB1042	La Grone	Support	Revenue 01/29/2020	Select File 03/05/2020 La Grone Priority Bill	<p>Authorize and provide tax deductions for contributions to the Nebraska educational savings plan trust by employers and persons other than participants as prescribed</p> <p><i>Beginning in 2021, federal AGI shall be reduced by the amount of any contribution made by the individual's employer into an account under the Nebraska educational savings plan trust owned by the individual, not to exceed \$5000 per married filing separate return or \$10,000 for any other return. Adds costs incurred for participation in a registered apprenticeship program as a qualified higher education expense. The amount of principal and interest paid as a qualified higher education expense shall not exceed \$10,000 in total for all tax years for the loans of any designated beneficiary or sibling. A state government program that provides benefits or aid to individuals based on financial need shall not take into account contributions made to a participant's NEST account by the participant's employer in determining the income of such participant. Provides transfer of \$59,188 from the College Savings Plan Expense Fund through the Department of Revenue Miscellaneous Receipts to defray the costs incurred to implement this legislative bill.</i></p> <p><i>AM2181 (Revenue): Strikes language which would have allowed the use of "NEST" funds to repay student loans. -ADOPTED 3/3/20</i></p> <p><i>AM2592 (Morfeld): Adds in LB1083 (Morfeld) Change provisions relating to the Meadowlark Program (allow foundations and other organizations to contribute) -ADOPTED 3/3/20</i></p> <p><i>AM2685 (Pansing Brooks): Specifies that contributions may not be used for the payment of expenses associated with attending grades K-12. -ADOPTED 3/3/20</i></p>
LB1043	Hansen, B.	Monitor	Health and Human Services 02/20/2020	In Committee 01/22/2020	<p>Change provisions relating to regulation of health care facilities</p> <p><i>Specifies which district courts DHHS may petition for appointment of a receiver for a health care facility: Lancaster County or the county where a health care facility is located. Unless otherwise approved by the court, no person shall be a receiver for more than 5 health care facilities at the same time. Adds to the receivers duties: conduct a thorough analysis of the financial records of the health care facility within the first 30 days of the receivership, perform ongoing accountings, and provide monthly reports of the financial status of the health care facility to the court and DHHS and make monthly reports to the court and DHHS related to plans for continued operation or sale of the health care facility. If the receivership has not been terminated within 6 months (rather than 12 months) after the appointment of the receiver, the court shall, after hearing, order that the facility be closed or sold. Specifies that the closure or sale shall occur within 60 days after the court order, unless otherwise ordered. Requires the Attorney General to defend the receiver in any action where the receiver was acting in an official capacity.</i></p>



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LB1044	Hansen, B.	Support	Health and Human Services 02/26/2020	In Committee 01/22/2020	<p>Change provisions relating to the practice of medical nutrition therapy</p> <p><i>A licensed medical nutrition therapist may order patient diets, including therapeutic diets, in accordance with the provisions of this subsection, which allows a LMNT to practice under the consultation of a physician.</i></p> <p><i>NAND Legislation</i></p>
LB1051	Wishart	Monitor	Health and Human Services 02/12/2020	In Committee 01/22/2020	<p>Create the Intergenerational Care Facility Incentive Cash Fund and provide for grants</p> <p><i>Establishes an Intergenerational Care Facility Incentive Cash Fund to award grants of up to \$50,000 to nursing facilities for one-time startup costs to provide child care in such facilities. Eligibility requirements will be established by DHHS. Provides legislative intent to transfer \$300,000 from the General Fund to the Fund for FY2020-21.</i></p>
LB1052	Wishart	Monitor	Health and Human Services 01/30/2020	General File 03/05/2020 Wishart Priority Bill	<p>Change provisions regarding the preferred drug list under the Medical Assistance Act</p> <p><i>Establishes that Medicaid coverage shall not be denied for a patient's prescription of an antidepressant, antipsychotic, or anticonvulsant if such drug is deemed medically necessary by the patient's health care provider.</i></p> <p><i>Proposed AM2645 (Health and Human Services): -Amends LB1052. Provides that neither DHHS nor a managed care organization shall require prior authorization for coverage for an antidepressant, anti-psychotic, or anticonvulsant prescription drug if it is deemed medically necessary by the Medicaid recipient's health care provider, and if the Medicaid recipient has a prescription history of that drug within the immediately previous 90 day period. Specifically allows for prospective drug utilization reviews.</i></p> <p><i>-Adds in:</i></p> <p><i>-LB847 (Arch) Change requirement for dispensing drugs in certain health care facilities. Change provisions pertaining to pharmacy services related to labeling, auxiliary labels, medication aide duties, and emergency drug boxes in skilled nursing facilities, nursing facilities, and assisted living facilities. Clarifies the ability of a pharmacist to package medications for a patient that have been dispensed from a different pharmacy.</i></p> <p><i>-LB887 (Arch) Authorize pharmacists to adapt prescriptions to aid consumers (as amended). Allows a pharmacist acting with reasonable care and patient consent to: change the quantity of a prescribed drug if the quantity is not commercially available or if it is related to a change in dosage form; change the dosage of a prescription if the change is in the best interest of the patient, and if directions are also modified to equate to the equivalent amount; dispense multiple month's supply of a drug if the prescription has sufficient refills; and substitute any chemically equivalent drug product for a prescribed drug, unless the prescribing practitioner specifies "no substitution," "dispense as written" or "D.A.W." to indicate substitution is not permitted. The pharmacist must notify the prescribing practitioner of the change and document the change.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB1053		Support	Health and Human Services 02/12/2020	General File 03/12/2020 Health and Human Services Priority Bill	<p>Require rules and regulations for hospital and nursing facility medicaid reimbursement rates</p> <p><i>The department shall adopt and promulgate rules and regulations regarding the rate methodology for reimbursement of hospital and nursing facility services. Any change to the rate methodology is considered substantive and requires a new rulemaking or regulationmaking proceeding under the Administrative Procedure Act.</i></p> <p><i>Proposed AM2806 (Health and Human Services): Adds in:</i></p> <p><i>-LB1043 (Hansen, B) Change provisions relating to regulation of health care facilities. Amends health care facility receivership statutes.</i></p> <p><i>-LB833 (Crawford) Exclude certain elderly care programs from the Health Care Facility Licensure Act. Amends statutes in the Health Care Facilities Licensure Act related to Programs of All Inclusive Care for the Elderly (PACE).</i></p>
LB1058	Howard	Support as amended	Health and Human Services 02/13/2020	In Committee 01/24/2020	<p>Adopt the Population Health Information Act</p> <p><i>The purpose of the Act is to designate an entity to provide the data infrastructure needed to assist in operating the electronic health records initiative. The designated health information exchange shall: (1) Aggregate clinical information from health care entities needed to support the operation of Medicaid; (2) Act as the designated entity for purposes of access to and analysis of health data; (3) Collect and analyze data for purposes of informing the Legislature, the department, health care providers, and health care entities as to the cost of, access to, and quality of health care in Nebraska; (4) Act as the primary collector and reporter of public health data for registry submissions, immunization reporting, and syndromic surveillance; and (5) Enable any health care provider or health care entity to access information available within the designated health information exchange to evaluate and monitor care and treatment of a patient in accordance with HIPAA. The department shall work collaboratively with the designated health information exchange to access funding through federal programs.</i></p> <p><i>LB1058 amended into LB1183.</i></p>
LB1059	Howard	Monitor	Health and Human Services 02/27/2020	In Committee 01/24/2020	<p>Change provisions relating to health care facility licensure</p> <p><i>Under existing law, an applicant for an initial or renewal license to operate a health care facility or health care service required to be licensed shall file a written application with DHHS. Changes the requirement that the application be signed by a member (rather than two of its members) if the applicant is an LLC.</i></p>



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Document	Senator	Position	Committee	Status	Description
					<p><i>Proposed AM2511 (Howard): -Provides that DHHS shall recognize that: (a) Alcohol and other drugs are often contributing factors in child abuse and neglect; (b) Alcohol and other drugs can impair a parent or caretaker's judgment and ability to provide consistent care, supervision, and protection; and (c) Effective alcohol and drug testing is often necessary as one tool to provide evidence of or rule out substance abuse as part of an investigation or assessment of a child's safety or risk, to monitor whether a parent or caretaker is continuing to use substances, and to ensure treatment compliance.</i></p> <p><i>-Provides that alcohol and drug testing shall be a service available for all court, non-court-involved, traditional response, or alternative response cases. Alcohol and drug testing shall be one component of initial assessment and ongoing case management to identify or eliminate substance abuse as a contributing factor to child abuse and neglect in cases in which drug or alcohol use or exposure is suspected.</i></p> <p><i>-Requires DHHS to adopt and promulgate rules and regulations or policies consistent with this section and revoke any rules and regulations or policies inconsistent with this section by July 1, 2020. *NECAA Legislation</i></p>
LB1064	Briese	Support	General Affairs 02/03/2020	General File 03/10/2020 General Affairs Priority Bill	<p>Change provisions relating to the sale and use of tobacco products</p> <p><i>Raises age for tobacco use from 19 to 21.</i></p>
LB1084	Kolterman	Neutral	Revenue 02/06/2020	In Committee 01/24/2020	<p>Adopt the Nebraska Transformational Projects Act</p> <p><i>Allows for an applicant pursuing a partnership with the federal government for a project with a total new investment of more than \$1 billion to apply to DED for matching funds of up to \$300 million. The application must include an independent economic impact assessment showing at least \$1.7 billion during the planning and construction period and at least \$2.9 billion during the 10-year period when construction is commenced or the application is approved. Application must be filed by Dec. 31, 2030. The agreement shall last no more than 15 years, except that the agreement shall remain effective until all matching funds are paid. Provides legislative intent to transfer 1% of the state tax receipts in the prior fiscal year to the Nebraska Transformational Project Fund for FY22-23 and each year after for purposes of carrying out the Act.</i></p> <p><i>Proposed AM2211 (Kolterman): Changes definitions, including defining applicant as a postsecondary institution having a college of medicine located in Nebraska. Project means an investment by the applicant of at least \$1.6 billion at one qualified location which is made to carry out the requirements for the qualified location. The application must include an independent economic impact assessment showing at least \$2.7 billion during the planning and construction period and at least \$4.9 billion during the 10-year period when construction is commenced or the application is approved. Moves up application deadline to Dec. 31, 2021. Matching funds and private dollars shall be counted towards the attainment of the \$1.6 billion investment requirement. Provides legislative intent that the State Treasurer transfer an amount not to exceed \$300 million to the Nebraska Transformational Project Fund no later than fiscal year 2026-27. No transfer shall be made to the fund until the applicant has been selected for participation in the program described in the National Defense Authorization Act and commitments of at least \$1.3 billion in total investment, including only federal dollars and private donations, have been secured. Distributions may be made from the fund in amounts equal to the amount of private dollars received by the applicant for the project. Any money remaining in the fund after all obligations have been met shall be transferred to the General Fund.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB1092	Stinner	Support	Appropriations	Withdrawn 01/29/2020	<p>Change and transfer contract provisions under the Medical Assistance Act and create a fund</p> <p><i>Creates the Medicaid Managed Care Excess Profit Fund from the at-risk managed care funds in excess of the contractor limitations identified in state or federal statute or contract. DHHS shall use the fund to provide health services for children, families, and adults according to a plan developed by the department with input from stakeholders and approved by the Legislature during the next regular legislative session. Such plan shall address the health needs of adults and children, including filling service gaps, sustaining access to care, and providing system improvements.</i></p>
LB1093	Stinner	Support	Appropriations 02/10/2020	In Committee 01/24/2020	<p>State intent regarding appropriations for nursing facility services under the medical assistance program</p> <p><i>It is the intent of the Legislature that DHHS shall retroactively distribute the portion of \$7,256,215 (\$3,324,072 General Funds and \$3,932,143 Federal Funds) that was unexpended on increased nursing facility utilization during FY2019-20, instead to be paid out as an incentive payment to nursing facilities. The incentive payment shall be distributed based on the nursing facility formula in effect July 1, 2019; such payment to be made no later than Sept. 30, 2020. The Department shall also use .5% as the increased utilization rate rather than 2.5% for holding back funds, and spend the rest of the appropriation on nursing facility incentive payments.</i></p> <p><i>LB1093 amended into LB1008.</i></p>
LB1100	Bolz	Support	Appropriations 02/11/2020	In Committee 01/24/2020	<p>State intent regarding appropriations for mental health and behavioral health services</p> <p><i>It is the intent of the Legislature to fund rate increases for rates paid to providers of mental health and behavioral health services medical assistance program to provide reimbursement comparable to the rates paid by the Division of Behavioral Health of the Department of Health and Human Services – prioritizing rate increases for those paid 15% or more below such rates.</i></p> <p><i>LB1100 amended into LB1008.</i></p>
LB1101	Halloran	Monitor	Business and Labor 02/10/2020	In Committee 01/24/2020	<p>Change the schedule of compensation for certain injuries resulting in disability under the Nebraska Workers' Compensation Act</p> <p><i>Establishes that the loss or loss of use of multiple parts of the same hand, arm, foot, or leg from the same accident does not make an employee eligible for a determination of the employee's loss of earning capacity outside of the compensation schedule.</i></p>
LB1103	Hansen, M.	Monitor	Business and Labor 02/10/2020	In Committee 01/24/2020	<p>Change requirements for lump-sum settlement approval or release by the Nebraska Workers' Compensation Court</p> <p><i>The Workers' Compensation Court approval of a lump sum settlement is required if three conditions are met. One such condition is a showing that the employee, at the time the settlement is executed, is eligible for medicare, is a medicare beneficiary, or has a reasonable expectation of becoming eligible for medicare within 30 months after the date the settlement is executed. However, this is not applicable if the employee's right to receive future medical, surgical, and hospital services as provided in section 48-120 is specifically excluded from the settlement. If approval is not required, a release must be signed showing the employee is not eligible for medicare, is not a current medicare beneficiary, and does not have a reasonable expectation of becoming eligible for medicare within 30 months after the date the settlement is executed. This is not required if the employee's right to receive future medical, surgical, and hospital services as provided in section 48-120 is specifically excluded from the settlement.</i></p>



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Document	Senator	Position	Committee	Status	Description
LB1104	Arch	Monitor	Health and Human Services 02/20/2020	In Committee 01/24/2020	<p>Redefine a term under the Health Care Quality Improvement Act</p> <p><i>Redefines a "professional health care service entity" to mean an entity which is organized under the Nebraska Nonprofit Corporation Act, the Nebraska Professional Corporation Act, the Nebraska Uniform Limited Liability Company Act, or the Uniform Partnership Act of 1998 and which renders health care services through individuals credentialed under the Uniform Credentialing Act.</i></p>
LB1105	Hansen, B.	Support	Health and Human Services 02/19/2020	In Committee 01/24/2020	<p>Change audit provisions under the Medical Assistance Act</p> <p><i>States legislative intent to establish and maintain integrity procedures and guidelines for Medicaid that meet minimum federal requirements and that coordinate with federal program integrity efforts in order to provide a system that encourages efficient and effective provision of services by providers for Medicaid. Changes recovery audit language to program integrity, allowing assistance with investigations and recovery audits, or to investigate the occurrence of fraud, waste, or abuse.</i></p>
LB1106	Scheer		Revenue 02/19/2020	General File 03/25/2020 Scheer Priority Bill	<p>Eliminate obsolete sales tax provisions</p> <p><i>Tax placeholder bill.</i></p> <p><i>Proposed AM2870 (Revenue): Replaces the original provisions of LB1106 with the amended version of LB974. With this amendment, LB1106 will now be the Revenue Committee property tax relief bill. The amendment lowers property tax valuation for school tax purposes for residential, commercial/industrial, and centrally assessed valuation over a 3-year period by the following percentages: 2020 to 95% of actual value; 2021 to 91% of actual value; 2022 and thereafter to 87% of actual value. The taxable valuation for agricultural, horticultural, and special valuation for school tax purposes is reduced over a 3-year period by the following percentages: 2020 to 65% of actual value; 2021 to 60% of actual value; 2022 and thereafter to 55% of actual value. Repeals the Personal Property Tax Relief Act beginning with tax year 2020.</i></p> <p><i>Proposed AM2871 (Linehan): Placeholder amendment.</i></p> <p><i>Proposed AM2872 (Linehan): Placeholder amendment.</i></p> <p><i>Proposed AM2873 (Linehan): Placeholder amendment.</i></p>
LB1112	Kolowski	Monitor	Judiciary 02/06/2020	In Committee 01/24/2020	<p>Change provisions relating to payment for sexual assault forensic examinations</p> <p><i>Current law states that the full out-of-pocket cost or expense that may be charged to a sexual assault victim in connection with a forensic medical examination shall be paid from the Sexual Assault Payment Program Cash Fund. This bill includes the cost for prophylactic treatment for sexually transmitted infections and pregnancy prevention, as medically indicated, in that cost.</i></p>



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LB1124	Howard	Support	Health and Human Services 02/13/2020	General File 03/03/2020 Speaker Priority Bill	Adopt the Opioid Prevention and Treatment Act <i>Creates the Nebraska Opioid Recovery Fund to include all recoveries received on behalf of the state pursuant to the Consumer Protection Act or the Uniform Deceptive Trade Practices Act related to the advertising of opioids and to also include any money, except criminal penalties, whether such recovery is by way of verdict, judgment, compromise, or settlement of any case pursuant to such acts. The fund shall exclude funds held in a trust capacity where specific benefits accrue to specific individuals, organizations, political subdivisions, or governments. The purpose of the Opioid Prevention and Treatment Act is to provide for the use of dedicated revenue for opioid-disorder-related treatment and prevention. Requires DHHS to report annually on use of funds.</i>
LB1126	Vargas	Monitor	Business and Labor 02/24/2020	In Committee 01/24/2020	Change attorney's fees, penalties, and interest provisions under the Nebraska Workers' Compensation Act <i>The compensation court may award an attorney's fee for a failure to authorize or provide assurance of payment for treatment pursuant to section 48-120 if there is no reasonable controversy regarding treatment within 30 days of the request for authorization or assurance of payment. The compensation court may also, in its discretion, assess a penalty under this subsection not to exceed \$500 per day for each day that authorization is delayed without reasonable controversy.</i>
LB1129	Vargas	Oppose	Business and Labor 02/24/2020	In Committee 01/24/2020	Change evasion of law provisions and ensure certain coverage under the Nebraska Workers' Compensation Act <i>When any person, firm, or corporation lets a portion of a contract to a contractor or subcontractor for work ordinarily done by employees of the person, firm, or corporation without requiring the contractor or subcontractor to procure a policy or policies of insurance from an insurance company licensed to write such insurance to guarantee payment of compensation to injured workers according to the Nebraska Workers' Compensation Act, the contractor or subcontractor shall be included in the term employee for purposes of the act.</i>
LB1131	Groene		Education 02/04/2020	Select File 03/04/2020 Education Priority Bill	Change provisions relating to education <i>AM2671 (Groene): A provider shall not provide paper records or charge a copying fee when a request is made to receive records in an electronic format and the provider has access to such records in an easily transferable electronic format at the time of the request.-WITHDRAWN 3/3/20</i> <i>LB640, LB950, LB1076, LB1001 amended into LB1131.</i>



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LB1133	Wayne	Oppose	Judiciary 02/19/2020	In Committee 01/24/2020	<p>Increase caps on medical malpractice liability</p> <p><i>A health care provider or health care provider's employer, employee, partner, or LLC member shall file with the Director of Insurance proof of financial responsibility, \$5 million dollars (up from \$500,000) for each occurrence. In the case of physicians or certified registered nurse anesthetists and their employers, employees, partners, or LLC members, an aggregate liability amount of \$10 million dollars (up from \$1 million) for all occurrences or claims made in any policy year for each named insured shall be provided. In the case of hospitals and their employees, an aggregate liability amount of \$30 million dollars (up from \$3 million) for all occurrences or claims made in any policy year or risk-loss trust year shall be provided. The total amount recoverable under the Nebraska Hospital-Medical Liability Act from any and all health care providers and the Excess Liability Fund for any occurrence resulting in any injury or death of a patient may not exceed \$10 million (up from \$2.25 million) for any occurrence after Dec. 31, 2020.</i></p>
LB1138	Wishart	Support	Health and Human Services 02/12/2020	In Committee 01/24/2020	<p>Establish a dementia registry</p> <p><i>The department shall establish and maintain a dementia registry that includes a record of the cases of dementia that occur within the state and such information concerning these cases necessary and appropriate to provide a basic source of information for further scientific and medical research for the prevention, cure, and control of dementia. On the request of the department, each physician may produce and make available data that the department determines is necessary and appropriate from each medical record of dementia under the physician's custody or control. Each hospital may make available to the department a list of names of dementia patients, corresponding medical records numbers, and medical records which document the diagnosis and treatment of dementia on the premises of the hospital, office, or clinic during normal working hours, for the purpose of recording specific data about a patient's dementia.</i></p>
LB1158	Arch	Monitor	Health and Human Services 02/19/2020	General File 03/12/2020 Arch Priority Bill	<p>Provide information on job-skills programs to applicants for medical assistance</p> <p><i>Beginning Oct. 1, 2021, DHHS shall inform each Medicaid applicant about job-skills programs that could assist the applicant in obtaining job skills or training, employment, higher-paying jobs, or related skills. DHHS shall connect interested applicants to such job-skills programs. Requires quarterly reporting from the Labor Department to DHHS and from DHHS to the Legislature on referrals and any services received.</i></p> <p><i>Proposed AM2851 (Health and Human Services):</i></p> <ul style="list-style-type: none"> -Amends LB1158: Adds clarifying language stating that the job-skills programs may be utilized on a voluntary basis and do not affect the receipt of Medicaid services. -Adds in: -LB836 (Arch) Change provisions governing certain contracts and agreements relating to the medical assistance program. Mandates the return of any remittance if the MCO does not meet the medical loss ratio, any unearned incentive funds, and any other funds in excess of the contractor limitations to the Medicaid Managed Care Excess Profit Fund, which is established to be used first to offset any losses that might be incurred by the contracted provider and then provide for services addressing health needs of adults and children under Medicaid.



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LB1170	Cavanaugh	Monitor	Health and Human Services 02/26/2020	In Committee 01/27/2020	<p>Provide for implicit bias training, coverage under the medical assistance program for doula services and postpartum women, instruction to health professionals, and a pilot program</p> <p><i>-Every person engaged in the practice of medicine and surgery, advanced practice nursing, alcohol and drug counseling, athletic training, audiology, speech-language pathology, chiropractic, dentistry, dental hygiene, emergency medical services, genetic counseling, hearing instrument dispensing and fitting, massage therapy, medical nutrition therapy, medical radiography, mental health practice, nurse midwifery, nursing, occupational therapy, optometry, osteopathy, perfusion, pharmacy, physical therapy, podiatry, psychology, respiratory care, or surgical assisting shall annually complete implicit bias training approved by DHHS (a program designed to expose people to their unconscious prejudices or partialities, provide tools to adjust automatic patterns of thinking, and ultimately eliminate discriminatory behaviors).</i></p> <p><i>-DHHS shall develop and provide instruction to appropriate health professionals licensed, certified, or registered under the Uniform Credentialing Act regarding health screenings for maternal hypertension, gestational diabetes, and obesity. Such instruction shall include information specific to the health of black women.</i></p> <p><i>-Adds Medicaid eligibility for postpartum women for a period of 12 months with a family income equal to or less than 185% of 30 the poverty guideline.</i></p> <p><i>-Requires Medicaid reimbursement for the services of a doula.</i></p> <p><i>-DHHS shall develop and implement a pilot program regarding racial disparity across socioeconomic groups and the social determinants of health for pregnant women and mothers. Such program shall include housing assistance and home visitation for expecting or new mothers.</i></p>
LB1176	Briese	Support	General Affairs 02/03/2020	In Committee 01/27/2020	<p>Change provisions relating to the sale of tobacco products, electronic nicotine delivery systems, and alternative nicotine products</p> <p><i>Whoever shall sell, give, or furnish, in any way, any flavored liquid is guilty of a Class III misdemeanor. Any licensee who shall sell, give, or furnish in any way to any person any flavored liquid is guilty of a Class III misdemeanor. Flavored liquid means a liquid that contains nicotine or tobacco; is intended to be delivered through an electronic nicotine delivery system; and contains a natural or artificial constitution or additive that causes the liquid or its smoke to have a distinguishable flavor or aroma.</i></p>
LB1182	Wayne	Monitor	Health and Human Services 02/26/2020	In Committee 01/27/2020	<p>Provide for notice of new drug or biologics license applications and for a study of drug costs</p> <p><i>-Beginning in 2021, each sponsor shall submit to DHHS written notice that such sponsor has filed with FDA a new drug application or biologics license application for a pipeline drug, a biologics license application for a biosimilar drug. DHHS may conduct a study, not more frequently than once annually, of each manufacturer of a pipeline drug that, in the opinion of the Medicaid Director may have a significant impact on state Medicaid expenditures for outpatient prescription drugs. DHHS may contract with a third party to conduct such study. Each manufacturer that is the subject of a study shall submit information regarding the pipeline drug, including market, trial, and FDA information.</i></p>



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					<p>-By March 1, 2021, and annually thereafter, the Medicaid Director shall prepare a list of not more than 10 outpatient prescription drugs he determines are (i) provided at substantial cost to the state, considering the net cost of such drugs, or (ii) critical to public health. The list shall include outpatient prescription drugs from different therapeutic classes of outpatient prescription drugs and at least one generic outpatient prescription drug. The list shall not include any outpatient prescription drug unless the wholesale acquisition cost of the drug, less all rebates paid to the state for such drug during the immediately preceding calendar year, increased by at least 20% during the immediately preceding calendar year or 50% during the immediately preceding three calendar years and was \$60 or more for a 30-day supply of such drug or a course of treatment of such drug lasting less than 30 days. The manufacturer of an outpatient prescription drug included on the list shall provide to the DHHS a written, narrative description, suitable for public release, of all factors that caused the increase in the wholesale acquisition cost of the listed outpatient prescription drug and aggregate, company-level research and development costs and such other capital expenditures that Medicaid Director deems relevant. The quality and types of information and data that a manufacturer submits shall be consistent with that which the manufacturer includes in SEC reporting or other public disclosure. DHHS may, after notice and a hearing, impose a penalty of not more than \$7500 on a manufacturer or sponsor for each violation of this section, to be credited to the Health Care Cash Fund.</p>
LB1183	Arch	Support	Health and Human Services 02/13/2020	Select File 03/23/2020 Hilgers Priority Bill	<p>Create the Health Information Technology Board and change prescription drug monitoring program provisions</p> <p><i>Establishes a Health Information Technology Board comprised of 14 members appointed by the Governor and approved by the Legislature. The Board shall consist of a program director, two physicians, one pharmacist, one alcohol and drug counselor, one health care provider certified in pain management, one hospital administrator, one dentist, one nurse practitioner, one veterinarian, one DHHS representative, one representative of the statewide health information exchange, and, as ex officio members, the chairs of the Health and Human Services Committee and the Appropriations Committee of the Legislature. Empowers the Board to establish criteria for data collection and disbursement and to evaluate, provide governance oversight, and recommendations regarding the statewide health information exchange and the prescription drug monitoring program. Requires that the Board develop and submit an annual report to the Governor and the Health and Human Services Committee of the Legislature detailing considerations undertaken, decisions made, accomplishments, and other relevant information concerning the Board.</i></p> <p>AM2607 (Health and Human Services): -Amends LB1183 and adds in LB1058 (Howard) Adopt the Population Health Information Act.</p>



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Document	Senator	Position	Committee	Status	Description
					<p>-Amends LB1183 to increase the number of members on the HIT Board to 17. The 3 additional members added are (1) a delegate under 71-2454; (2) a health care payor defined in 25-21,247; and (3) a credentialed health information management professional. All members of the HIT, except the members of the Legislature, shall be appointed by the Governor with the approval of the Legislature. Adds a requirement that a minimum of 3 members be appointed from each congressional district. Adds an allowance for meetings by telecommunication or electronic communication, subject to the Open Meetings Act. The language in the PDMP statutes is amended so that any prescription drug dispensed in this state is entered in the system daily after such prescription drug is "sold" rather than "dispensed." Amends several sections regarding the release and use of the data in the PDMP to require compliance with HIPAA, as well as the policies adopted by the HIT Board. Maintains the current statutory language requiring collaboration between the statewide health information exchange and DHHS with respect to the release of information which had been stricken in LB1183 as introduced. Moves the provision regarding the administration of the HIT Board to 71-2455 and allows DHHS to contract with the statewide health information exchange for the administration of the Board.</p> <p>-LB1058 creates the Population Health Information Act, which provides a statutory framework for the operation of a state health information exchange, including the collection and reporting of public health data for registry submissions, immunization reporting, and syndromic surveillance. Provides duties for operating an electronic health records initiative. The designated health information exchange shall aggregate clinical information; act as the designated entity for purposes of access to and analysis of health data; collect and analyze data for purposes of informing the Legislature, DHHS, health care providers, and health care entities as to the cost of, access to, and quality of health care in Nebraska; and be a collector and reporter of public health data. Provides that DHHS shall work collaboratively with the designated health information exchange to access federal funding from CMS and other federal programs related to health information technology. States that the Act shall not preclude DHHS from working with any other entity for the purposes of collecting and analyzing data to inform the Legislature and other health care entities of the cost and value of health care in Nebraska.-ADOPTED 3/9/20</p>
LB1184	Arch	Support	Health and Human Services 02/19/2020	In Committee 01/27/2020	<p>Require standards for certain psychiatric services under the Medical Assistance Act</p> <p>The Medicaid Division shall set standards for inpatient psychiatric units and psychiatric residential treatment facilities that are no more restrictive than national accreditation standards required for direct care staff, including mandatory training and supervision standards.</p>



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Document	Senator	Position	Committee	Status	Description
LB1185		Monitor	Health and Human Services 02/21/2020	Select File 03/23/2020 Speaker Priority Bill	<p>Change provisions relating to criminal history record information checks for child care staff members</p> <p><i>Requires child care providers seeking to participate in the federal child care subsidy program to comply with criminal history record information check requirements. Defines a child care staff member as an individual who is not related to all of the children receiving child care services and who is employed for compensation by a child care provider not required to be licensed (including contract employees or self-employed individuals), whose activities involve the care or supervision of children for a child care provider or unsupervised access to children who are cared for or supervised by a child care provider; or who is residing in a family child care home and who is 18 or older. Establishes that, beginning Oct. 1, 2020, individuals not required to be licensed under the Child Care Licensing Act but wishing to participate as a provider in the federal Child Care Subsidy program shall submit a request for a national criminal history record information check for each child care staff member, including prospective child care staff members. If such requirements are not met, the individual, entity, or provider shall be ineligible to participate in the federal child care subsidy program.</i></p> <p><i>AM2668 (Health and Human Services): Incorporates LB837 into LB1185. LB837 changes provisions relating to background checks under the Child Care Licensing Act and the Children's Residential Facilities and Placing Licensure Act. Requires DHHS to seek federal funds to help with the cost of fingerprinting and the national criminal history record information checks. If DHHS does not receive sufficient federal funds to assist with the costs of the checks, then the applicant will pay the actual cost of the fingerprinting and criminal history record information check.-ADOPTED 3/9/20</i></p> <p><i>LB837 amended into LB1185.</i></p>
LB1187	La Grone	Monitor	Government, Military and Veterans Affairs 02/13/2020	In Committee 01/27/2020	<p>Change provisions relating to the Occupational Board Reform Act</p> <p><i>An occupational board shall issue an occupational license or government certification to an individual upon application if (subject to certain requirements) the applicant holds an occupational license or government certification in another state in an occupation with a similar scope of practice, as determined by the occupational board. If an applicant has work experience for an occupation in a state that does not use an occupational license or government certification to regulate an occupation with a similar scope of practice to an occupation for which this state requires an occupational license or government certification to regulate such occupation, the occupational board shall issue an occupational license or government certification. If an applicant holds a private certification and has work experience for an occupation in a state that does not use an occupational license or government certification with a similar scope of practice to an occupation for which this state requires an occupational license or government certification, the occupational board shall issue an occupational license or government certification.</i></p>



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LB1191	Howard	Monitor	Executive Board 02/20/2020	In Committee 01/27/2020	<p>Require the Department of Health and Human Services, the Office of Juvenile Services, and the Department of Correctional Services to allow employees to speak to members of the Legislature and the Public Counsel</p> <p><i>An employee of the Office of Juvenile Services or the Department of Health and Human Services or the Department of Corrections shall be permitted to communicate with members of the Legislature, such members' employees or representatives, the Public Counsel, and the Public Counsel's employees at all reasonable times regarding office and departmental operations, including conditions for juveniles and employees at youth rehabilitation and treatment facilities. An employee of the office or the departments shall be permitted to testify at any public hearing regarding such operations and conditions.</i></p>
LB1196	Morfeld	Monitor	Banking, Commerce and Insurance 02/24/2020	In Committee 01/27/2020	<p>Adopt the Pharmacy Benefit Manager Regulation Act and require an audit under the Medical Assistance Act</p> <p><i>A pharmacist or contracted pharmacy shall not be prohibited from or subject to penalties or removal from a network or plan for sharing information regarding the cost, price, or copayment of a prescription drug with a covered individual. A pharmacy benefit manager shall not prohibit a pharmacist or contracted pharmacy from discussing any such information or selling a more affordable alternative to a covered individual. An insurer that offers a health plan which covers prescription drugs shall not require a covered individual to make a payment for a prescription drug in an amount that exceeds the lesser of the covered individual's copayment, deductible, or coinsurance for such prescription drug or the cash price. A pharmacy benefit manager shall not exclude a pharmacy from participation in its specialty pharmacy network. Any insurer on its own or through its contracted pharmacy benefit manager or representative of a pharmacy benefit manager shall not conduct spread pricing in Nebraska on any drug paid with state or federal funds. Provides a list of qualifications that must be met before a particular drug is placed or continues to be placed on a maximum allowable cost list. The Auditor of Public Accounts shall, prior to Jan. 1, 2021, conduct an audit of the pharmacy benefit of the Medicaid program from 2017-2019.</i></p>
LB1198	Stinner		Appropriations 02/04/2020	Approved by Governor (E-Clause) 03/25/2020 Appropriations Priority Bill	<p>Appropriate funds for the Governor's Emergency Program - COVID-19</p> <p><i>Appropriates \$40,950 from the General Fund to DAS to be used for restoration of the doors to the Norris Chamber.</i></p> <p><i>AM2842 (Slama): Appropriates \$125,000 from the General Fund for FY2019-20 to the Department of Natural Resources, for Program 334, to be used to provide a grant to a city with a population of less than 1,000 residents to carry out an engineering study to develop cost estimates for repair of a breached levee system that resulted in the flooding of drinking water and wastewater treatment facilities. -WITHDRAWN 3/11/20</i></p> <p><i>AM2844 (Lathrop): Appropriates \$52M from the General Fund for FY2020-21 to the Department of Corrections for the construction or expansion of a community corrections facility with 300 new beds in the Omaha metropolitan area. (LB 916) -LOST 3/11/20</i></p>



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Document	Senator	Position	Committee	Status	Description
					<i>AM2976 (Stinner): Strikes the underlying bill and uses LB1198 as the vehicle to transfer \$83.6 million from the Cash Reserve Fund to the Governor's Emergency Cash Fund - Governor's Emergency Program - COVID-19 by June 30, 2020.</i>
					<i>From Governor's Summary:</i>
					<i>DHHS Public Health</i>
					<i>-Local Response Efforts - \$38,156,700 – Additional funding for Personal Protective Equipment (PPE) and other supplies to local jurisdictions, and support to local health departments for staffing, PPE, call centers, information technology needs including additional laptops/servers, and other essential expenditures.</i>
					<i>-DHHS Staffing - \$4,004,000 - Additional staffing expenditures are needed to cover costs for overtime and additional staff. The areas that need immediate surge and sustained staffing are epidemiology, support services (administrative, communications, and data entry), emergency preparedness, and contracts for staffing in epidemiology and interpreters to meet the increased demands of the Division of Public Health.</i>
					<i>Surge Staffing for Veterans Hospitals & DHHS Care Facilities - \$13,000,000 - Additional staffing expenditures are needed to cover costs for overtime and additional staff to maintain facility healthcare coverage needs. The areas that need immediate surge and sustained staffing are veterans' homes and DHHS care facilities including nursing, administrative, and other health care professionals. This was calculated to cover a surge of 50% in additional staffing needs in the event that staff is unable to care for individuals at the facilities due to staff quarantine or isolation requirements.</i>
					<i>UNMC</i>
					<i>-COVID-19 Lab Testing - \$515,000 - Augments the cost of the reagents, laboratory personnel, and equipment to conduct COVID-19 lab testing for the state. This would include funds to purchase a combined sample extraction/detection robot for efficient and accurate serial processing of specimens, reducing staffing needs. This would be to support increased efficiency and capacity of statewide testing through the Nebraska Public Health Laboratory.</i>
					<i>-Lab Equipment, Software Programming, and Personnel - \$2,500,000 - The equipment includes higher throughput automated equipment for microbiology and molecular diagnostics. The increased testing throughput will be implemented on a fast track within the next 2-4 weeks but would support a prolonged outbreak, which is likely, as well as help prepare for future outbreaks. All funds would be dedicated to support statewide needs.</i>
					<i>-UV Light Boxes - \$100,000 - The UV light boxes would provide tertiary cleaning of N95 respirators for reuse by healthcare workers.</i>
					<i>-Knowledge Center - \$343,900 - This system is used by coalitions and all stakeholders across the state to establish an interoperable platform for communication, bed tracking, resource sharing, and an overall interoperable platform.</i>
					<i>Additional Money</i>
					<i>-Dollars held in Reserve - \$25,000,000 - The \$25 million in additional money to be held in reserve for use if needed, according to information sent to state lawmakers Sunday. -ADOPTED 3/23/20</i>



ZULKOSKI ■ WEBER

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Document	Senator	Position	Committee	Status	Description
LB1215	Walz	Monitor	Appropriations 02/10/2020	In Committee 01/27/2020	Appropriate funds to the Department of Health and Human Services <i>Appropriates \$17 million from the General Fund in each of the next two fiscal years to DHHS for Program 424 to fund all persons on the wait list for the developmental disability services waiver.</i>
LR3CA	Erdman	Oppose	Revenue 02/07/2019	In Committee 01/14/2019	Constitutional amendment to provide income tax credits for property taxes paid <i>Directs the Legislature to provide (starting in 2021) a refundable credit against the income tax imposed by the State of Nebraska in an amount equal to 35% of the property taxes that were: Levied on real property located in this state; and Paid by the taxpayer during the taxable year.</i>