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LB19	Briese	Monitor	Business and Labor 03/25/2019	In Committee 01/14/2019	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 *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.*
LB22	Kolterman	Monitor	Health and Human Services 01/23/2019	Approved by Governor on March 12, 2019 03/13/2019	Change provisions relating to the Nursing Facility Penalty Cash Fund *Amends the Nursing Facility Penalty Cash Fund, which presently allows DHHS to collect penalties against nursing facilities that violate federal regulations for participation in Medicaid or if violations create a threat to residents. Directs DHHS to adopt rules for the Fund distributions in accordance with current federal law to support activities that benefit nursing home residents. Strikes current circumstances considered a basis for distribution, including costs for resident relocation, maintaining operations pending correction of violations, closing a nursing facility, and reimbursing residents for personal funds lost.* *AM18 (Health and Human Services): Requires that funds collected as civil penalties imposed by the federal Centers for Medicare and Medicaid Services be distributed under the rules and regulations DHHS is to establish to determine the circumstances in which funds from the Nursing Facility Penalty Cash Fund may be distributed. -ADOPTED 2/7/19*
LB24	Kolterman	Support	Appropriations 03/25/2019	In Committee 01/14/2019	Appropriate funds to the Department of Health and Human Services *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.*
LB25	Kolterman	Support	Health and Human Services 01/30/2019	Approved by Governor on March 12, 2019 03/13/2019	Provide for additional fees under the Uniform Credentialing Act and create the Patient Safety Cash Fund *Establishes patient safety fee of $50 for physicians and $20 for PAs to be collected biennially with the initial issuance and renewal of practice credentials. Creates the Patient Safety Cash Fund to support activities of a patient safety organization (the Nebraska Coalition for Patient Safety, which is currently funded by contributions from voluntary member health care facilities and provides for the reporting of aggregate information about patient safety occurrences). Sunsets Jan. 1, 2026.* *NMA Legislation*



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LB29	Kolterman	Support	Health and Human Services 02/06/2019	Approved by Governor on March 21, 2019 03/21/2019	Provide and eliminate telehealth provisions *Any credential holder under the Uniform Credentialing Act (except a credential holder under the Athletic Training, the Cosmetology, Electrology, Esthetics, Nail Technology, and Body Art, the Dialysis Patient Care Technician, the Environmental Health Specialists, the Funeral Directing and Embalming, the Massage Therapy, the Medical Radiography, the Nursing Home Administrator, the Surgical First Assistant, or the Water Well Standards and Contractors' Practice or Registration Acts) may establish a provider-patient relationship through telehealth. Any credential holder providing a telehealth service to a patient may prescribe the patient a drug if the credential holder is authorized to prescribe under state and federal law.* *AM86 (Health and Human Services): Strikes the Athletic Training Practice Act from the exemptions, thereby including credential holders under the Athletic Training Practice Act in the bill. Adds the Veterinary Medicine and Surgery Practice Act as an exempted act so that credential holders under that practice act would not be included under the bill.-ADOPTED 2/21/19* *AM367 (Kolterman): Provides that the act does not apply to credential holders under the Perfusion Practice Act.-ADOPTED 2/21/19* *NHA Legislation*
LB37	Hilkemann	Monitor	Health and Human Services 01/30/2019	In Committee 01/14/2019 Speaker Priority Bill	Change the Podiatry Practice Act to authorize a physician assistant to assist a podiatrist *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.*

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LB43	Bolz	Monitor	Judiciary 02/22/2019	In Committee 01/14/2019	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.* *WFO Legislation*
LB60	Cavanaugh	Support	Health and Human Services 01/24/2019	Approved by Governor on March 12, 2019 03/13/2019	Change terminology relating to shaken baby syndrome *Changes the term "shaken baby syndrome" to "abusive head trauma in infants and children" and includes crying plans for purposes of DHHS child care training and programs and public awareness activities, including materials that hospitals must request to present to each maternity patient and father of a newborn.* *AM17 (Health and Human Services): Clarifies that materials and videos shown to new parents by hospitals are to show strategies for preventing abusive head trauma in addition to infant death. Also changes provision requiring such materials to show the dangers of allowing infants to sleep in a bed with others to the dangers of allowing infants to sleep on the same surface as others.-ADOPTED 2/7/19*
LB62	Howard	Monitor	Health and Human Services 03/14/2019	General File 03/25/2019	Provide for education regarding and treatment of trichomoniasis *Adds trichomoniasis to list of STDs for which healthcare professionals may prescribe medication to a person's partners if that person is diagnosed, even if they have not examined that person's partners.*

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LB74	Williams	Support	Health and Human Services 01/23/2019	Approved by Governor on March 12, 2019 03/13/2019	Provide for validation by certified pharmacy technicians *Provides that a certified pharmacy technician may validate—check the accuracy and completeness of tasks—of another pharmacy technician if: both pharmacy technicians are certified; they are working within the confines of a hospital; they are using bar code technology, radio frequency identification technology, or something similar, to validate the accuracy of medication; they are validating prepackaged medication; they are acting in accordance with hospital policies.* *AM91 (Health and Human Services): Changes language to provide that pharmacy technicians may validate the "acts" of another pharmacy technician under certain circumstances while the original bill only provided for validation of "tasks and functions" by another pharmacy technician. Changes provisions to only allow this validation of one pharmacy technician by another if both are "working within the confines of a hospital preparing medications for administration in the hospital" rather than "working within the confines of a hospital." -ADOPTED 2/7/19*
LB110	Wishart	Monitor	Judiciary 01/25/2019	In Committee 01/14/2019 Wishart Priority Bill	Adopt the Medical Cannabis Act *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.*

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					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.
LB112	Howard	Support	Health and Human Services 02/06/2019	Approved by Governor on March 21, 2019 03/21/2019	Provide for waiver of certain occupational and licensing fees as prescribed *All fees for initial credentials under the Uniform Credentialing Act for low-income individuals, military families, and young workers shall be waived.* *AM526 (Howard): Amends the definition of young worker. For an initial credential under the Cosmetology, Electrology, Esthetics, Nail Technology, and Body Art Practice Act, except for a body art license, a young worker is 17-25. For all other provisions, the age is 18-25. Specifies that the applicant would still be responsible for the costs of fingerprinting and criminal background check.- ADOPTED 3/7/19*

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LB119	Arch	Monitor	Health and Human Services 01/24/2019	Approved by Governor on March 12, 2019 03/13/2019	Provide for immunity from liability, confidentiality of information, and a burden of proof under the Health Care Quality Improvement Act *Adds peer review protection for professional health care service entities. Defines a professional health care service entity as an entity organized for purposes of rendering professional services pursuant to 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.* *AM211 (Health and Human Services): Amends the definition of a peer review committee to include a committee established by a professional health care service entity. Further, requires such professional health care service entity to have written policies and procedures governing their peer review committee if they are going to conduct a peer review process under the Health Care Quality Improvement Act. Further requires that health care providers or individuals claiming confidentiality protections under the peer review process has the burden of proving that the communications and documents are protected.-ADOPTED 2/12/19*
LB140	Kolowski	Support (with letter)	Health and Human Services 01/25/2019	In Committee 01/15/2019	Change provisions relating to the Indoor Tanning Facility Act *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.*
LB149	Quick	Support	General Affairs 03/04/2019	General File 03/25/2019 Quick Priority Bill	Change provisions relating to vapor products *Raises the age for using vapor products from 18 to 21 (a violation is a Class V misdemeanor). Establishes a Class III misdemeanor for selling or furnishing any vapor products or flavored liquid to anyone under 21 and a Class V misdemeanor for any person under 21 who obtains vapor products or flavored liquids by representing he or she is 21 or over.* *Proposed AM901 (General Affairs): Provides for a Class V misdemeanor for those under 19 who use cigarettes, cigars, electronic nicotine systems, alternative nicotine products, or tobacco products. This replaces language that provides the Class V misdemeanor for those under 18 who use cigarettes, cigars, electronic nicotine systems, alternative nicotine products, and other tobacco products and for those under 21 using vapor products. Adds definitions for cigarettes and for electronic nicotine delivery system. Replaces language on vapor products with electronic nicotine delivery systems. Provides for a Class III misdemeanor for selling these products through a self-service display.*

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LB205	Kolterman	Support	Health and Human Services 01/23/2019	In Committee 01/15/2019	Adopt the Surgical Technologist Registration Act *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.*
LB209	Albrecht	Monitor	Judiciary 03/20/2019	In Committee 01/15/2019 Albrecht Priority Bill	Require information regarding reversal of medication abortion *Requires that, in order to be deemed to have given her voluntary and informed consent, a woman seeking an abortion be told by a physician that it may be possible to reverse the effects of a medication abortion if she changes her mind; requires DHHS to make available information on and assistance with such a reversal on their web site.*
LB216	Kolterman	Support	Judiciary 02/06/2019	In Committee 01/15/2019	Prohibit releasing a person in custody to avoid medical costs *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.* *NHA Legislation*
LB217	Pansing Brooks	Monitor	Business and Labor 02/11/2019	Passed 04/11/2019	Prohibit discrimination against an employee for communicating about employee wages, benefits, or other compensation *Prohibits an employer from discharging or retaliating against any employee because such employee inquired about, discussed, or disclosed comparative compensation information for the purpose of determining whether the employer is compensating any employee in a manner that provides equal pay for equal work. Does not apply to instances in which an employee, who has authorized access to the wage information as a part of such employee's job, discloses the wages of other employees to an individual who does have authorized access to such information, unless such disclosure is in response to a charge or complaint in furtherance of an investigation or action.* *AM387 (Business and Labor): Changes enforcement duty from the Department of Labor to the Nebraska Equal Opportunity Commission. Removes language limiting the purpose for discussing wages to equal pay for equal work.-ADOPTED 3/14/19*

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					AM1184 (Hansen, M.): Inserts new language which clarifies the legislation: shall not be contrary to applicable state or federal law; does not create an employer or employee obligation to disclose employee wages, benefits or other compensation information; does not permit an employee without written consent, to disclose proprietary information; does not permit an employee to disclose wage, benefits or other compensation information to competitors of the employer; does not apply to employees exempt from the Nebraska Fair Employment Practice Act; does not permit employees to discuss wages, benefits or other compensation information during work hours as defined in existing workplace policies or in violation of specific contractual provisions; and does not permit employees to disseminate employee wage, benefits or other compensation information to the general public. Clarifies that the general public does not include public officials, judicial officers, legislators trade associations, or other reasonable third parties for the employee's mutual aid or protection. Finally, the amendment clarifies that the bill's changes shall not be construed to impair or affect obligations of any lawful contract existing before this act's effective date.- ADOPTED 4/3/19
LB240	Hansen, M.	Monitor	Judiciary 02/20/2019	In Committee 01/16/2019	Change procedures for determining competency to stand trial *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.*
LB245	Erdman	Monitor	Health and Human Services 03/28/2019	In Committee 01/16/2019	Eliminate an exception to the medicaid preferred drug list *Removes exception that excludes antidepressant, antipsychotic, and anticonvulsant drugs from consideration for inclusion in the Medicaid preferred drug list.*
LB247	Bolz	Monitor	Judiciary 02/01/2019	In Committee 01/16/2019	Adopt the Advance Mental Health Care Directives Act *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.*

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LB254	McCollister	Monitor	Business and Labor 02/04/2019	Final Reading 03/12/2019	Adopt the Fair Chance Hiring Act *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.* *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*
LB260	Hansen, B.	Monitor	Health and Human Services 02/21/2019	General File 02/28/2019	Change provisions relating to medicaid recovery audit contractors *Eliminates language that mandates the department contract with audit contractors to promote the integrity of the medical assistance program. Also eliminates language that mandates the department contract to support a health insurance premium assistance program. Makes language permissive.*
LB276	McCollister	Monitor	Revenue 02/13/2019	In Committee 01/17/2019	Change provisions relating to the taxation of income from certain small business corporations and limited liability companies *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.*
LB294	Scheer	Support	Appropriations 02/26/2019	In Committee 01/17/2019	Appropriate funds for the expenses of Nebraska State Government for the biennium ending June 30, 2021 *Governor's main budget request bill. Provides two-year average budget growth of 3.1%. Includes increases to the Property Tax Credit Relief Fund, raising the total to $275 million per year. Creates new $6.78 million budget line for new Nebraska Talent Scholarships and an additional $2.5 million to the Developing Youth Talent Initiative (up from current funding of $500,000). Includes $69.1 million over two years to fund Medicaid expansion. Other increases in Medicaid costs covered by increased federal funds and an $10 million increased appropriation. No straightforward cuts to Medicaid provider rates. Includes placeholder for funding child care provider rates. Includes $2.7 million and $5.6 million per year to address child welfare provider rates. Decreases County Juvenile Services Aid to fund VINE program within the Crime Commission that was previously federally funded. Fully funds the Water Sustainability Fund at $11 million per year.* *Proposed AM308 (La Grone): Strikes Section 3, which provides a reappropriation of all unexpended appropriation balances existing in June 30, 2020, to the next fiscal year, to the respective agencies, programs, and funds. (Placeholder amendment)*

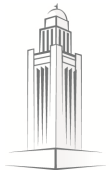
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					Proposed AM309 (La Grone): Strikes Section 4, which provides all certified encumberance (planned/obligated) amounts on June 30, 2019, and June 30, 2021, be appropriated for FY2019-20 and FY2020-21. (Placeholder amendment)
LB305	Crawford	Monitor	Business and Labor 02/04/2019	General File 03/07/2019	Adopt the Healthy and Safe Families and Workplaces Act *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.* *Proposed AM592 (Business and Labor): Eliminates "domestic partner" from the definition of family member.*
LB306	Crawford	Monitor	Business and Labor 01/28/2019	Final Reading 02/22/2019	Change provisions relating to good cause for voluntarily leaving employment under the Employment Security Law *Adds leaving employment to care for a family member with a serious health condition to the list for good cause for voluntarily leaving employment.* *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*
LB311	Crawford	Monitor	Business and Labor 02/04/2019	General File 03/07/2019 Cavanaugh Priority Bill	Adopt the Paid Family and Medical Leave Insurance Act *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.*

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					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. *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.*
LB313	Bolz	Support	Executive Board 02/20/2019	In Committee 01/18/2019	Provide the office of Inspector General of the Nebraska Correctional System with oversight authority over regional center *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.*
LB314	Briese	Monitor	Revenue 02/14/2019	In Committee 01/18/2019	Adopt the Remote Seller Sales Tax Collection Act and change revenue and taxation provisions *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.*



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LB316	Kolterman	Monitor	Banking, Commerce and Insurance 03/04/2019	Select File 03/27/2019 Banking, Commerce and Insurance Priority Bill	Provide protections for pharmacies to disclose information regarding drug prices and prohibit insurers from charging covered individuals in excess of certain amounts *Creates the Pharmacy Benefit Fairness and Transparency Act. Requires that all pharmacy benefit managers (PBMs) doing business in Nebraska obtain certification as a Third Party Administrator, with oversight by the Nebraska Department of Insurance, and pay a certification fee not to exceed $5000. Violation shall be considered unfair trade practices per the Unfair Insurance Trade Practices Act. Allows the Director to examine the financial condition of the PBM pursuant to the Insurers Examination Act. Requires a PBM to exercise good faith and fair dealing. Prohibits PBMs from charging or collecting from a covered person a copayment that exceeds the amount retained by the network pharmacy from all payment sources (any amount paid shall be applied toward the insured's deductible). Prohibits a PBM from excluding a Nebraska pharmacy from participation in its specialty pharmacy network. Prohibits covered individuals who use a mail-order pharmacy from being charged fees or higher copays to utilize a contracted pharmacy. A pharmacist or contract pharmacy shall not be prohibited from or subject to penalties or removal from a network or plan for sharing info regarding the cost, price, or copayment of a drug with a covered individual or his or her caregiver.* *AM778 (Banking, Commerce and Insurance): Replaces the bill. Provides that a 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. Further provides that a pharmacy benefit manager shall not prohibit or inhibit a contracted pharmacy from discussing any such information or selling a more affordable alternative to a covered individual. Provides that an insurer shall not require a covered individual to make a payment for a prescription drug at the point of sale in an amount that exceeds the lesser of: (a) the individual's copayment, deductible, or coinsurance for such prescription drug; or (b) the amount any individual would pay for such prescription drug if the individual paid in cash.-ADOPTED 3/25/19* *AM1187 (Kolterman): Adds an emergency clause.-ADOPTED 4/10/19*
LB327	Bolz	Support	Appropriations 03/26/2019	In Committee 01/18/2019	State intent to appropriate funds for an increase in rates paid to behavioral health service providers *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.*
LB364	Quick	Oppose	Business and Labor 03/04/2019	In Committee 01/18/2019	Change provisions relating to a limit on fees under the Nebraska Workers' Compensation Act *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.* *Proposed AM475 (Quick): Requires the compensation court to establish schedules of fees for any opinion or report addressing the medical condition, causation, or disability.*

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LB365	Crawford	Support	Judiciary 02/27/2019	In Committee 01/18/2019	Adopt the Health Care Directives Registry Act *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.*
LB378	Hansen, B.	Oppose	Transportation and Telecommunications 02/12/2019	In Committee 01/22/2019	Change helmet provisions for autocycles, motorcycles, and mopeds *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.*
LB403	Stinner	Support	Appropriations 03/25/2019	In Committee 01/22/2019	Provide a duty for the Department of Health and Human Services when calculating certain medicaid rates *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.*
LB404	Stinner	Support	Appropriations 03/25/2019	In Committee 01/22/2019	State intent relating to medicaid budgeting *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.*
LB409	Kolowski	Support	Urban Affairs 02/12/2019	Passed 04/11/2019	Adopt design standards for health care facilities *Adopts 2018 Guidelines for Design and Construction of Hospitals, Outpatient Facilities, and Residential Health, Care, and Support Facilities published by the Facility Guidelines Institute for new healthcare facilities and for any major addition, remodeling, restoration, repair, or renovation of any health care facility.* *AM221 (Urban Affairs): Provides that for nursing homes, the 2018 editions of the FGI guidelines would only apply to new construction.-ADOPTED 3/18/19*
LB418	Cavanaugh	Monitor	Business and Labor 03/04/2019	In Committee 01/23/2019 Business and Labor Priority Bill	Change provisions relating to certain medical debt collection involving workers' compensation *Prohibits collection agencies from attempting to collect a debt that is the subject of a pending workers' compensation case.*
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 *Covers 24 treatments per benefit year.*

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LB455	Arch	Support	Judiciary 03/27/2019	In Committee 01/23/2019	Change medical services payment provisions relating to jails *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."*
LB468	Walz	Monitor	Health and Human Services 03/01/2019	General File 04/05/2019 Health and Human Services Priority Bill	Prohibit additional services and populations under the medicaid managed care program *Stops the addition of any service or population to the medicaid managed care program until the later of: Jan. 1, 2020, or until a critical evaluation is performed of the at-risk capitated managed care program of the medical assistance program and the success of such managed care program is proven.* *Proposed AM46 (Walz): Changes the language to prohibit the addition of "long-term care services and supports" to the Medicaid managed care program for the provided time period rather than "additional service or population." Also changes the date until which none of these additions may be made to the program without evaluation from Jan. 1, 2020 to Jan. 1, 2022. Adds a definition of "long-term care services and supports" to include services of a skilled nursing facility, a nursing facility, and an assisted-living facility and home and community-based services.* *Proposed AM1166 (Health and Human Services):* *-LB468 is amended so that long term care services and supports, including skilled nursing facilities, nursing facilities, assisted-living facilities, and home and community based services, may not be added into the Medicaid managed care program before July 1, 2021.* *-Adds provision from LB328, incorporating the family finding project portion. The family finding project was a pilot project with a sunset date of June 30, 2019. AM1166 incorporates the provisions from LB328 that remove the sunset and pilot project status of the family finding program.*
LB480	Quick	Monitor	Appropriations 03/25/2019	In Committee 01/24/2019	State intent relating to appropriations to local public health departments *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.*
LB481	Bolz	Monitor	Appropriations 03/28/2019	In Committee 01/24/2019 Scheer Priority Bill	State intent relating to an appropriation to the Department of Health and Human Services *States the intent to appropriate $XXX from the General Fund to DHHS.* *Proposed AM614 (Bolz): The Department of Health and Human Services shall administer the Federal Title X Program in accordance with applicable federal regulations in existence as of the effective date of this act.*

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					Proposed AM1125 (Stinner): Provides that no funds disbursed under the Federal Title X Program are to be used in programs where abortion is a method of family planning, none of the funds disbursed may be granted to an organization that performs, assists with, provides directive counseling in favor of, or refers for abortion. Provides that an otherwise qualified organization is not disqualified from receipt of funds because of its affiliation with a provider of abortion services.
LB484	Lowe	Support	Judiciary 03/15/2019	In Committee 01/24/2019	Change provisions relating to assault on certain employees and officers *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.*
LB487	La Grone	Monitor	Business and Labor 03/04/2019	In Committee 01/24/2019	Require the Nebraska Workers' Compensation Court to adopt an evidence-based drug formulary *Requires the Workers' Compensation Court to adopt an evidence-based drug formulary consisting of Schedule II, II, 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.*
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 *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.*
LB489	Howard	Monitor	Health and Human Services 03/28/2019	In Committee 01/24/2019	Require registration for the prescription drug monitoring system *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.*

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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 *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 $2.14 per package.*
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 *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.*
LB499	Morfeld	Monitor	Health and Human Services 03/27/2019	In Committee 01/24/2019	Provide requirements for services by psychologists *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.*
LB501	Hunt	Monitor	Banking, Commerce and Insurance 03/04/2019	In Committee 01/24/2019	Require insurance coverage for in vitro fertilization procedures *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.*
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 *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.*

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LB518	Linehan	Support	Health and Human Services 03/06/2019	General File 03/25/2019	Adopt the Support for Trafficking Survivors Act

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.

Proposed 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.

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Document	Senator	Position	Committee	Status	Description
LB519	Slama	Monitor	Judiciary 03/13/2019	In Committee 01/24/2019 State-Tribal Relations Priority Bill	Change statutes of limitations for certain sexual and trafficking offenses and authorize interception of communications relating to such offenses *Establishes statutes of limitations for certain sexual and trafficking offenses under 28-831(a)(2) or (3) or an offense under 28-813.01 or 28-1463.05(a) (visual depictions of sexually explicit acts), providing that a person shall not be prosecuted unless indictment is found by a grand jury or a complaint is filed before the magistrate within 7 years of the offense or within 7 years after the victim's 18th birthday, whichever is later, and a warrant for the defendant's arrest has been issued. Provides that there shall not be any time limitations for prosecution for labor or sex trafficking of a minor under 28-321(1) or an offense under 28-1463.03 (visual depictions of sexually explicit acts with a child involved). Expands wiretapping authorization statute (86-291) to include investigations for labor or sex trafficking offenses.*
LB526	McDonnell	Monitor	Business and Labor 03/04/2019	In Committee 01/24/2019	Change provisions relating to compensation for temporary disability under the Nebraska Workers' Compensation Act *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.*
LB529	Groene	Oppose	Revenue 02/28/2019	In Committee 01/24/2019	Change provisions relating to a property tax exemption for hospitals *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.*
LB541	Walz	Monitor	Health and Human Services 03/13/2019	General File 04/02/2019	Provide a duty for the Department of Health and Human Services relating to bone marrow *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.* *Proposed 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.*
LB554	Wishart	Monitor	Health and Human Services 02/22/2019	In Committee 01/24/2019	Change provisions relating to prescription drugs not on the preferred drug list under the Medical Assistance Act *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, antipyschotic, or anticonvulsant medication.*

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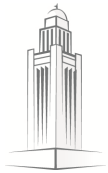
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LB555	Hunt	Monitor	Health and Human Services 03/14/2019	In Committee 01/24/2019	Adopt the Sexual Assault Emergency Care Act and provide for disciplinary action against hospitals *A hospital which provides emergency care for a sexual assault survivor 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.*
LB556	Howard	Support	Health and Human Services 02/13/2019	Select File 04/09/2019 Howard Priority Bill	Change provisions relating to the prescription drug monitoring program *Information required for prescribers (other than veterinarians) must now include a patient identifier number; number of refills authorized; available prescription directions and any other information as required by the Dispenser's Implementation Guide for the prescription drug monitoring program developed by NeHII in collaboration with DHHS. The statewide health information exchange/PDMP may release data collected for statistical, public research, public policy, or educational purposes after removing information which identifies the patient or prescriber. Also allows for the distributions of the prescription drug information and any other data collected pursuant to the PDMP to: other state prescription drug monitoring programs; state and regional health information exchanges; the medical director and pharmacy director of the Division of Medicaid and Long-Term Care, the medical directors and pharmacy directors of medicaid-managed care entities, the state's medicaid drug utilization review board, and any other state-administered health insurance program or its designee if any such entities have a current data-sharing agreement with the statewide health information exchange, and if such release is in accordance with the HIPPA; organizations which facilitate the interoperability and mutual exchange of information among state prescription drug monitoring programs or state or regional health information exchanges; or electronic health record systems or pharmacy-dispensing software systems for the purpose of integrating prescription drug information into a patient's medical record.* *AM383 (Health and Human Services):* *-Changes to LB556: Adds requirement for veterinarians to include "National Drug Code number as published by the Food and Drug Administration" rather than the name of the drug. Requires a telephone number "if available." Removes Social security numbers as patient identifiers. Removes provision to require the submission of the prescription directions. Language is inserted in the confidentiality provision to reference section (9) of 71-2454 as the exception to the confidentiality and privilege provisions. Language requiring the statewide health information exchange to work "in collaboration with the department" is inserted in several places.*

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					-Incorporates provisions of LB557 with some changes: inserts a new subsection defining practitioner to include physicians, physician assistants, dentists, pharmacists, podiatrists, optometrists, and various advanced practice nurses (excludes hospitals and veterinarians, originally proposed in LB557). Changes a practitioner's duty to consult with a patient about the risks related to a controlled substance; rather than have that conversation before the initial prescription and the third prescription, the bill instead requires the conversation if it has not been had in the last 60 days. Allows other members of the patient care team who are under the direct supervision of or in consultation with the prescribing practitioner to have the conversation about risks with the patient. Adds a subsection to clarify that the duty to have this conversation does not apply to a prescription given for a hospice patient or for the course of treatment for cancer or palliative care.-ADOPTED 4/8/19
LB557	Lindstrom	Support	Health and Human Services 02/13/2019	In Committee 01/24/2019	Change provisions relating to prescriptions for controlled substances *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.*
LB558	Hilkemann	Monitor	Appropriations 03/26/2019	In Committee 01/24/2019	Appropriate funds to the Department of Health and Human Services *Provides $10,269,035 in each of the next two years for an increase in rates paid to providers of developmental disability services.* *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.*
LB563	Bolz	Support	Education 02/05/2019	In Committee 01/24/2019	Adopt the Access College Early Tech Promise Program Act *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.*



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LB566	Crawford	Monitor	Executive Board 02/08/2019	General File 03/18/2019	Provide for notice to the Legislature if the Department of Insurance applies for a 1332 waiver from requirements of federal law as prescribed *The Department of Insurance shall notify the chairperson of the Banking, Commerce, and Insurance Committee prior to submitting any request or application to the CMS for a state innovation waiver under the federal Patient Protection and Affordable Care Act (allows states to implement innovative ways to provide access to quality health care that is at least as comprehensive and affordable as would be provided absent the waiver). The department shall not implement or otherwise act on the waiver unless specifically authorized by the Legislature.* *Proposed AM454 (Executive Board): Strikes the original language and instead requires the Department of Insurance to notify the Banking, Commerce and Insurance Committee prior to submitting an application to CMS for a state innovation waiver under the Affordable Care Act. The Banking Committee then must hold a public hearing on the waiver application.*
LB567	Morfeld	Monitor	Health and Human Services 02/13/2019	In Committee 01/24/2019	Adopt the Prescription Drug Cost Transparency Act *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.* *-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.* *-The pharmacy benefit manager shall provide notice of the increase to contracting public and private purchasers which provide coverage to more than 500 lives.* *-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.* *-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.* *-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.* *(See LB 862 from 2018)*

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Document	Senator	Position	Committee	Status	Description
LB569	Morfeld	Monitor	Banking, Commerce and Insurance 03/05/2019	In Committee 01/24/2019	Adopt the Out-of-Network Consumer Protection, Transparency, and Accountability Act *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 amd 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.*
LB596	Quick	Monitor	Executive Board 02/20/2019	In Committee 01/25/2019	Adopt the Office of Inspector General of Nebraska Public Health *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.*
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 *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.*

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Nebraska Hospital Association
106th Legislature, 1st Regular Session

Document	Senator	Position	Committee	Status	Description
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 *Requires DHHS to provide data in the Adult Protective Services Registry to the Public Counsel on request.*
LB600	Walz	Monitor	Executive Board 02/27/2019	General File 03/18/2019 Executive Board Priority Bill	Change a time limit relating to the authority of the deputy public counsel for institutions *Allows the Public Counsel authority over mental health institutions, veterans institutions operated by the Department of Veteran Affairs, and other behavioral health service providers for any individual who was a patient within the prior 24 months of a state-owned and state-operated regional center and for all complaints on administrative acts of the department or provider when those acts are concerned with the interests of individuals placed within those institutions.* *Proposed AM1241 (Bolz): Adds revised provisions of LB330 (Change the administration, duties, membership, purpose, and reports of the Nebraska Children's Commission): The organizational structure of the NCC, including its statutory committees and their committee membership remain unaltered. The NCC voting membership includes: 15 child welfare and juvenile justice stakeholders appointed by the Governor, including at least one young adult former foster youth, one biological parent with previous (CW or JJ) system involvement, one Tribal representative. The NCC non-voting members includes: legislative branch (representatives from the HHS, Judiciary, and Appropriations committees); judicial branch (3 persons appointed by the State Court Administrator); executive branch (CFS Director, DD Director, Medicaid Director, Commissioner of Education); the FCRO executive director; and the inspector general for child welfare. Regarding the structure and operations: keeps the Commission staff and administrative provisions within the FCRO; eliminates the sunset date; specifies Health Care Cash Fund as NCC funding source; modifies the requirement for the NCC to identify 3-5 strategic priorities for research and planning for each biennium; and adds an annual hearing before the HHS Committee to report on progress towards the NCC's 3-5 strategic priorities.* *LB330 amended into LB600.*
LB614	Crawford	Monitor	Revenue 03/01/2019	In Committee 01/25/2019	Change revenue and taxation provisions *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).* *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.*

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LB631	Morfeld	Support	Executive Board 02/22/2019	In Committee 01/25/2019	Create the Medicaid Expansion Implementation Task Force *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.*
LB642	McDonnell	Monitor	Appropriations 03/12/2019	In Committee 01/25/2019	Create the Brain Injury Trust Fund *Establishes the Brain Injury Trust Fund to be administered through UNMC and the Brain Injury Oversight Committee, consisting of the following directors or designees: the Commission of Education; the Director of Behavioral Health of DHHS; the Director of Public Health of DHHS. Also includes 9 public, Governor-appointed members which shall include individuals with a brain injury or their family members, a public or private health-related organization member, a representative of a developmental disability advisory or planning group within Nebraska, a representative of service providers for individuals with a brain injury, and a representative of a nonprofit brain injury advocacy organization. Creates committee duties which include: oversight and direction for the Fund, developing criteria for expenditures from the Fund, and representing interests of individuals with a brain injury and their families. The Fund shall be used to pay for contracts for assisting individuals with a brain injury; developing community-based services for individuals with a brain injury; and providing education, resources, and referrals for individuals with a brain injury. Appropriates $1 million from the Nebraska Health Care Cash Fund annually starting in fiscal year 2020-21 to the Fund for the purposes of carrying out the Brain Injury Trust Fund Act.*
LB654	Wayne	Monitor	Health and Human Services 03/13/2019	In Committee 01/25/2019	Provide for a type 1 diabetes pilot study *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.*
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 *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.*
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 *Eliminates requirement that a health care provider advise the patient about the availability of the certificate; provides instead that a patient can request.*

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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 *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.*
LB715	Hilkemann	Monitor	Appropriations	Withdrawn 03/07/2019	Appropriate funds to the University of Nebraska for a medicaid research center *Appropriates $500,000 from the Nebraska Health Care Cash Fund for the University of Nebraska Medical Center to create a research center for quality and data analysis and policy recommendations regarding the medical assistance program under the Medical Assistance Act.*
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 *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.* *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.*
LB726	Walz	Monitor	Health and Human Services 02/20/2019	General File 02/28/2019	Require a protocol for individuals eligible for medical parole to apply for medical assistance



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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 *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.*
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 *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.*
LR3CA	Erdman	Oppose	Revenue 02/07/2019	In Committee 01/14/2019	Constitutional amendment to provide income tax credits for property taxes paid *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.*