

Bill Chart for Nebraska Hospital Association

LB5 In Committee

(Blood)

Provide for compensability under Nebraska Workers' Compensation Act for mental injuries resulting from workplace violence

You are: Monitoring

Expands workers' compensation coverage. Defines personal injury to include mental injuries and mental illness unaccompanied by physical injury for an employee whose mental injuries or mental illness were caused by workplace violence if such employee establishes by medical evidence, through a mental health professional, causation between the mental injury or mental illness and the workplace violence.

01-5-23 - Date of introduction

01-9-23 - Referred to Business and Labor Committee

LB12 In Committee

(Blood)

Create the Nebraska Human Breast Milk Bank

You are: Monitoring

Requires the Department of Health and Human Services to establish standards for transporting, processing, and distributing commercial human breast milk. DHHS may convene a committee of subject matter experts to assist in the development of the standards and develop programs to encourage the creation of breast milk depositories and banks. The Bank shall accept and provide breast milk to assist mothers and guardians in providing breast milk to their infants; screen all breast milk collected before distribution; and comply with all standards established.

01-5-23 - Date of introduction

01-9-23 - Referred to Health and Human Services Committee

LB13 In Committee

(Blood)

Require coverage of human breast milk under Medical Assistance Act

You are: Monitoring

Requires Medicaid coverage for pasteurized donated human breast milk, which may include human milk fortifiers if indicated by a licensed medical practitioner, if prescribed by a licensed medical practitioner and certain conditions are met. The conditions vary based on the age of the infant.

01-5-23 - Date of introduction

01-9-23 - Referred to Health and Human Services Committee

LB15 In Committee

(Briese)

Change provisions of the Wage and Hour Act

You are: Monitoring

Allows an employer to pay an employee who is at least 14 but no more than 17 years old a youth minimum wage of: \$9/hour through 2023; \$9.25/hour in 2024; \$9.50/hour in 2025; and \$10 in 2026 and beyond. Allows an employer to pay a new employee who is at least 18 but under 20 years old and who is not a seasonal or migrant worker a training wage rate of: \$9.25/hour through 2023; \$9.50/hour in 2024; \$9.75/hour in 2025; \$10/hour in 2026; and 75% of the minimum wage that would otherwise be applicable under section 48-1203 in 2027 and beyond.

01-5-23 - Conrad MO1 Indefinitely postpone pursuant to Rule 6, Section 3(f) filed

Motion to kill

01-5-23 - Date of introduction

01-9-23 - Referred to Business and Labor Committee

01-20-23 - Notice of hearing for January 30, 2023

Business and Labor - Room 1524, 9:00am

LB16 In Committee**(Briese)**

Require occupational boards to issue certain credentials based on credentials or work experience in another jurisdiction and make a determination regarding an applicant with a criminal conviction, provide for jurisprudential examinations and appeals from denial of a license, and change requirements for membership of the State Electrical Board

You are: Monitoring

Provides an additional method of obtaining an occupational license or government certificate, requiring that the Occupational Board issue a license or certification to applicants if certain requirements are met: the applicant holds a credential in another state or a military occupational specialty for an occupation with a similar scope of practice, as determined by the occupational board; the applicant has held the credential for at least one year; the applicant was required to pass an exam or meet standards; and the applicant is not disqualified based on criminal history, other misconduct, or pending complaints. If the applicant has work experience for an occupation in a state or in the military that does not use a credential similar to what Nebraska requires, the occupational board shall issue a license based on work experience if the applicant worked at least 3 years in the occupation (or 2 years, if the applicant holds a relevant private certification) and the applicant is not disqualified based on criminal history, other misconduct, or pending complaints. Allows the occupational board to require a jurisprudential exam of specific state laws and rules. Allows an individual to submit an application regarding criminal history and requires the applicable board to make a determination whether the conviction disqualifies the individual, only if the conviction directly and specifically relates to the duties of the occupation, public safety would be risked, and beginning in 2025, the disqualifying offense is specifically in statutes governing the occupation. Does not apply to certain occupations, including those regulated by the Supreme Court, Department of Banking and Finance, Board of Engineers and Architects, Electrical Board, Real Estate Commission, Crime Commission, or public accountants.

01-5-23 - Date of introduction

01-9-23 - Referred to Government, Military and Veterans Affairs Committee

LB32 In Committee**(Jacobson)**

Change requirements for issuers of medicare supplement insurance policies or certificates relating to coverage of individuals under sixty-five years of age who are eligible for medicare by reason of disability or end-stage renal disease

You are: Monitoring

Allows Medicare recipients under the age of 65 to enroll in supplemental Medicare insurance within the first 6 months of becoming eligible for Medicare or during the 63-day period following termination of group coverage. Such policies would be issued on a guaranteed renewable basis. The rate for such policies could not exceed the rate charged to an individual who qualifies for Medicare by reason of age.

01-5-23 - Date of introduction

01-9-23 - Referred to Banking, Commerce and Insurance Committee

LB57 In Committee**(Cavanaugh, M.)**

Adopt the Paid Family and Medical Leave Insurance Act

You are: Monitoring

Requires paid family medical leave benefits to be offered to an employee of an employer covered by Nebraska's Employment Security Law to care for a new child, family member, or covered servicemember; for a qualifying exigency leave; or for pregnancy. 12 weeks of leave allowed at 90% if average weekly wage is at or below 50% of the state average weekly wage, or at 50% if the average weekly wage is above 50% of the state average weekly wage, and benefits shall not exceed 66% of the state average weekly wage. Requires covered employers to remit contributions to the Commissioner of Labor. Intermittent leave is allowed under certain conditions and if the employer approves. At the end of the leave, employees must be restored to the position held when leave commenced, with equivalent employment benefits, pay, and terms. Protects employees' right to request or use such leave. Allows disqualification from leave for false statements to obtain benefits and allows the commission to bring a civil action, offset against future benefits, or place a levy on salary, wages, or payments, for erroneously paid benefits. Employers may submit a private employer plan for approval by the Commissioner to then be exempt from the conditions under the Act.

01-5-23 - Date of introduction

01-9-23 - Referred to Business and Labor Committee
01-20-23 - Notice of hearing for January 30, 2023
Business and Labor - Room 1524, 9:00am

LB62 In Committee

(Cavanaugh, M.)

Provide for coverage of translation and interpretation services under the medical assistance program

You are: Monitoring

Requires Medicaid coverage for translation and interpretation services.

01-5-23 - Date of introduction

01-9-23 - Referred to Health and Human Services Committee

LB68 In Committee

(Slama)

Increase limits on medical malpractice liability and change provisions of the Nebraska Hospital-Medical Liability Act

You are: Monitoring

Amends the Nebraska Hospital-Medical Liability Act beginning in 2024. Increases physician and CRNA personal coverage requirement from \$500,000 per occurrence/\$1 million aggregate to \$1 million/\$3 million. Adjusts hospitals' requirements from \$500,000/\$3 million to \$1 million/\$3 million.

01-5-23 - Date of introduction

01-9-23 - Referred to Banking, Commerce and Insurance Committee

01-20-23 - Notice of hearing for January 30, 2023

Banking, Commerce and Insurance - Room 1507, 9:00am

LB75 In Committee

(Vargas)

Provide for review of incidents of severe maternal morbidity

You are: Monitoring

Amends the Child and Maternal Death Review Act to include review of severe maternal morbidity, defined as the unexpected outcomes of labor and delivery resulting in significant short or long term consequences to a woman's health.

01-5-23 - Date of introduction

01-10-23 - Referred to Health and Human Services Committee

01-17-23 - Notice of hearing for January 25, 2023

Health and Human Services - Room 1510, 1:30 PM

LB79 In Committee

(Erdman)

Adopt the Nebraska EPIC Option Consumption Tax Act

You are: Monitoring

Establishes the Nebraska EPIC Consumption Tax Act, where EPIC stands for the elimination of property, income, and corporate taxes. Repeals such taxes on Dec. 31, 2025. Beginning Jan. 1, 2026, imposes a flat tax on the use or consumption in Nebraska of taxable property or services (including health care) at the rate of 7.5% (down from 10.64% in the 2022 proposal). No consumption tax shall be imposed on the purchase of fuel or for property or service purchased for a business purpose in a trade or business.

01-5-23 - Conrad MO2 Indefinitely postpone pursuant to Rule 6 Section 3(f) filed

Motion to kill

01-5-23 - Date of introduction

01-9-23 - Referred to Revenue Committee

LB85 In Committee

(Day)

Provide for express lane eligibility under the Medical Assistance Act and the Children's Health Insurance Program

You are: Monitoring

Requires DHHS submit a state plan amendment to implement express lane eligibility using eligibility determinations from SNAP. Program shall begin by Jan. 1, 2024.

01-5-23 - Date of introduction

01-9-23 - Referred to Health and Human Services Committee

LB87 In Committee

(Hunt)

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

You are: Monitoring

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 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.

01-5-23 - Date of introduction

01-9-23 - Referred to Judiciary Committee

LB91 In Committee

(Hansen, B.)

Change motorcycle, moped, and autocycle helmet and eye protection provisions

You are: Monitoring

A helmet is not required if the rider is 21 years old and has taken a Motorcycle Safety Foundation basic course. Eye protection or a sufficient windshield is required.

01-5-23 - Date of introduction

01-9-23 - Referred to Transportation and Telecommunications Committee

01-13-23 - Notice of hearing for January 24, 2023

Transportation and Telecommunications - Room 1113, 1:30pm

LB108 In Committee

(McDonnell)

State intent regarding appropriations to the Department of Health and Human Services for community health centers

You are: Monitoring

Appropriates \$1.4 million from the Healthcare Cash Fund for FY 2023-24 and FY 2024-25. \$200,000 to be given to each of the seven community health centers (Charles Drew Health Center, One World Community Health Center, East Central District Health Department - Good Neighbor Community Health Center, Community Action Partnership of Western Nebraska Health Center, Midtown Community Health Center, Bluestem Health, and Heartland Health Center). This to be used for expanding behavioral health services. Appropriates \$1.1 million to DHHS from Nebraska Healthcare Cash fund from the same fiscal years above to the same health centers, to be distributed proportionately based on the previous fiscal years number of uninsured clients. Appropriates \$15 million to the DHHS from the General Fund for FY 2023-24 to award innovation grants to the same health centers. Grants may be used for: capital improvements, hiring/training/maintaining/enhancing health center workforce, or career development programs. Grants intended to be disbursed by June 30, 2026.

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB114 In Committee

(Vargas)

State intent to appropriate funds to the Department of Health and Human Services for evidence-based early intervention home visitation programs

You are: Monitoring

Appropriates \$2 million from the General Fund for FY2023-24 and FY2024-25 to the Department of Health and Human Services, for Program 514, for evidence-based early intervention home visitation programs.

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB115 In Committee

(Raybould)

Adopt the Family Home Visitation Act

You are: Monitoring

Provides that DHHS shall only fund a home visitation program that includes periodic home visits by nurses, social workers, and other early childhood and health professionals or trained a supervised lay workers to improve the health and

self-sufficiency of parents and children and that accomplishes certain goals and meets certain criteria. Requires DHHS to create a website for home visitation and to report to the Legislature annually.

01-6-23 - Date of introduction

01-10-23 - Referred to Health and Human Services Committee

LB128 In Committee

(Dorn)

State intent regarding appropriations to the Department of Health and Human Services

You are: Supporting

Implements a 9.6% increase for fiscal year 2023-24 and a 7.7% increase for fiscal year 2024-25 to reimbursement rates for inpatient and outpatient hospital services provided under a Medicaid prospective payment system. *NHA Legislation

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB129 In Committee

(Dorn)

State intent regarding appropriations to the Department of Health and Human Services for medicaid nursing facilities

You are: Monitoring

Adds an inflation factor to the appropriation to medicaid nursing facility rates.

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB130 In Committee

(Dorn)

Create the medicaid nursing facilities program

You are: Monitoring

Creates a separate and distinct budgetary program within the Department of Health and Human Services to be identified as the medicaid nursing facility services program.

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB131 In Committee

(Dorn)

State intent regarding appropriations to the Department of Health and Human Services for medicaid assisted-living facilities

You are: Monitoring

Increases the current medicaid assisted-living facility rates included in Program No. 348 and paid as a service included in Nebraska's aged and disabled home and community-based medicaid 1915(c) waiver program to \$XXX.

01-6-23 - Date of introduction

01-10-23 - Referred to Appropriations Committee

LB142 In Committee

(Briese)

Limit the amount an insured pays for prescription insulin drugs

You are: Monitoring

Caps the amount an insured patient would pay for a 30-day supply of any type of insulin to \$100.

01-6-23 - Date of introduction

01-10-23 - Referred to Banking, Commerce and Insurance Committee

LB145 In Committee

(Bostar)

Change provisions relating to coverage for screening mammography and breast examinations

You are: Monitoring

Changes the frequency of required private insurance coverage for mammograms from every two years for patients over age 50, to at the discretion of the health care provider for women under age 40 who have a family history of breast cancer, and every year for women age 40 or older.

01-6-23 - Date of introduction

01-10-23 - Referred to Banking, Commerce and Insurance Committee

LB149 In Committee

(Jacobson)

State intent regarding appropriations and rebasing rates under the medical assistance program

You are: Supporting

Increases funding for rebasing medicaid inpatient per diem rates for psychiatric facilities, hospital-based psychiatric units, psychiatric residential facilities, rehab facilities and hospital-based rehab units. Intends rates to be rebased annually using the most recent audited medicare cost report. Contains an emergency clause. *NHA legislation.

01-9-23 - Date of introduction

01-11-23 - Referred to Appropriations Committee

LB156 In Committee

(DeBoer)

Change the caseload ratio for the Public Guardian

You are: Monitoring

Increases the case-load of the public guardian from 20 to 22 public wards or public protected persons to each member of the multidisciplinary team.

01-9-23 - Date of introduction

01-11-23 - Referred to Judiciary Committee

LB157 In Committee

(DeBoer)

Authorize appointment of temporary guardians for certain purposes

You are: Monitoring

Creates emergency temporary guardianship for a person alleged to be incapacitated who has no guardian, pending notice and hearing, for the limited purpose of assisting the person in applying for private or government benefits.

Exempts such temporary guardians from caseload standards.

01-9-23 - Date of introduction

01-11-23 - Referred to Judiciary Committee

LB181 In Committee

(Hansen, B.)

Provide for filling and refilling prescriptions in certain circumstances

You are: Monitoring

Allows a pharmacist to use professional judgment to fill or refill a prescription when the prescribing practitioner is no longer practicing for any reason, following guidelines based on number of refills left and if the medication is a controlled substance. Allows a pharmacist in this situation to provide an emergency refill of up to 90-day supply for maintenance medications. Practitioner means a certified registered nurse anesthetist, a certified nurse midwife, a dentist, an optometrist, a nurse practitioner, a physician assistant, a physician, a podiatrist, or a veterinarian.

01-9-23 - Date of introduction

01-11-23 - Referred to Health and Human Services Committee

LB191 In Committee

(Halloran)

Provide for confidentiality of and access to certain injury reports under the Nebraska Workers' Compensation Act

You are: Monitoring

Makes confidential workers' compensation injury reports for 60 days after filing with exceptions for employers and investigation of claims.

01-9-23 - Date of introduction

01-11-23 - Referred to Business and Labor Committee

LB200 In Committee

(Briese)

Adopt the Canadian Prescription Drug Importation Act

You are: Monitoring

Creates a Canadian wholesale prescription drug importation program. Requires the Department of Health and Human Services, by Dec. 1, 2024, to select vendors to draft a wholesale prescription drug importation list that identifies the prescription drugs that have the highest potential for cost savings, and verify and contract with eligible Canadian

prescription drug suppliers. Requires DHHS to request federal approval for such program. Requires an annual report to the Legislature.

01-9-23 - Date of introduction

01-11-23 - Referred to Health and Human Services Committee

01-17-23 - Notice of hearing for January 25, 2023

Health and Human Services - Room 1510, 1:30 PM

LB202 In Committee

(Walz)

Provide for vaccine administration by pharmacy technicians

You are: Monitoring

Allows a pharmacy technician to administer vaccines to the arm of persons 3 and older, and such administration shall not require the professional judgment of a pharmacist, when certain conditions are met, including training, life support certification, and on-site supervision.

01-9-23 - Date of introduction

01-11-23 - Referred to Health and Human Services Committee

01-17-23 - Notice of hearing for January 26, 2023

Health and Human Services - Room 1510, 1:30 PM

LB203 In Committee

(Riepe)

Provide for a release of employee medical records as prescribed under the Nebraska Workers' Compensation Act

You are: Monitoring

Requires an employee filing a claim for workers' compensation benefits to provide a waiver to the compensation insurer or employer upon request, allowing them to obtain all previous hospital and medical records concerning the employee's previous treatment with any physician, psychologist, or other medical provider. The waiver shall not provide entitlement to an employee's hospital or medical records that pertain to previous treatment for sexual abuse, HIV, reproductive health conditions, mental health conditions unless seeking benefits for mental health injuries, or alcohol or controlled or substance abuse. Failure to provide a patient's waiver shall toll the commencement of the 30-day period for purposes of liability under section 48-125. Any physician, psychologist, hospital, institution, or other person releasing such information shall not be liable criminally or for civil damages by reason of the release of the information pursuant to the waiver.

01-9-23 - Date of introduction

01-11-23 - Referred to Business and Labor Committee

LB204 In Committee

(Riepe)

Provide for reimbursement for pharmacy dispensing fees under the medical assistance program

You are: Monitoring

For medicaid managed care contracts, requires DHHS to establish a fee-for-service pharmacy dispensing fee reimbursement of \$10.38 per prescription until a cost of dispensing survey is completed and an actual dispensing fee determined by surveying all medicaid participating pharmacies every 2 years.

01-9-23 - Date of introduction

01-11-23 - Referred to Health and Human Services Committee

LB210 In Committee

(Bostar)

Adopt the Prior Authorization Reform Act

You are: Monitoring

By Jan. 1, 2025, requires each health carrier (including MCOs) to adopt a program, developed in consultation with participating health care providers, that promotes the modification of prior authorization requirements based on: the performance of health care providers with respect to adherence to evidence-based medical guidelines and quality criteria; involvement of providers with a health carrier to participate in a financial risk-sharing payment plan, that includes downside risk; and the specialty or factors relating to specific health care providers. Any program adopted shall offer any provider that has at least a 90% approval rate of prior authorization requests over the immediately preceding 6 months at least one alternative to prior authorization, including an exemption from prior authorization requirements. At least annually, a health carrier or utilization review entity shall reexamine the prescribing or ordering patterns of each participating provider and reevaluate the provider's status regarding prior authorization requirements. Each health carrier

shall annually report to the Department of Insurance aggregated trend data related to the health carrier's prior authorization practices and experience.

01-10-23 - Date of introduction

01-12-23 - Referred to Banking, Commerce and Insurance Committee

LB219 In Committee

(Ibach)

Require the Department of Health and Human Services to rebase rates for critical access hospitals

You are: Supporting

The department shall provide for rebasing inpatient interim per diem rates for critical access hospitals. The department shall rebase the rates on an annual basis, and the most recent audited medicare cost report shall be used as the basis for the rebasing process within 90 days after receiving the cost report. *NHA legislation.

01-10-23 - Date of introduction

01-12-23 - Referred to Health and Human Services Committee

LB227 In Committee

(Hansen, B.)

Provide duties for the Department of Health and Human Services relating to reimbursing certain hospitals for nursing facility services under the Medical Assistance Act

You are: Supporting

The state shall provide medicaid reimbursement to a hospital at 150% of the statewide average nursing facility per diem rate for an individual when the individual: (a) Is enrolled in the medical assistance program; (b) has been admitted as an inpatient to such hospital; (c) is eligible for discharge after receiving care in such hospital; (d) requires nursing facility level of care upon discharge; and (e) is unable to be transferred to a nursing facility due to a lack of available nursing facility beds or in cases where the State Court Administrator is unable to appoint a public guardian. *NHA legislation.

01-10-23 - Date of introduction

01-12-23 - Referred to Health and Human Services Committee

LB256 In Committee

(Brewer)

Change provisions related to insurance coverage of telehealth

You are: Supporting

The reimbursement rate for any telehealth service shall, at a minimum, be the same as a comparable in-person health care service. *NHA legislation.

01-10-23 - Date of introduction

01-12-23 - Referred to Banking, Commerce and Insurance Committee

LB271 In Committee

(McKinney)

Change reporting requirements for child abuse and neglect

You are: Monitoring

Changes the list of mandatory reporters of child abuse and neglect from "any person" to any medical professional (including PAs, emergency medical technicians, and others), mental health professional, social worker, child care provider, member of law enforcement, clergy member, or Inspector General, in such person's professional capacity or in the scope of employment. Removes "medical institutions" from mandatory reporting. Those not listed as mandatory reporters "may" report under this section. Changes the standard for reporting from having "reasonable cause to believe that a child has been subjected to child abuse or neglect" and reporting an "incident" to having "knowledge of or observation of a child being subjected to conditions or circumstances which reasonably would result from or in child abuse or neglect" and reporting such "knowledge or observation." Beginning Jan. 1, 2024, each person required to report suspected child abuse or neglect shall complete training within the first 90 days of beginning employment or service in the person's official capacity as a mandatory reporter of suspected child abuse or neglect and at least every two years thereafter.

01-10-23 - Date of introduction

01-12-23 - Referred to Judiciary Committee

LB272 In Committee

(Vargas)

Change provisions relating to the date when compensation begins under the Nebraska Workers' Compensation Act

You are: Monitoring

Amends both of the waiting periods under workers' compensation law to receive wage benefits for days away from work due to a workplace injury. Reduces the number of days to begin receiving benefits after a workplace injury or illness from 7 days to 3 days. Reduces the number of days to start receiving retroactive benefits for those initial days away from work from 6 weeks to 2 weeks.

01-10-23 - Date of introduction

01-12-23 - Referred to Business and Labor Committee

LB276 In Committee

(Wishart)

Adopt the Certified Community Behavioral Health Clinic Act

You are: Monitoring

Provides legislative intent to increase access to mental health and substance use treatment and expand capacity to address increased need and establish innovative community partnerships with law enforcement, schools, and hospitals to improve care, reduce recidivism, and address health disparities. Requires DHHS to develop a prospective payment system under Medicaid for funding certified community behavioral health clinics. Such system shall permit either daily or monthly payment rates. DHHS shall submit to CMS any approval request necessary for a Medicaid state plan amendment to implement.

01-10-23 - Date of introduction

01-12-23 - Referred to Health and Human Services Committee

LB286 In Committee

(Walz)

Provide for confidentiality of a physician wellness program under the Uniform Credentialing Act

You are: Monitoring

Provides that a person who contacts or participates in a physician wellness program shall not be required to disclose such contact or participation to any health care facility, hospital, medical staff person, accreditation organization, graduate medical education oversight body, health insurer, government agency, or other entity as a condition of participation, employment, credentialing, payment, licensure, compliance, or other requirement. Any record of a person's participation in a physician wellness program is confidential and not subject to discovery, subpoena, or a reporting requirement to DHHS unless the person voluntarily requests release of the information in writing or the physician peer coach (defined) determines that the person's condition constitutes a danger to the public health and safety by the person's continued practice of medicine or surgery.

01-11-23 - Date of introduction

01-13-23 - Referred to Health and Human Services Committee

LB291 In Committee

(Cavanaugh, M.)

Require implicit bias or diversity, equity, and inclusion training for certain applicants and credential holders under the Uniform Credentialing Act

You are: Monitoring

Requires every license holder under the Uniform Credentialing Act (unless specifically excepted) to annually complete implicit bias or diversity, equity, inclusion training, defined as a program approved by the Department of Health and Human Services that is designed to expose unconscious prejudices or partialities, to provide tools to facilitate positive interactions, reduce prejudice and discrimination, and afford all people the opportunity to interact fully and effectively in medical settings to reduce inequitable health treatments and outcomes. Several credentialed practices are exempt, including veterinary medicine and surgery.

01-11-23 - Date of introduction

01-13-23 - Referred to Health and Human Services Committee

LB307 In Committee

(Hunt)

Provide an exception to the penalty relating to drug paraphernalia under the Uniform Controlled Substances Act

You are: Monitoring

Creates an exception for the staff or participants of a public or behavioral health program, authorized by a local jurisdiction, who distribute hypodermic needles for the purpose of prevention of the spread of infectious diseases.

01-11-23 - Date of introduction

01-13-23 - Referred to Judiciary Committee

LB315 In Committee

(Fredrickson)

Prohibit providers of services relating to examination or treatment of injuries from sexual assault, domestic assault, and child abuse from taking certain debt enforcement actions against victims

You are: Monitoring

Prohibits any health care provider, emergency medical services provider, laboratory, or pharmacy providing services related to the examination or treatment of injuries arising out of sexual assault from: referring a bill from such services to a collection agency or attorney for collections; distributing information on payment status from such services in a way that would affect the victim's/guardian's/family's credit rating; or taking any other action adverse to the victim/guardian/family. An entity described may still seek payment for such services provided when it does not violate above conditions.

01-11-23 - Date of introduction

01-13-23 - Referred to Judiciary Committee

01-18-23 - Notice of hearing for January 25, 2023

Judiciary - Room 1113, 1:30 PM

LB326 In Committee

(Raybould)

Provide for eligibility for certain children under the Medical Assistance Act

You are: Monitoring

Requires DHHS to provide for a period of continuous eligibility for a child who is under 19 and who is determined to be eligible for Medicaid. The child remains eligible for Medicaid, without additional review by the department and regardless of changes in the child's resources or income, until the earlier of: (a) The anniversary of the date on which the child's eligibility was determined;(b) The child's 19th birthday; or (c) The child moves out of Nebraska.

01-11-23 - Date of introduction

01-13-23 - Referred to Health and Human Services Committee

LB327 In Committee

(Raybould)

Change provisions relating to the minimum wage under the Wage and Hour Act

You are: Monitoring

Mandates that on each Jan. 1, beginning 2027, the minimum wage shall be increased from the previous year by the lesser of 1.5% rounded to the nearest cent, or the increase in the cost of living as measured by the consumer price index rounded to the nearest multiple of five cents.

01-11-23 - Date of introduction

01-12-23 - Conrad MO3 Indefinitely postpone pursuant to Rule 6, Section 3(f) filed

Motion to kill.

01-13-23 - Referred to Business and Labor Committee

LB333 In Committee

(Conrad)

Require a state plan amendment for coverage of family planning services under the Medical Assistance Act

You are: Monitoring

Requires DHHS to submit a state plan amendment by Oct. 1, 2023, to provide Medicaid coverage for family planning services for persons whose income makes them eligible for Medicaid coverage if they are pregnant. Family planning services include all FDA-approved family planning methods, screening and treatment for cervical and breast cancers including cancer prevention vaccines, interpersonal violence screening and prevention, follow-up family planning and counseling, treatment of medical conditions such as urinary tract infections or STIs, and insertion of long-acting reversible contraceptives immediately postdelivery as part of a family planning visit.

01-11-23 - Date of introduction

01-13-23 - Referred to Health and Human Services Committee

LB335 In Committee

(Halloran)

Adopt the Health Care Staffing Agency Registration Act

You are: Monitoring

Requires a health care staffing agency to register annually with the Department of Labor and provide information to the Department about the company, including insurance coverage, background checks of staff, and documentation that staff meets minimum licensing, certification, or training requirements. Requires a health care staffing agency that contracts with a health care facility or service participating in medicare or medicaid provide amounts charged to facilities for each category of staff member and the average amount paid to staff members in each category. Requires a schedule of fees for health care staffing agencies be filed with the Department, requires 30 day notice to the Department to change such fees. Bars noncompete clauses in employment contracts with health care staffing agencies. Bars health care staffing agencies from requiring the payment of liquidated damages or employment fees if staff is subsequently hired as a permanent employee of the facility. Makes employment contracts violating the act unenforceable in court. Sets up a system for the public to report complaints against health care staffing agencies. Allows the Commissioner of Labor to issue citations to health care staffing agencies when an investigation reveals the agency violated the act. Creates a publicly available database of registered health care staffing agencies.

01-11-23 - Date of introduction

01-13-23 - Referred to Business and Labor Committee

LB337 In Committee

(Riepe)

Change provisions relating to disclosure of patient information under the Mental Health Practice Act

You are: Monitoring

Allows disclosures by mental health practitioners of information permitted under HIPAA or otherwise permitted by law.

01-11-23 - Date of introduction

01-13-23 - Referred to Health and Human Services Committee

LB345 In Committee

(Armendariz)

Define palliative care under the Health Care Facility Licensure Act

You are: Monitoring

Defines palliative care under the Health Care Facility Licensure Act as: specialized medical care for people living with a serious illness that carries a high risk of mortality or negatively impacts quality of life, addressing the symptoms and stress of a serious illness, including pain. A team-based approach to care, providing essential support at any age and stage of a serious illness. It can be provided across care settings and along with curative treatment. The goal of palliative care is to improve quality of life for both the patient and the patient's family or care partner.

01-12-23 - Date of introduction

01-17-23 - Referred to Health and Human Services Committee

LB351 In Committee

(Wayne)

Increase and eliminate limits on medical malpractice liability and change provisions relating to proof of financial responsibility and the Excess Liability Fund

You are: Monitoring

Increases required limits on medical malpractice to \$10 million, up from \$500,000 for health care professionals, and to \$20 million, up from \$1 million for physicians and CRNAs. In the case of hospitals and their employees, an aggregate liability amount of \$30 million (up from \$3 million). Removes limit on recoverable amount under the Nebraska Hospital-Medical Liability Act from the Excess Liability Fund for any occurrence resulting in any catastrophic injury or death of a patient for any occurrence after Dec. 31, 2023. For patients covered by the act, increases limits to: \$500,000 for instances on or before Dec. 31, 2023 and \$10 million for instances after that date. Requires that if the Excess Liability Fund exceeds \$50 million (up from \$4.5 million) at the end of any calendar year after the payment of all claims and expenses and after adding all reversions to the fund, and if no reinsurance is involved, the surcharge must be reduced to maintain the fund at an approximate level of \$60 million (up from \$5 million). Limits the amount paid from the Excess Liability Fund to \$30 million per year.

01-12-23 - Date of introduction

01-17-23 - Referred to Judiciary Committee

LB353 In Committee

(Raybould)

Provide for grants for projects that increase long-term care facility capacity

You are: Monitoring

Provides legislative intent to appropriate \$25 million dollars from the General Fund for fiscal year 2023-24 to DHHS to award grants, beginning in Sept. 2023, to nursing facilities or skilled nursing facilities to expand capacity. To qualify, a facility shall have a memorandum of understanding with at least one qualifying hospital to accept complex acute transition patients. A grant shall be used for any project that increases the facility capacity to support the transition of residents with specific service needs that are not readily available in the long-term care setting, including equipment or additions to allow for patient care, adaptive vehicles, computer services and software that aid in patient flow, and construction or modification of special additions and renovations that restructure beds within facilities. A grant shall be limited to a maximum of \$250,000 per facility. A facility shall agree to complete the project and utilize the grant within 12 months after receipt with one 6-month extension allowed, or grant must be returned. Requires reporting to Legislature on the use of the grants.

01-12-23 - Date of introduction

01-17-23 - Referred to Health and Human Services Committee

LB358 In Committee

(Walz)

State intent to increase dental services reimbursement under the Medical Assistance Act

You are: Monitoring

Provides legislative intent to increase reimbursement rates by 25% for dental services provided under Medicaid.

01-12-23 - Date of introduction

01-17-23 - Referred to Health and Human Services Committee

LB362 In Committee

(Dorn)

State intent regarding appropriations for a rate increase for behavioral health services

You are: Monitoring

Provides legislative intent to provide a rate increase for behavioral health services of 5% for FY2023-24 to both DHHS-Medicaid and Supreme Court-Juvenile Justice.

01-12-23 - Date of introduction

01-17-23 - Referred to Appropriations Committee

LB367 In Committee

(Conrad)

Adopt the Fair Chance Hiring Act

You are: Monitoring

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.

01-12-23 - Date of introduction

01-17-23 - Referred to Business and Labor Committee

LB380 In Committee

(Conrad)

Changes to the Nebraska Fair Employment Practice Act to provide for jury trials and prohibit discrimination for exercise of rights under the Nebraska Workers' Compensation Act

You are: Monitoring

It shall be an unlawful employment practice for a covered entity to discriminate or retaliate against an individual because such individual has reported a work-related injury, brought a claim, or sought remedies under the Nebraska Workers' Compensation Act. In any civil action brought under the Nebraska Fair Employment Practice Act, there shall be a right to a jury trial, including in cases brought against state and governmental agencies.

01-12-23 - Date of introduction

01-17-23 - Referred to Business and Labor Committee

LB381 In Committee

(Cavanaugh, M.)

Adopt the Mental Health Wellness Act and authorize county sales and use taxes

You are: Monitoring

Allows a county to impose a sales tax of 1.5% to provide for mental health services if approved by a majority of voters.

01-12-23 - Date of introduction

01-17-23 - Referred to Revenue Committee

LB383 In Committee

(Bostar)

Change provisions relating to insurance coverage for screenings for colorectal cancer

You are: Monitoring

After Dec. 31, 2023, no insurance policy or any self-funded employee benefit plan shall impose a deductible, coinsurance, or any other cost sharing requirements for screening colonoscopies, including those performed as a result of a positive noncolonoscopy stool-based preventive screen test as approved by the U.S. Preventive Services Task Force.

01-12-23 - Date of introduction

01-17-23 - Referred to Banking, Commerce and Insurance Committee

LB407 In Committee

(Linehan)

Extend an application deadline under the Nebraska Transformational Projects Act

You are: Monitoring

Extends the sunset for applications under the Nebraska Transformational Projects Act from Dec. 31, 2023, to Dec. 31, 2025.

01-12-23 - Date of introduction

01-17-23 - Referred to Revenue Committee

LB419 In Committee

(Wishart)

Require submission of a medicaid state plan amendment to extend postpartum coverage

You are: Monitoring

Requires DHHS to seek a state plan amendment before Oct. 1, 2023, to extend postpartum Medicaid coverage from 60 days to 12 months.

01-12-23 - Date of introduction

01-17-23 - Referred to Health and Human Services Committee

LB421 In Committee

(Kauth)

Provide procedures for directed health measures

You are: Monitoring

Shifts authority for adopting directed health measures to the city council or county board with advice from the health director. Clarifies the health director advises the board of health who advises the city council or county board who adopts directed health measures. Clarifies that directed health measures adopted by the city council or county board shall be issued and enforced by the health director.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB422 In Committee

(Kauth)

Exempt certain activities from disciplinary action under the Uniform Credentialing Act

You are: Monitoring

A license to practice medicine and surgery or osteopathic medicine and surgery shall not be subject to any disciplinary measures as a result of the applicant or licensee expressing an opinion or providing medical advice that disagrees with the medical consensus on an issue of health or disease unless the opinion or advice is disseminated with malicious intent or an intent to deceive.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB430 In Committee

(Walz)

Prohibit a multiple procedure payment reduction policy from being applied to physical therapy, occupational therapy, or speech-language pathology services as prescribed under the Uniform Credentialing Act

You are: Monitoring

Amends the Uniform Credentialing Act to provide that physical therapy, occupational therapy, or speech-language pathology services shall not be subject to a multiple procedure payment reduction policy under Medicaid or by a private insurer.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB431 In Committee

(Halloran)

Change provisions relating to criminal history record information checks under the Uniform Credentialing Act

You are: Monitoring

Strikes language in the Uniform Credentialing Act which states that a criminal background check may also be required for initial licensure or reinstatement of a license governed by the Uniform Credentialing Act if a criminal background check is required by an interstate licensure compact. Adds language that the State Patrol is authorized to submit the fingerprints of Uniform Credentialing Act applicants to the FBI and to issue a report to the department that includes the criminal history record information concerning the applicant. The State Patrol shall forward submitted fingerprints to the FBI for a national criminal history record information check. The State Patrol shall issue a report to DHHS that includes the criminal history record information concerning the applicant.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB433 In Committee

(Jacobson)

Provide requirements for distribution of funding for behavioral health regions

You are: Monitoring

Any appropriation to the department for behavioral health aid and designated as funding to be allocated to a behavioral health region shall be utilized to provide activities pursuant to the approved annual budget of the behavioral health region or additional activities identified through need demonstrated by the region throughout the year. The director shall allow for reassignment of funds between service categories of no more than 20% to accommodate emerging needs identified by the behavioral health region to maximize the ability of the region to implement new behavioral health services and supports or expand capacity in existing services.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB434 In Committee

(Jacobson)

Require the Department of Health and Human Services to enroll long-term care hospitals as providers under the medical assistance program and submission of a state plan amendment or waiver

You are: Supporting

Requires DHHS to enroll long-term acute care hospitals as providers eligible to receive Medicaid funding. No later than July 1, 2023, DHHS shall submit a state plan amendment or waiver to CMS to provide Medicaid coverage for long-term acute care hospitals. *NHA Legislation.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB443 In Committee

(Albrecht)

Change provisions relating to compensation for total disability under the Nebraska Workers' Compensation Act

You are: Monitoring

Compensation for total disability shall cease at 72, except that if an employee is injured after age 67, compensation for total disability shall cease after five years of such compensation having been paid. This does not apply to: Spinal cord

injury involving severe paralysis of an arm, a leg, or the trunk; Severe brain or closed-head injury as evidenced by: Severe sensory or motor disturbances or severe communication disturbances; Severe complex integrated disturbances of cerebral function; Severe episodic neurological disorders; or other severe brain and closed-head injury conditions at least as severe in nature as any condition listed above; or blindness.

01-13-23 - Date of introduction

01-18-23 - Referred to Business and Labor Committee

LB444 In Committee

(Linehan)

Provide for a one-time grant for a health sciences education center, infrastructure costs, and a community athletics complex

You are: Monitoring

Provides for a \$60 million grant from the Postsecondary Workforce Development Fund through the Department of Economic Development for furnishings and equipment for a health sciences education/workforce development center and construction of a community athletics complex to host regional and national championships.

01-13-23 - Date of introduction

01-18-23 - Referred to Appropriations Committee

LB448 In Committee

(Bostar)

Prohibit certain provisions in a health plan in relation to clinician-administered drugs

You are: Supporting

Prohibit the practice known as "White Bagging." An insurance policy shall not: (a) Refuse to authorize or pay a provider for providing covered clinician-administered drugs and related services; (b) Impose limitations or require an enrollee to pay an additional fee when obtaining clinician-administered drugs from a health care provider or a pharmacy; (c) Interfere with the right of a patient to choose to obtain a clinician-administered drug from such patient's provider; (d) Require clinician-administered drugs to be dispensed by a pharmacy selected by the insurer; (e) Limit or exclude coverage for a clinician-administered drug when such drug is not dispensed by a pharmacy selected by the health plan if such drug would otherwise be covered; (f) Reimburse at a lesser amount a clinician-administered drug dispensed by a pharmacy not selected by the insurer; (g) Condition or refuse to authorize, or reduce payment to a participating provider for providing covered clinician-administered drugs and related services when the participating provider obtains clinician-administered drugs from a pharmacy that is not a participating provider in the insurer's network, if all criteria for medical necessity are met; (h) Require an enrollee to pay an additional fee, for clinician-administered drugs when not dispensed by a pharmacy selected by the insurer; or (i) Require a specialty pharmacy to dispense a clinician-administered medication directly to a patient with the intention that the patient will transport the medication to a health care provider for administration. An insurance policy may offer, but shall not require: (i) The use of a home infusion pharmacy to dispense clinician-administered drugs to patients in their homes; or (ii) The use of an infusion site external to a patient's provider office or clinic. *NHA Legislation

01-13-23 - Date of introduction

01-18-23 - Referred to Banking, Commerce and Insurance Committee

LB451 In Committee

(Brewer)

Provide for the Department of Health and Human Services to award a grant to assist a rehabilitation hospital

You are: Monitoring

Requires DHHS to award a grant to a rehabilitation hospital in Nebraska providing post-acute long-term care to medicaid patients. Allows \$30 million for infrastructure and facility upgrades. Requires the grant be used by the end of 2026.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB458 In Committee

(Ballard)

Allow certain central fill pharmacies to deliver to a patient under the Prescription Drug Safety Act

You are: Monitoring

Clarifies caregiver as being defined as "any person acting as an agent on behalf of a patient or any person aiding and assisting a patient." Allows a central fill pharmacy to deliver a drug, device, or biological to a patient or care giver, on behalf of the dispensing pharmacy, if the central fill and dispensing pharmacy are under common ownership. If the

central fill pharmacy is used to deliver a legend drug, it must have the central fill pharmacy's name and address on the label, along with other current label requirements.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB460 In Committee

(McDonnell)

Provide for reimbursement of mental health examinations and resilience training for certain persons under the Nebraska Workers' Compensation Act

You are: Monitoring

Requires the DHHS to provide reimbursement to first responders, to the extent that these services are not reimbursed by the first responders' employer, for: a mental health examination by a mental health professional upon entry into such service or subsequent to such entry and before the onset of a mental injury or mental illness for which compensation is sought; initial resilience training; and annual resilience training.

01-13-23 - Date of introduction

01-18-23 - Referred to Business and Labor Committee

LB463 In Committee

(Health and Human Services)

Change provisions relating to application for licensure under the Health Care Facility Licensure Act

You are: Monitoring

Requires an application for licensure under the Health Care Facility Licensure Act to be signed by only one member (down from two) if the applicant is an LLC.

01-13-23 - Date of introduction

01-18-23 - Referred to Health and Human Services Committee

LB480 In Committee

(Holdcroft)

Change medical lien provisions

You are: Monitoring

Adds provider of emergency medical services to the medical lien statutes, and defines provider of emergency medical service as a public entity that responds to a perceived need for medical care in order to prevent loss of life or aggravation of physiological or psychological illness or injury.

01-17-23 - Date of introduction

01-19-23 - Referred to Judiciary Committee

LB488 In Committee

(Hunt)

Adopt the Sexual Assault Emergency Care Act

You are: Monitoring

Requires a hospital that provides emergency care for a sexual assault survivor to (a) Provide the sexual assault survivor with medically and factually accurate and objective written and oral information about emergency contraception; (b) Provide the sexual assault 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 (c) Dispense a complete course of emergency contraception, in accordance with the currently accepted professional standards of care and established protocols for sexual assault forensic medical examinations, to the sexual assault survivor, unless refused by the survivor. Requires a hospital that provides emergency care for a sexual assault survivor to provide training for all personnel involved in such care regarding the provision of medically and factually accurate and objective information about emergency contraception. Requires a hospital to develop policies and procedures, as necessary, to ensure compliance with the act in the case of moral or religious objections by individual health care providers. Establishes penalties for hospitals--for the second and subsequent substantiated complaints, a fine of \$1000 on the hospital: (i) Per sexual assault survivor whose care was not in compliance; or (ii) Per month from the date of the complaint alleging noncompliance until the hospital provides training in compliance with this Act.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB490 In Committee

(von Gillern)

Appropriate federal funds to the Department of Health and Human Services for health aid

You are: Monitoring

Appropriates \$5,000,000 Federal Funds in each of the next 2 fiscal years for a grant program for a model system of care for long-haul COVID. Requires DHHS to award the grant to a rehabilitation hospital with the capacity to provide interdisciplinary research. The model system of care shall be a comprehensive program to address persistent COVID-19 symptoms and include the following activities: (1) Post-COVID-19 research; (2) Post-COVID-19 clinics; (3) Mental health services expanded to address cognitive and psychiatric needs of post-COVID-19 patients; and (4) Educational materials for health care providers and the public.

01-17-23 - Date of introduction

01-19-23 - Referred to Appropriations Committee

LB503 In Committee

(Aguilar)

Adopt the Rural Nebraska Nursing Workforce Act

You are: Monitoring

Creates a \$3 million scholarship program at a public or private institution for nursing students who agree to work for 3 years in Nebraska as a licensed registered nurse. Approved nursing program is one that is offered by a public or private postsecondary institution in Nebraska which consists of a twelve month accelerated nursing program where priority admission is offered to partnering dual-degree programs with public or private postsecondary institutions offering a three-plus-one degree completion opportunity.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB517 In Committee

(Walz)

Require the Department of Health and Human Services to pay discharge incentives to post-acute placement facilities

You are: Monitoring

Requires hospitals to notify the Department of Health and Human Services when the hospital reaches 90% capacity. After receiving the notice, DHHS pays discharge incentives to a referral facility that accepts patients from the hospital. To incentivize these facilities to accept these patients, DHHS would pay \$6,000 per patient with Medicaid, \$3,000 per patient with referrals made within less than 60 days after DHHS received the hospital's capacity notice, and \$6,000 per patient with a referral made 60 days after the hospital's capacity notice to DHHS.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB525 In Committee

(Fredrickson)

State intent to appropriate funds to the Department of Health and Human Services for rate increases for psychiatric diagnostic evaluation

You are: Monitoring

Provides legislative intent to appropriate \$XXX to the Department of Health and Human Services for a 15% increase in psychiatric diagnostic evaluations and follow-up visit rates.

01-17-23 - Date of introduction

01-19-23 - Referred to Appropriations Committee

LB539 In Committee

(Vargas)

State intent regarding use of the Nebraska Health Care Cash Fund for the Tobacco Prevention and Control Program

You are: Monitoring

Expresses legislative intent to appropriate \$1,082,146.23 to the Department of Health and Human Services for each of FY2023-24 and 2024-25 from the Nebraska Health Care Cash Fund for Program No. 30 for the Tobacco Prevention and Control Program.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

01-20-23 - Rereferred to Appropriations Committee

LB548 In Committee

(Ballard)

Change examination and compounding requirements under the Pharmacy Practice Act

You are: Monitoring

Allows the Board of Pharmacy to set a grade requirement for the examination on jurisprudence of pharmacy that an applicant for licensure as a pharmacist must achieve (previously a grade of 75 was required). Updates the version of The United States Pharmacopeia and The National Formulary used as a standard for compounding to chapters 795 and 797 as they existed on Jan. 1, 2023 (previously 2015).

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB549 In Committee

(Ballard)

Change restrictions based on age for certain health care, power of attorney, and financial documents

You are: Monitoring

Defines adult as someone who is 18 (down from 19) years of age or older, or who is otherwise not a minor (changed from 'or who is married'), for purposes of the decision-making process which allows a competent adult to designate another person to make health care and medical treatment decisions if the adult becomes incapable of making such decisions. Requires a settlor of a trust to be either 18+ or otherwise not a minor in order to create a valid trust. Defines principal, for purposes of the Nebraska Uniform Power of Attorney Act, as an individual who is 18 years or older or is not a minor who grants authority to an agent (age requirement added).

01-17-23 - Date of introduction

01-19-23 - Referred to Judiciary Committee

LB552 Introduced

(Cavanaugh, J.)

Change requirements for the Legislative Mental Health Care Capacity Strategic Planning Committee

You are: Monitoring

Extends the reporting and termination dates of the Legislative Mental Health Care Capacity Strategic Planning Committee by one year. (The committee is charged with determining necessary capacity for inpatient mental health care beds for both state operated and privately owned facilities based on best practices in mental health care.)

01-17-23 - Date of introduction

LB570 In Committee

(Vargas)

Adopt the Overdose Fatality Review Teams Act

You are: Monitoring

Creates a framework for establishing county-level, multidisciplinary overdose fatality review teams. Provides overdose fatality review teams with duties and responsibilities to examine and understand the circumstances leading up to overdoses so that the teams can make recommendations on policy changes and resource allocation to prevent future overdoses. Allows overdose fatality review teams to obtain and review records and other documentation related to overdoses from relevant agencies, entities, and individuals while remaining compliant with local, state, and federal confidentiality laws and regulations.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB572 In Committee

(Riepe)

Provide, change, and eliminate provisions relating to the Medical Nutrition Therapy Practice Act

You are: Monitoring

Updates the scope of practice for medical nutrition therapy in accordance with the 407 credential review performed by DHHS. Changes the credential from Licensed Medical Nutrition Therapist to either Licensed Nutritionist or Licensed Dietitian Nutritionist depending on the educational pathway of the applicant. *NAND Legislation

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB586 In Committee

(Hughes)

Provide duties for the Nebraska Center for Nursing regarding clinical training sites

You are: Supporting

Provides legislative intent to appropriate funds necessary for the center to carry out the Nebraska Center for Nursing Act, including, but not limited to, funds to expand clinical training sites in the amount of \$3 million from the General Fund for fiscal year 2023-24 and \$7 million from the General Fund for fiscal year 2024-25. Requires the center to expand clinical training sites for nurses throughout the state, giving preference to areas that have lower numbers of registered nurses per capita compared to the state average, and shall develop programs that: Incentivize clinical nurses to become clinical nurse faculty; Incentivize nurse faculty to partner with staff nurses in the development of clinical nurse faculty; Expand simulation training for nurse clinical education; and Incentivize hospital facilities to support the center in carrying out this subsection. *NHA Legislation.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB595 In Committee

(Hardin)

Change supervision requirements under the Pharmacy Practice Act

You are: Monitoring

Allows a pharmacist to supervise any combination of pharmacy technicians and pharmacist interns at any time up to a total of 4 (up from 3) people.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB608 In Committee

(McDonnell)

State intent to appropriate funds to the Department of Economic Development

You are: Monitoring

Provides legislative intent to appropriate \$90 million from the General Fund for FY2023-24 to the Department of Economic Development, Program 601 (Community and Rural Development), for the purpose of providing capital grants to nonprofit organizations. Money should be distributed equally by congressional district and any grant awarded shall be equal to the amount of funds supplied or expended by the nonprofit organization from other sources.

01-17-23 - Date of introduction

01-19-23 - Referred to Appropriations Committee

LB610 In Committee

(Lippincott)

Appropriate funds to the State Department of Education

You are: Supporting

Appropriates \$10.432 million from the General Fund in both FY2023-24 and FY2024-25 to the State Department of Education, for Program 158, for the purpose of funding career and technical education programs and career education student organizations in secondary and postsecondary schools. There is included in the appropriation to this program for FY2023-24 \$10.232 million General Funds to be distributed each year between secondary and postsecondary schools according to the formula used for federal Perkins funds. Up to \$306,960 of this amount may be used for administration purposes. Each school district shall receive no less than \$15,000. Appropriates \$400,000 from the General Fund for both FY2023-24 and FY2024-25 to the State Department of Education, to be evenly distributed between the career education student organizations. Up to \$50,000 of this amount may be used for administration purposes each year. *NHA legislation.

01-17-23 - Date of introduction

01-19-23 - Referred to Appropriations Committee

LB611 In Committee

(Riepe)

Provide requirements for certain health care facility-provided medications

You are: Monitoring

When a health care facility-provided medication is ordered at least 24 hours in advance for surgical procedures and is administered to a patient at the health care facility, any unused portion of the medication shall be offered to the patient upon discharge when it is required for continuing treatment. Such medication shall be labeled consistent with labeling requirements in 71-2479. Health care facility-provided medication means any topical antibiotic, anti-inflammatory, dilation, or glaucoma drop or ointment that a health care facility has on stand-by or is retrieved from a dispensing system for a specified patient for use during a procedure or visit. If the health care facility-provided medication is used in an

operating room or emergency department setting, the prescriber is responsible for counseling the patient on its proper use and administration, and no other patient counseling is required under section 38-2869.

01-17-23 - Date of introduction

01-19-23 - Referred to Health and Human Services Committee

LB619 In Committee

(McDonnell)

Prohibit assault on a public transportation driver and clarify provisions relating to assault on officers, emergency responders, certain employees, and health care professionals

You are: Monitoring

Expands 28-929 (assault on an officer, etc.) to include those on public transportation drivers, and streamlines the definition of existing prohibited assaults to include those on public safety officers and health care professionals; defines public transportation driver to include the driver or operator of a vehicle providing public transportation that is under the jurisdiction of or operated by a municipality, county, transit authority, regional metropolitan transit authority, or other political subdivision but not taxi drivers or others employed by a private entity.

01-17-23 - Date of introduction

01-19-23 - Referred to Judiciary Committee

LB626 In Committee

(Albrecht)

Adopt the Nebraska Heartbeat Act

You are: Monitoring

Requires physicians to perform and document an ultrasound prior to an abortion. Makes it unlawful for a physician to knowingly perform an abortion if there is a detectable fetal heartbeat. Violation is disciplinary action by DHHS up to and including revocation of the physician's credential to practice. Recognizes affirmative defenses that a medical emergency existed or the pregnancy resulted from first degree sexual assault, first degree sexual assault of a child, or incest. Shields woman upon whom an abortion is attempted, induced, or performed from prosecution under the Act. Contains a severability clause and an emergency clause.

01-17-23 - Date of introduction

01-17-23 - Hunt MO12 Indefinitely postpone pursuant to Rule 6, Section 3(f) filed

Motion to kill.

01-17-23 - Albrecht FA4 filed

Dilatory amendment to control debate.

01-17-23 - Albrecht FA5 filed

Dilatory amendment to control debate.

01-17-23 - Albrecht FA6 filed

Dilatory amendment to control debate.

01-17-23 - Hunt FA7 filed

Dilatory amendment to extend debate.

01-17-23 - Conrad MO13 Indefinitely postpone filed

Motion to kill.

01-17-23 - Conrad MO11 Bracket until June 2, 2023 filed

01-18-23 - Hunt AM17 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM16 filed

Changes the "Nebraska Heartbeat Act" to the "Compulsory Pregnancy Act."

01-18-23 - Hunt AM20 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM24 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM22 filed

Changes "physician" to "chiropractor."

01-18-23 - Hunt AM19 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM25 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM27 filed

Would require a woman to consult with a judge and their Senator.

01-18-23 - Hunt AM18 filed

Dilatory amendment to extend debate.

01-18-23 - Hunt AM21 filed

Dilatory amendment to extend debate.

01-19-23 - Referred to Health and Human Services Committee

01-19-23 - Hunt AM13 filed

Dilatory amendment to extend debate.

01-19-23 - Hunt AM23 filed

Dilatory amendment to extend debate.

01-19-23 - Hunt AM15 filed

Dilatory amendment to extend debate.

01-19-23 - Hunt AM14 filed

Dilatory amendment to extend debate.

01-19-23 - Hunt AM26 filed

Dilatory amendment to extend debate.

LB634 In Committee

(McKinney)

Adopt the Cannabis Control Act and the Cannabis Conviction Clean Slate Act

You are: Monitoring

Decriminalizes possession of marijuana. Provides for “clean slate relief” to nullify the conviction, remove all civil disabilities and disqualifications imposed as a result of conviction, and notify the person to consult an attorney on their right to possess a firearm. Would seal the prior record (with exceptions) and notify the Crime Commission, the State Patrol, and any law enforcement, county attorneys, or city attorneys in the record. Automatic eligibility for clean slate relief for offenses on or after Jan. 1, 1994, if the sentence is complete and all fines paid, requires the State Court Administrator to identify those eligible and notify the court, with no involvement from the person. Requires the state pay attorney’s fees for a successful appeal from a person wrongfully denied clean slate relief. Allows a county or city attorney to petition to vacate an order for clean slate relief if erroneous. Removes hashish or concentrated cannabis from Schedule I of the controlled substances list. Removes marijuana items from the drug paraphernalia statutes. Amends the juvenile code to clarify parental rights can not be terminated for use or possession of marijuana, with exceptions for creating an unreasonable danger to the safety of a child. Specifies parenting time, custody, and visitation shall not be denied for use or possession of marijuana, except when unreasonable danger to the safety of a child. Includes marijuana in alcoholic beverage open container statutes to bar consumption in motor vehicles with exceptions for limos and party buses. Includes marijuana in the Clean Indoor Air Act to ban use in public. Removes the marijuana tax and tax stamp.

01-18-23 - Date of introduction

01-20-23 - Referred to Judiciary Committee

LB639 In Committee

(Blood)

Change provisions of Nebraska Workers’ Compensation Act relating to rules and regulations, case progression standards, and summons and eliminate requirements to distribute copies of certain materials

You are: Monitoring

Strikes the timelines for scheduling hearings and orders under workers' compensation court. Strikes the Workers' Compensation Court from receiving copies of the Legislative journal or session laws.

01-18-23 - Date of introduction

01-20-23 - Referred to Business and Labor Committee

LB640 In Committee

(Kauth)

Require an off-campus location of a hospital to obtain and use a separate National Provider Identifier in billing for health care services

You are: Monitoring

Requires an off-campus hospital to obtain and use a separate National Provider Identifier for all claims of payment the affiliated hospital uses. The statute defines an "off-campus hospital" as a hospital that another hospital owns, is 250 yards outside the main campus, integrated with the hospital's organization, and provides hospital services.

01-18-23 - Date of introduction

01-20-23 - Referred to Banking, Commerce and Insurance Committee

LB657 In Committee

(McDonnell)

Appropriate funds to the University of Nebraska

You are: Monitoring

Appropriates \$500,000 from the Nebraska Health Care Cash Fund for FY2023-24 to the Board of Regents of the University of Nebraska for the University of Nebraska Medical Center to contract with an organization located in Nebraska that provides comprehensive cancer support and education. Expresses legislative intent to transfer \$500,000 annually for such contract.

01-18-23 - Date of introduction

01-20-23 - Referred to Health and Human Services Committee

LB663 In Committee

(Riepe)

State intent to appropriate funds to the Department of Health and Human Services

You are: Monitoring

Expresses legislative intent to appropriate \$5,331,423 from the General Fund for each FY2023-24 and FY2024-25 to the Department of Health and Human Services, Agency 25, for Program 33, for the purpose of funding the designated health information exchange.

01-18-23 - Date of introduction

01-20-23 - Referred to Appropriations Committee

LB668 In Committee

(Aguilar)

Authorize mental health professionals and practitioners to take persons into emergency protective custody and provide for a training and certification process

You are: Monitoring

Requires DHHS to create a certification process for licensed independent mental health practitioners to take persons into emergency protective custody when the practitioner has probable cause to believe a person is mentally ill and dangerous and harm is likely to occur before mental health board proceedings could be initiated. Clarifies notice provisions to the county attorney to include such professionals.

01-18-23 - Date of introduction

01-20-23 - Referred to Judiciary Committee

LB670 In Committee

(Hunt)

Prohibit discrimination under the Nebraska Fair Employment Practice Act on the basis of gender identity or sexual orientation and prohibit discrimination by employers regardless of size

You are: Monitoring

Prohibits discrimination sexual orientation and gender identity under the Nebraska Fair Employment Practice Act. Redefines 'employer' under the Act to include both class I (as previously defined) and class II employers. Defines Class II employers as a person engaged in an industry who has one or more employees for each working day in each of 20 or more calendar weeks in the current or preceding calendar year and any agent of such a person. Also makes it unlawful for a Class I employer to discriminate against any of his or her employees or applicants for employment, for an employment agency to discriminate against any individual, or for a labor organization to discriminate against any member thereof or applicant for membership because he or she has opposed any practice or refused to carry out any action unlawful under federal law or the laws of this state, or because they have has inquired about, discussed, or disclosed information regarding employee wages, benefits, or other compensation.

01-18-23 - Date of introduction

01-20-23 - Referred to Business and Labor Committee

LB680 In Committee

(Day)

Change provisions of the Parkinson's Disease Registry Act

You are: Monitoring

Allows a physician who has care of, or has diagnosed, Parkinson's disease or a related movement disorder for a non-hospitalized patient not otherwise reported to use participation in the state-designated health information exchange to fulfill their requirement to report the diagnosis under the Parkinson's Disease Registry Act. Allows the DHHS to inspect, upon reasonable notice, a representative sample of the medical records of patients who have been diagnosed, treated, or admitted for Parkinson's disease to ensure compliance with the reporting requirement. Add's the patient's medical record number, race, and ethnicity to what is required in the report, and gives nonlimiting examples for other information that may be required by the department. Removes the requirement for pharmacists to report a list of persons who they have dispensed drugs prescribed for parkinson's. Beginning Jan. 1, 2024 requires department to report electronically to the Clerk of the Legislature a program summary update on the incidents and prevalence of Parkinson's disease in the state, and create and maintain a webpage with the same information. Allows data from the registry to be made available to researchers that have the approval of an institutional review board.

01-18-23 - Date of introduction

01-20-23 - Referred to Health and Human Services Committee

LB681 In Committee

(Clements)

Change provisions relating to a fund and provide for transfers under the Tax Equity and Educational Opportunities Support Act

You are: Monitoring

Introduced at the request of the Governor. Renames the Tax Equity and Educational Opportunities Fund to the Education Future Fund, which will consist of money transferred to the Fund (previously funded by income tax appropriations and other appropriations made by the Legislature). Requires the State Treasurer to transfer \$1 billion dollars from the General Fund to the Education Future Fund in FY2023-24 and \$250 million in FY2024-25. Expresses legislative intent to transfer \$250 million each year from the General Fund to the Education Future Fund beginning FY2025-26. Requires the Fund only be used for purposes listed in the Act.

01-18-23 - Date of introduction

01-20-23 - Referred to Appropriations Committee

LB745 In Committee

(Cavanaugh, M.)

Increase the cigarette tax and provide for distribution of the proceeds

You are: Monitoring

Increase the cigarette tax from 64 cents to \$2.14 per package and transfers proceeds to the Property Tax Credit Cash Fund (\$1) and the Medicaid Waiver Cash Fund (\$.50). Creates the Medicaid Waiver Cash Fund to pay the state portion of the costs of services for Medicaid waivers.

01-18-23 - Date of introduction

01-20-23 - Referred to Revenue Committee

LB761 In Committee

(DeBoer)

Appropriate funds to the Supreme Court for the Office of Public Guardian

You are: Monitoring

Appropriates \$700,000 of General Funds to the Office of the Public Guardian for staffing.

01-18-23 - Date of introduction

01-20-23 - Referred to Appropriations Committee

LB765 In Committee

(DeKay)

Change, provide, and eliminate definitions, powers, and duties under the Statewide Trauma System Act

You are: Monitoring

Removes references in the Statewide Trauma System Act to "regardless of insurance carrier or ability to pay." Requires DHHS to identify state and regional activities that create, operate, maintain, and enhance the statewide trauma system. Removes DHHS requirements in the Act, including reviewing and approving regional trauma plans. Removes requirement that designated trauma centers and rehab centers receiving trauma patients follow referral patterns to facilitate a seamless patient flow system.

01-18-23 - Date of introduction

01-20-23 - Referred to Health and Human Services Committee

LB778 In Committee

(Bostar)

Change the Pharmacy Benefit Manager Licensure and Regulation Act

You are: Monitoring

Amends the definition of health benefit plan to mean a policy, contract, certificate, or agreement entered into, offered, or issued (a) by a health carrier or plan sponsor or (b) under Medicaid to provide, deliver, arrange for, pay for, or reimburse any of the costs of a physical, mental, or behavioral health care service. Adds definitions for pharmacy acquisition cost, pharmacy benefit management services, pharmacy benefit manager affiliate, pharmacy benefit manager duty, and spread pricing. Provides that each contract between a PBM and a pharmacy shall include a process to appeal, investigate, and resolve disputes regarding any maximum allowable cost price and reimbursements made under a maximum allowable cost price for a specific drug or drugs as: (a) Not meeting the requirements of this section; or (b) Being below the pharmacy acquisition cost. Adds to the process to appeal, investigate, and resolve disputes: If the national drug code provided by the PBM is not available below the maximum allowable cost from the pharmaceutical wholesaler from whom the pharmacy purchases the majority of prescription drugs for resale, then the PBM shall adjust the maximum allowable cost price above the appealing pharmacy's pharmacy acquisition cost and permit the pharmacy to reverse and rebill each claim affected by the inability to procure the drug at a cost that is equal to or less than the previously appealed maximum allowable cost price. Adds to PBM duties if an appeal is determined valid. Prohibits a PBM shall from reimbursing a pharmacy or pharmacist in this state an amount less than the amount that the PBM reimburses a PBM affiliate for providing the same pharmacist services. Specifies PBM duties owed to covered persons, health benefit plans, and providers. Allows the director to suspend or revoke the license of a PBM.

01-18-23 - Date of introduction

01-20-23 - Referred to Banking, Commerce and Insurance Committee

LB779 In Committee

(Bostar)

Limit the amount an insured pays for prescription insulin drugs

You are: Monitoring

Beginning Jan. 1, 2024, requires any insurance policy which provides reimbursement for prescription insulin drugs to limit the total amount that a covered individual is required to pay for a covered prescription insulin drug to a maximum of \$35 per 30-day supply of insulin, regardless of the amount or type of insulin needed to fill the covered individual's prescription.

01-18-23 - Date of introduction

01-20-23 - Referred to Banking, Commerce and Insurance Committee

LB794 In Committee

(Wayne)

Adopt the Nursing Incentives Scholarship Act

You are: Monitoring

Allows an eligible nursing student (a person who does not live in Nebraska at the time of applying for a scholarship; intends to enroll or is enrolled in an accelerated nursing program; and agrees in writing to work for 3 years in Nebraska as a licensed registered nurse upon completion of the accelerated nursing program) to apply to DHHS for a scholarship of 40% of the costs of tuition at an accelerated nursing program; and a 20% tuition remission each year for the first 3 years after completion of an accelerated nursing program for service provided in Nebraska. Allows DHHS to award up to \$4 million for fiscal year 2023-24 and \$6 million dollars for each fiscal year after fiscal year 2023-24. Any recipient who violates the terms of the written agreement to work in Nebraska for the first 3 years after completing the accelerated nursing program shall pay back all amounts received to the department. Accelerated nursing program means a 12-month accelerated nursing program that is offered by a public or private postsecondary institution in Nebraska that has a partnership with a statewide clinical affiliate and consists of courses of instruction in regularly scheduled classes leading to an accelerated bachelor of science in nursing degree.

01-18-23 - Date of introduction

01-20-23 - Referred to Health and Human Services Committee

LB795 In Committee

(Wayne)

Provide immunity for administration of naloxone or other federally approved opioid antagonists

You are: Monitoring

Continues current immunity provisions but changes references from naloxone to opioid antagonists which is defined to mean naloxone hydrochloride or any other opioid antagonist that is approved by the U.S. Food and Drug Administration for emergency reversal of known or suspected opioid overdose.

01-18-23 - Date of introduction

01-20-23 - Referred to Judiciary Committee

LB802 In Committee

(Vargas)

State intent to appropriate funds to the Board of Regents of the University of Nebraska

You are: Monitoring

Provides legislative intent to appropriate \$5 million from the General Fund for FY2023-24, to the Board of Regents of the University of Nebraska, Program 781, for pediatric cancer research at the University of Nebraska Medical Center.

01-18-23 - Date of introduction

01-20-23 - Referred to Appropriations Committee

LB810 In Committee

(Murman)

Adopt the Medical Ethics and Diversity Act

You are: Monitoring

No medical practitioner, health care institution, or health care payer should be compelled to participate in or pay for any medical procedure or prescribe or pay for any medication which such person or entity objects on the basis of conscience. A religious medical practitioner, health care institution, or health care payer that holds itself out to the public as religious shall have the right to make employment, staffing, contracting, and admitting privilege decisions consistent with its religious beliefs.

01-18-23 - Date of introduction

01-20-23 - Referred to Health and Human Services Committee

LR6CA In Committee

(Erdman)

Constitutional amendment to prohibit governmental entities from imposing any taxes other than retail consumption taxes and excise taxes

You are: Monitoring

Under this proposed constitutional amendment, effective Jan. 1, 2026 (if approved by voters in the Nov. 2024 election), notwithstanding any other provision of the Nebraska Constitution to the contrary, no taxes other than retail consumption taxes and excise taxes shall be imposed upon the people of Nebraska.

01-5-23 - Date of introduction

01-9-23 - Referred to Revenue Committee

LR7CA In Committee

(Erdman)

Constitutional amendment to require the state to impose a consumption tax or an excise tax on all new goods and services and to provide a tax exemption for grocery items

You are: Monitoring

Under this proposed constitutional amendment, effective Jan. 1, 2026 (if approved by votes in the Nov. 2024 election), the State of Nebraska shall impose a consumption tax which shall apply to purchases of services and new goods, except for groceries. The Legislature may authorize political subdivisions to do the same.

01-5-23 - Date of introduction

01-9-23 - Referred to Revenue Committee