



Bill Chart for Nebraska Hospital Association

LB5 In Committee

(Bosn)

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

You are: Monitoring

Changes naloxone to "an opioid antagonist" in 28-470, which provides immunity from criminal prosecution for administration to any person experiencing an opioid-related overdose. Defines opioid antagonist as naloxone hydrochloride or any other opioid antagonist approved by the FDA for emergency reversal of opioid overdose.

01-9-25 - Date of introduction

01-13-25 - Referred to Judiciary Committee

01-14-25 - Notice of hearing for January 22, 2025

Judiciary - Room 1525, 1:30 PM

01-15-25 - Notice of hearing for January 22, 2025 (cancel)

01-16-25 - Notice of hearing for January 23, 2025

Judiciary - Room 1525, 1:30 PM

LB10 In Committee

(Hughes)

Change requirements relating to wholesale drug distributors and dispensing of certain prescription drugs

You are: Monitoring

Provides that wholesale drug distributors engaged in wholesale distribution of prescription drugs through the Prescription Drug Donation Program Act need not maintain a paper or electronic pedigree pursuant to section 71-7456. Adds that the department may receive prescription drugs and supplies under the Prescription Drug Donation Program Act and dispense such prescription drugs and supplies through licensed personnel during, or in preparation for, a state of emergency declared by the Governor and distribute prescription drugs and supplies to any individual who is a victim as a result of a state of emergency declared by the Governor.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

01-13-25 - Notice of hearing for January 22, 2025

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

LB22 In Committee

(Dungan)

Require the Department of Health and Human Services to file a state plan amendment for evidenced-based nurse home-visitation services

You are: Monitoring

No later than Oct. 1, 2025, the department shall seek approval for federal matching funds from the federal Centers for Medicare and Medicaid Services through a state plan amendment to implement targeted case management for evidence-based nurse home visiting services. These services shall consist of visits to a home by a nurse and be available to postpartum mothers and children younger than three years of age enrolled in Medicaid or the Children's Health Insurance Program. It is the intent of the Legislature to use the Medicaid Managed Care Excess Profit Fund to pay for this program.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

01-13-25 - Notice of hearing for January 23, 2025

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

LB26 In Committee

(Ballard)

Include certain hospital and health clinic employees within statutes protecting health care professionals from assault

You are: Supporting

For purposes of increased penalties for assault, adds to the definition of health care professional "any other employee of a hospital or health clinic". *NHA Legislation

01-9-25 - Date of introduction

01-13-25 - Referred to Judiciary Committee

01-16-25 - Notice of hearing for January 23, 2025

Judiciary - Room 1525, 1:30 PM

LB27 In Committee

(Ballard)

Change provisions of the Rural Health Systems and Professional Incentive Act**You are:** Monitoring

Provides \$1.5 million for the Rural Health Systems and Professional Incentive Act from the Medicaid Managed Care Excess Profit Fund. Adds dentists who provide treatments to medicaid patients in the incentive program with up to \$60,000 per year with total cap of \$300,000.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

01-13-25 - Notice of hearing for January 22, 2025

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

LB29 In Committee**(Conrad)****Create a review process for agency rules and regulations****You are:** Monitoring

Beginning Jan. 1, 2026, mandates each agency to conduct a review of all existing and pending rules and regulations every three years. Agency heads must designate an individual to oversee this review, and detailed reports of findings must be submitted electronically to the Legislature by June 30 of the review year. The reports will assess the necessity, cost-effectiveness, and regulatory compliance of each rule. The Reference Committee will then forward these reports to the appropriate standing committees for further review and recommendations. During this review process, agency rulemaking will be suspended, except for regulations that are time-sensitive or necessary for public health and safety.

01-9-25 - Date of introduction

01-13-25 - Referred to Government, Military and Veterans Affairs Committee

LB41 In Committee**(Riepe)****Change blood test requirements for pregnant women****You are:** Monitoring

Expands the requirements to take blood samples for syphilis testing from pregnant women. Currently physicians or others practicing obstetrics who are attending to a pregnant woman must take a blood sample for syphilis testing at the first exam; the bill adds required testing at the third trimester exam and birth.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

01-13-25 - Notice of hearing for January 23, 2025

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

LB42 In Committee**(Riepe)****Provide for employment of nurse aides in intellectual and developmental disability facilities****You are:** Monitoring

Allows for nurse aids to work for a service provider operating under the medicaid comprehensive developmental disabilities waiver. Prohibits a registered nurse or licensed practical nurse whose license has been revoked, suspended, or voluntarily surrendered from acting as a nurse aide for a service provider.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

01-13-25 - Notice of hearing for January 23, 2025

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

LB45 In Committee**(McKinney)****Provide for grants for job programs for historically underserved youth****You are:** Monitoring

Creates a 5-year pilot grant program administered by the Department of Labor to support job training and employment initiatives for historically underserved youth. The program targets youth who are at risk of dropping out of school or who come from low-income families, among other criteria. It aims to provide skills leading to certifications in high-demand fields such as information technology and healthcare. The bill outlines eligibility requirements for grant applicants and emphasizes the importance of partnerships with local businesses and educational institutions. An annual report will assess the program's effectiveness and impact on youth employment outcomes. Provides legislative intent to appropriate \$20 million for fiscal year 2025-26 and every fiscal year thereafter to the Department of Labor from the Nebraska Training and Support Cash Fund for the purposes of awarding such grants.

01-9-25 - Date of introduction

01-13-25 - Referred to Business and Labor Committee

LB55 In Committee**(Dorn)**

State intent regarding appropriations for medicaid rates for mental health providers**You are:** Monitoring

Provides legislative intent to appropriate \$1.5 million for fiscal year 2025-26 from the Hospital Quality Assurance and Access Assessment Fund to DHHS to provide reimbursement to mental health providers who do not practice in a hospital and provide services to Medicaid-eligible participants who are eligible for both Medicare and Medicaid. Applies if the rate paid under Medicare is lower than rates paid for behavioral health services under Medicaid at the time. Provides legislative intent to sustains the Medicaid rates for mental health providers serving Medicaid-eligible participants who are eligible for both Medicaid and Medicare receiving behavioral health services under Medicaid.

01-9-25 - Date of introduction

01-13-25 - Referred to Appropriations Committee

LB56 In Committee**(Dorn)****Require medical facilities and mortuaries to comply with requests for blood draws relating to certain deceased persons****You are:** Monitoring

For drivers who die within 4 hours after being in a motor vehicle accident, or for pedestrians over age 16 killed by a motor vehicle, requires compliance by a medical facility or mortuary with a peace officer's request for a blood draw to determine the amount of drugs or alcohol in the body.

01-9-25 - Date of introduction

01-13-25 - Referred to Judiciary Committee

LB57 In Committee**(Dorn)****State intent regarding appropriations for medicaid assisted-living facilities****You are:** Monitoring

Provides legislative intent to appropriate \$7,926,526 (\$3,345,808 General Funds and \$4,580,768 Federal Funds) for FY 2025-26 and \$8,243,639 (\$3,479,640 General Funds and \$4,763,999 Federal Funds) for FY 2026-27 to DHHS for Program 348 to be used for increasing the Medicaid assisted-living facility rates to \$88.24/day for FY 2025-26 and \$91.78/day for FY 2026-27, for both rural and urban assisted-living.

01-9-25 - Date of introduction

01-13-25 - Referred to Appropriations Committee

LB64 In Committee**(Fredrickson)****Change eligibility requirements for medicare supplement policies****You are:** Monitoring

Beginning Jan. 1, 2026, allows applicants of a medicare supplement policy a 30-day open enrollment period beginning on the applicant's birthday. During the open enrollment period, an issuer is prohibited from (1) denying or conditioning the issuance or effectiveness of a medicare supplement policy or certificate that the issuer offers and is available for issuance in the state, (2) subjecting an applicant to medical underwriting or price discrimination of a medicare supplement policy or certificate because of an applicant's health status, claims experience, receipt of health care, or medical condition, and (3) imposing an exclusion of benefits based on an applicant's preexisting condition. An issuer must provide notice of the annual open enrollment period at the time an applicant applies for a medicare supplement policy.

01-9-25 - Date of introduction

01-13-25 - Referred to Banking, Commerce and Insurance Committee

LB66 In Committee**(DeBoer)****Adopt the Uniform Health-Care Decisions Act****You are:** Monitoring

Creates a framework for the recognition of advance health care directives including preferences for health care professionals or institutions, how decisions will be made and communicated, persons to consult or not consult, guardians, and surrogates. Creates a presumption of capacity to make such decisions, unless determined otherwise by a physician, psychologist, PA, APRN, social worker, or a responsible health care professional if needed and no one else is reasonably available. Lists individuals who are disqualified from acting as an agent for health care decisions, including nursing home owners unless related to the individual. Creates an order of priority for individuals to act as a surrogate for health care decisions and requires health care professionals to comply with the decision of a majority of the members communicating their views. Includes a form to create an advance health-care directive. Upholds advance health care directives created outside Nebraska if they comply with the Act. Requires a health care professional who is aware that a person lacks capacity, to make a reasonable effort to determine if the person has a surrogate, to communicate that the person lacks capacity and may object to such finding, and document such information in the person's medical record. Requires health care professionals or institutions to comply with the instruction of the surrogate, with exceptions. A health care professional or health care institution acting in good faith is not subject to civil or criminal liability or discipline for unprofessional conduct if compliance is based on a reasonable belief of authority or lack of authority or validity of the health care directive. Creates a cause of action against a person falsifying an advance health care directive with damages of \$25,000 or actual damages resulting from the violation. Creates a cause of action against a health care professional or health care institution intentionally violating the directive for \$50,000 or actual damages. Excepts emergency medical responders from liability for reasonable care to avoid imminent loss of life or serious harm, if the care aligns with accepted standards of

the profession, and care does not begin in a health care institution where the person resides or was receiving care. Upholds the validity of prior created advance health care directives.

01-9-25 - Date of introduction

01-13-25 - Referred to Judiciary Committee

LB67 In Committee

(Raybould)

Adopt the Sexual Assault Emergency Care Act

You are: Monitoring

Requires a hospital that provides emergency care for a sexual assault survivor to provide the survivor with information about emergency contraception, in a language the survivor understands, and dispense a complete course of emergency contraception unless declined by the survivor. Requires such hospital to provide training for all personnel involved. Requires such hospital to develop policies and procedures to ensure compliance in the case of moral or religious objections by health care providers. Allows complaints against hospitals for failure to comply to be confidentially filed with DHHS and reported by DHHS to the Legislature biannually. Requires DHHS to investigate complaints, notify the hospital, conduct hearings, and make a determination on compliance, including fines up to \$1,000 per survivor denied care or per month of non-compliance with training requirements.

01-9-25 - Date of introduction

01-13-25 - Referred to Health and Human Services Committee

LB68 In Committee

(Raybould)

Provide insurance and medicaid coverage for certain contraceptives

You are: Monitoring

Requires any insurance plan that includes coverage for self-administered hormonal contraceptives to reimburse an in-network health care provider or dispensing entity for dispensing a supply of such contraceptives. Stipulates that individuals can receive up to a 3-month supply for the first prescription and a 12-month supply for subsequent refills. Provides that Medicaid recipients can obtain a 12-month supply of contraceptives as prescribed, while maintaining their right to choose or change contraceptive methods.

01-9-25 - Date of introduction

01-13-25 - Referred to Banking, Commerce and Insurance Committee

LB77 In Committee

(Bostar)

Adopt the Ensuring Transparency in Prior Authorization Act

You are: Supporting

A utilization review entity, including any third-party entity utilized by the health carrier, shall make any current prior authorization requirements and restrictions, including written clinical criteria, readily accessible on its website to enrollees and health care providers. If a utilization review entity intends to implement a new and change an existing prior authorization requirement the entity shall: Provide contracted providers who are credentialed to perform the affected health care service, or enrollees who have a chronic condition and are already receiving such service, notice of the new or amended requirement or restriction no less than 60 days before implementing. Adverse determinations must be made by a U.S.-licensed physician. Denials must cite clinical criteria. Sets forth communication requirements for denials. Appeals of adverse determinations must be handled by a physician who is of the same or similar specialty as a physician who typically manages the medical condition in question. Requires the Department of Insurance to approve a uniform 2-page prior authorization form by Nov. 1, 2025, for prescription drugs, devices, durable medical equipment, and all other health care procedures, treatments, and services, for use beginning Jan. 1, 2026. Set forth types of care that cannot require prior authorization: emergency confinement or an emergency health service; pre-hospital transportation for the provision of emergency health care or for transfers required by EMTLA, cancer care consistent with National Comprehensive Cancer Network guidelines, preventative services and immunizations, and services covered through a value-based arrangement. Prior authorization cannot be revoked for 60 days after approval is given, and is valid for 1 year or the length of treatment, or for 14 days for acute in-patient care. An AI algorithm cannot be the sole basis for denial. Requires annual reporting from health carriers to the Department of Insurance on number of prior authorization requests, denials, appeals, and most frequently used reasons for denials. *NHA Legislation

01-9-25 - Date of introduction

01-13-25 - Referred to Banking, Commerce and Insurance Committee

LB104 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 report to the Legislature annually. States that a family may refuse home visitation services at any time. LB115 from 2023.

01-10-25 - Date of introduction

01-14-25 - Referred to Health and Human Services Committee

LB109 In Committee

(Bostar)

Prohibit certain provisions in insurance policies and health plans relating to clinician-administered drugs and change provisions relating to pharmacy benefit managers**You are:** Supporting

Addresses the practices of pharmacy benefit managers (PBMs) that restrict patient choice and access to preferred pharmacy providers. Prohibits "white bagging," specifically restricting PBMs from refusing authorization, imposing limits, or requiring greater payment for clinician-administered drugs. Bars a PBM from restricting a covered person's ability to choose how a retail community pharmacy may dispense or deliver prescription drugs, including mailing or other delivery of prescription drugs. Allows nationally accredited specialty pharmacies in Nebraska to participate as in-network providers by prohibiting PBMs from imposing unreasonable contractual terms and conditions that exceed those required for national accreditation. *NHA Legislation

01-10-25 - Date of introduction

01-14-25 - Referred to Banking, Commerce and Insurance Committee

LB110 In Committee

(Hughes)

Provide requirements for pelvic examinations**You are:** Monitoring

Prohibits pelvic exams on patients who are anesthetized or unconscious without written consent unless 1) an authorized individual gives written consent, 2) the exam is for emergency purposes or 3) a court order. Healthcare providers in violation are subject to discipline under the Uniform Credentialing Act. Patients who are anesthetized or unconscious when an exam is performed will be notified in writing prior to discharge from the facility.

01-10-25 - Date of introduction

01-14-25 - Referred to Health and Human Services Committee

01-21-25 - Notice of hearing for January 31, 2025

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

LB115 In Committee

(Ballard)

Increase the income tax credit and change the qualification criteria under the Volunteer Emergency Responders Incentive Act**You are:** Monitoring

Increases the income tax credit from \$250 to \$1,000 for any taxable year in which a volunteer member is included on a certified list of active emergency responders, rescue squad members, or volunteer firefighters.

01-10-25 - Date of introduction

01-14-25 - Referred to Revenue Committee

01-16-25 - Notice of hearing for January 24, 2025

Revenue - Room 1524, 1:30 PM

LB118 In Committee

(Hardin)

Change supervising authority for a pharmacist**You are:** Monitoring

Permits pharmacists to supervise a total of four pharmacy technicians and pharmacist interns instead of three.

01-10-25 - Date of introduction

01-14-25 - Referred to Health and Human Services Committee

01-21-25 - Notice of hearing for January 29, 2025

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

LB119 In Committee

(Hardin)

Provide requirements for the Rural Health Opportunity Program and provide tuition waivers**You are:** Monitoring

Requires the Board of Regents to enter into a memorandum of understanding to the administer of the Rural Health Opportunity Program including the application and selection process for program participation and provisional admission in to one of the eligible health programs UNMC. Eligible students must have 1) attended a Nebraska high school and 2) Lived or been a resident of rural Nebraska. Students who participate are entitled to a 100% tuition and fee waiver for four years at a state college to transfer to an eligible UNMC health care program.

01-10-25 - Date of introduction

01-14-25 - Referred to Health and Human Services Committee

01-21-25 - Notice of hearing for January 29, 2025

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

LB138 In Committee

(Riepe)

Change provisions relating to pharmacy dispensing fees under the Medical Assistance Act**You are:** Monitoring

Effective July 1, 2026, reimbursement of the dispensing fee for independent pharmacies shall be \$10.38 per prescription. All other pharmacies and mail order pharmacies are reimbursed as follows: (a) pharmacies with fewer than 30,000 prescriptions per year are reimbursed \$10.38 per prescription, (b) pharmacies with 30,000 or more but fewer than 70,000 prescriptions per year are reimbursed \$9.51 per prescription, (c) pharmacies with 70,000 prescriptions or more per year are reimbursed \$8.30 per prescription. No later than July 1, 2026, any pharmacy, except a mail order pharmacy, that is the only enrolled pharmacy within a 30-mile radius shall be reimbursed a dispensing fee of \$10.38 per prescription. By July 1, 2026, the department shall complete a cost-of-dispensing report that provides recommendations for adjusting pharmacy dispensing fees annually.

01-13-25 - Date of introduction

01-15-25 - Referred to Health and Human Services Committee

01-21-25 - Notice of hearing for January 29, 2025

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

LB153 In Committee

(Guereca)

Require the Department of Health and Human Services to file a state plan amendment for postpartum coverage**You are:** Monitoring

Requires DHHS to seek federal matching funds to implement a health services initiative to provide postpartum coverage for at least six months for a mother whose child is covered under the unborn child option. Provides intent for state matching funds from the Medicaid Managed Care Excess Profit Fund.

01-13-25 - Date of introduction

01-15-25 - Referred to Health and Human Services Committee

LB158 In Committee

(Wordekemper)

Provide requirements for health carriers or pharmacy benefit managers regarding out-of-pocket maximums and cost-sharing requirements**You are:** Monitoring

For any health benefit plan entered into after Jan. 1, 2026, a health carrier or pharmacy benefit manager shall include any amount paid by a health benefit plan enrollee or paid on behalf of an enrollee by another person for purposes of calculating the overall contribution to any out-of-pocket maximum or costsharing requirement under a health benefit plan.

01-13-25 - Date of introduction

01-15-25 - Referred to Banking, Commerce and Insurance Committee

LB168 In Committee

(Hardin)

Adopt the 340B Contract Pharmacy Protection Act**You are:** Supporting

Any manufacturer, agent or affiliate, or distributor or third-party logistics provider of such manufacturer's drugs shall not, either directly or indirectly, deny, restrict, or prohibit the acquisition of any 340B drug by or delivery of any 340B drug to any location authorized by any 340B entity to receive such 340B drug, unless receipt of such 340B drug is prohibited by federal law. Nor shall they require any 340B entity to submit any data, including any claim data, utilization data, encounter data, medical data, purchasing data, or other data, as a condition for allowing the acquisition of any 340B drug by or delivery of any 340B drug to any 340B entity or to any location authorized by any 340B entity to receive such 340B drug, unless such data is required by federal law. The Attorney General or any county attorney may institute an action in the name of the State of Nebraska for an injunction or other process to restrain or prevent any violation of the 340B Contract Pharmacy Protection Act. *NHA Legislation.

01-13-25 - Date of introduction

01-15-25 - Referred to Banking, Commerce and Insurance Committee

LB169 In Committee

(Brandt)

Eliminate certain sales and use tax exemptions and impose sales and use tax on certain services**You are:** Monitoring

Imposes sales and use taxes on the gross receipts from mechanical amusement devices. Eliminates sales tax exemptions for telefloral delivery, clothing cleaning and repair, pet services, animal grooming performed by a veterinarian or vet tech, hair care services, taxi and limo services, conferencing bridging services. Includes several new services for sales tax including dating services, hair care, interior decorating and design, lobbying, marketing services, massage, nail care, personal instruction for piano, dance, golf, or tennis, sightseeing vehicles, swimming pool maintenance, tattoo and body piercing, travel agency services, and weight loss services. Includes interstate telegraph services revenue for sales tax. Excludes animal or veterinary services performed on livestock from sales and use tax calculations but taxes other veterinary services. Removes the sales tax exemptions (outright repeals the exemption) for: Videotape and film rental; Satellite programming; Fine art storage, use, or rental by a museum; Historic automobile museums; and Zoo or aquarium membership.

01-13-25 - Date of introduction
01-15-25 - Referred to Revenue Committee

LB174 In Committee**(Prokop)****Change provisions relating to garnishment of wages for medical debt****You are:** Monitoring

The maximum earnings of an individual for any workweek which is subject to garnishment for medical debt is not to exceed the lesser of the following amounts: (a) 10% of his or her disposable earnings for that week; (b) the amount by which his or her disposable earnings for that week exceed 30 times the federal minimum hourly wage in effect at the time earnings are payable; or (c) 20% of his or her disposable income for that week if the individual is not the head of a family. Defines "health care services" as services for the diagnosis, prevention, treatment, cure, or relief of any health condition, illness, injury, or disease including substance use disorder. Defines "medical debt" as a debt arising from the receipt of health care services. Defines a "medical debt buyer" as a person or entity engage in the business of purchasing medical debts for collection purposes. Defines "medical creditor" as any entity that provides health care services and to whom the individual currently or previously owes money for health care services.

01-13-25 - Date of introduction
01-15-25 - Referred to Judiciary Committee
01-16-25 - Notice of hearing for January 24, 2025
Judiciary - Room 1525, 1:30 PM

LB188 In Committee**(Dover)****State intent to appropriate for medicaid nursing facility rates****You are:** Monitoring

States legislative intent to include medicaid nursing facility rates in the medicaid nursing facility rate calculation, and intent to appropriate amounts for rate enhancement. Requires a report to the Legislature including how the inflation factor was calculated for FY2025-26 medicaid nursing facility rates.

01-13-25 - Date of introduction
01-15-25 - Referred to Appropriations Committee

LB189 In Committee**(Cavanaugh, M.)****Adopt the Paid Family and Medical Leave Insurance Act****You are:** Monitoring

Adopts the Paid Family and Medical Leave Insurance Act. Establishes the Paid Family and Medical Leave Insurance Fund to be administered by the Labor Commissioner. Allows covered individuals in Nebraska to take paid leave for specific qualifying reasons, including caring for a new child, a family member with a serious health condition, or for their own serious health condition. Outlines the eligibility criteria, benefit calculations, and the process for filing claims. Establishes a fund to support the program, funded by contributions from covered individuals and employers. Sets maximum leave entitlement at 10 weeks, with specific provisions for intermittent leave.

01-13-25 - Date of introduction
01-15-25 - Referred to Business and Labor Committee

LB198 In Committee**(Sorrentino)****Change provisions of the Pharmacy Benefit Manager Licensure and Regulation Act****You are:** Monitoring

Creates a pharmacy benefit manager duty of care. Regulates maximum allowable cost price lists, allows pharmacists to decline care if the MAC is below the pharmacy acquisition cost. Bans spread pricing by pharmacy benefit managers. Bans PBMs from requiring pharmacy accreditation standards more stringent than federal or state licensure requirements. Establishes an appeal process for pharmacies regarding pricing disputes and ensures that PBMs act in the best interests of covered persons. Empowers the Director of Insurance to enforce compliance and impose penalties for violations.

01-14-25 - Date of introduction
01-16-25 - Referred to Banking, Commerce and Insurance Committee

LB202 In Committee**(Kauth)****Exempt certain activities from disciplinary action under the Medicine and Surgery Practice Act****You are:** Monitoring

Prohibits discipline on a medical, surgical, or osteopathic medicine license due to an applicant expressing an opinion in a public or professional forum.

01-14-25 - Date of introduction
01-16-25 - Referred to Health and Human Services Committee

LB203 In Committee

(Kauth)

Change powers and duties of health directors in certain local public health departments**You are:** Monitoring

Requires the health director to receive written approval by a majority of the county board and city for a community-wide directed health measure (public health action or intervention involving the total population of a jurisdiction when there are no known epidemiological links) prior to issuance. Defines epidemiological link as an instance in which an individual may have had exposure to a communicable disease and exposure through known modes of transmission is plausible. Exposures considered epidemiologically linked if at least one entity in the chain of transmission is a contact or a confirmed, probable, or suspect case.

01-14-25 - Date of introduction

01-16-25 - Referred to Health and Human Services Committee

LB204 In Committee

(Kauth)

Adopt the Biometric Autonomy Liberty Law**You are:** Monitoring

States that biometric data is the property of the individual from whom the data was collected, and the individual has the right to sell or use their data or consent to its use. Bars a public entity from requiring or coercing an individual to be subject to any implantable device. Requires consent to the collection of biometric data. Provides for a cause of action by the Attorney General. Creates exemptions for biometric data collected for a security purpose and for information collected for health care treatment, payment, or operations.

01-14-25 - Date of introduction

01-16-25 - Referred to Banking, Commerce and Insurance Committee

LB210 In Committee

(Riepe)

Provide for fees and assessments for participation and use of the prescription drug monitoring program and the designated health information exchange**You are:** Monitoring

Creates the Population Health Information Assessment Fund (Fund) to be used to provide for nonfederal costs and to reimburse the department for the cost of collecting the assessment, not to exceed \$250,000 annually. Allows the operator of the prescription drug monitoring program and designated health information exchange to assess users of the PDMP (including prescribers and dispensers), but excluding pharmacy benefit managers, a fee for use and access to the system. Allows for legal action and interest charges or penalties for lack of timely payment. Requires the department to impose fees (set at XXX) on PBMs for operational, nontreatment use of the PDMP to be remitted to the Fund. Allows the operator to charge designated health care facilities (including hospitals, clinics, and pharmacies) and health insurance plans, as a condition of conducting business in Nebraska. Beginning July 1, 2025, the operator shall pay a quarterly assessment, to be remitted to the Fund. Requires the department to report to the Health Information Technology Board on the compliance status of each MCO regarding sharing of claims information. Requires the department to share its vital statistics data files with the designated health information exchange and operator at set quarterly intervals.

01-14-25 - Date of introduction

01-16-25 - Referred to Health and Human Services Committee

LB214 In Committee

(Holdcroft)

Provide for the use of newborn safety devices and procedures relating to surrendered newborn infants**You are:** Monitoring

Permits the use of newborn safety devices in a place where the device is visible to staff at hospitals and fire stations which are staffed 24-7. Requires newborn safety device to be equipped with dual alarms and inspected once per day. Requires signage to be posted with instructions. Participation as a device location is voluntary. Expresses legislative intent to appropriate \$15,000 to award grants for the installation of devices.

01-14-25 - Date of introduction

01-16-25 - Referred to Health and Human Services Committee

LB241 In Committee

(Hallstrom)

Provide immunity from liability for cybersecurity events**You are:** Monitoring

Creates immunity for private entities in class actions resulting from a cybersecurity event unless the cybersecurity event was caused by willful, wanton, or gross negligence on the part of the private entity. Cybersecurity event is defined as an event resulting in unauthorized access, disruption or misuse of an information system or nonpublic information stored on an information system.

01-14-25 - Date of introduction

01-16-25 - Referred to Banking, Commerce and Insurance Committee

LB252 In Committee

(Bostar)

Prohibit disadvantaging insurance and Medicaid coverage for nonopioid drugs

You are: Monitoring

Requires DHHS and commercial insurers ensure that no non-opioid drug approved by the FDA is disadvantaged or discouraged under a formulary or preferred drug list.

01-14-25 - Date of introduction

01-16-25 - Referred to Banking, Commerce and Insurance Committee

LB253 In Committee

(Bostar)

Provide for insurance and medicaid coverage of biomarker testing

You are: Monitoring

Requires health insurers and medicaid to include coverage for biomarker testing used for diagnosis, treatment, appropriate management, or ongoing monitoring of a disease condition, no later than Jan. 1, 2026.

01-14-25 - Date of introduction

01-16-25 - Referred to Banking, Commerce and Insurance Committee

LB260 In Committee

(Speaker Arch)

Provide, change, and eliminate provisions relating to appropriations

You are: Monitoring

Reappropriates all unexpended appropriation balances existing on June 30, 2024, for FY2024-25, to the respective agencies, programs, and funds listed in this act unless otherwise directed. Includes the increased Medicaid appropriation due to the lower FMAP. Includes increased appropriation for the Children's Health Insurance Program. Lowers the Game and Parks Administration General Fund budget appropriation by \$5 million which is to be replaced by \$5 million in NET funds.

01-15-25 - Date of introduction

01-17-25 - Referred to Appropriations Committee

LB261 In Committee

(Speaker Arch)

Appropriate funds for the expenses of Nebraska State Government for the biennium ending June 30, 2027, and appropriate Federal Funds allocated to the State of Nebraska pursuant to the federal American Rescue Plan Act of 2021

You are: Monitoring

MAINLINE BUDGET. Supreme Court budget includes a \$30,000 appropriation from the General Fund for contracting for services with an organization with the primary goal of ensuring sustainability in juvenile justice reform. Such contract shall be used to explore making probation, the district and state court systems, law enforcement, county attorneys, public defenders, and school districts more effective partners in juvenile justice reform. The contract shall include requirements that the organization work with a county having a population of 150,000 or more inhabitants willing to lease or grant county-owned property for the purpose of creating a facility to address juvenile justice and behavioral health issues and prioritize the development of a sustainable revenue model for such facility. Dept. of Education funding includes \$69,000 General Funds provided as state aid for FY2025-26 and \$69,000 General Funds provided as state aid for FY2026-27 for incentive bonuses for providers of child care and early childhood education programs. Includes state aid to be distributed according to federal Perkins Funding guidelines. Includes Public Service Commission funding. DHHS Funding includes two years of \$13,688 Cash Funds for regulatory support for out-of-hospital emergency care providers licensing from the Nebraska Health Care Cash Fund. Includes cash funding for the Rural Health Provider Incentive Fund. Includes funding for FQHCs. Includes \$1.1 million for Home-based visitation services. Includes \$542,000 General Funds for tuition reimbursement for emergency medical services responders' initial and ongoing training. Includes a \$37 million appropriation to NDOT for public airports with the language stating, "Cash Fund expenditures shall not be limited to the amount shown." DNR Funding includes Water Sustainability Funding at \$10.865 million. Moves \$67.8 million from the Perkins County Canal Fund to the Department of Natural Resources Water Projects Fund. Reappropriates Soil and Water Conservation funds to the General Fund. Crime Commission budget includes \$327,736 General Funds in each of the next two years to operate a victim notification system. Transfers \$442 million to the Property Tax Credit Cash Fund. Transfers up to \$1.5 million from the Petroleum Release Remedial Action Cash Fund to the Superfund Cost Share Cash Fund on or before June 30, 2026. Transfers \$5 million from the Nebraska Environmental Trust Fund to the Water Sustainability Fund in each of the next two years. Transfers \$2.5 million from the Nebraska Environmental Trust Fund to the Nebraska Soil and Water Conservation Fund in each of the next two years. Transfers \$150,000 from the State Settlement Cash Fund to the Legal Education for Public Service and Rural Practice Loan Repayment Assistance Fund in each of the next two years. For more information, see the Executive Budget Brief book at <https://das.nebraska.gov/budget/publications/docs/2025-2027/2025/ExecutiveBudgetinBrief2025-2027Biennium.pdf>

01-15-25 - Date of introduction

01-17-25 - Referred to Appropriations Committee

LB264 In Committee

(Speaker Arch)

Provide, change, and eliminate transfers from the Cash Reserve Fund and various other funds and change, terminate, and eliminate various statutory programs

You are: Monitoring

Provides for Cash Transfers including: \$25.5 million from the Military Installation Development and Support Fund to the Site and Building Development Fund; \$65 million from the Water Recreation Enhancement Fund to the General Fund; the remaining balance of the Economic Development Cash Fund to the General Fund; the remaining balance of the Intern Nebraska Cash Fund to the General Fund; \$4 million from the State Visitors Promotion Cash Fund; \$8 million from the Affordable Housing Trust Fund to the General Fund; \$3.25 million from the Early Childhood Education Endowment Cash Fund to the Education Future Fund; \$3 million from the Financial Institution Assessment Cash Fund to the General Fund; \$250,000 from the Early Childhood Program Training Fund to the Education Future Fund; \$1 million from the Department of Banking and Finance Settlement Cash Fund to the General Fund; \$1 million from the Workforce Development Program Cash Fund to the General Fund; \$400,000 from the Engineers and Architects Regulation Fund to the General Fund; \$150,000 from the Nebraska Job Creation and Mainstreet Revitalization Fund to the General Fund. Transfers interest from the Inland Port Authority to the General Fund beginning July 1, 2025. Repeals the county jail reimbursement requirement for incarcerated individuals waiting for competency restoration. Starting July 1, 2025, transfers any investment dollars from the Perkins County Canal Fund to the General Fund. Strikes provisions passed last year paying for interpreter services under Medicaid. Allows transfers to be made from the Mainstreet Revitalization Fund to the General Fund at the direction of the Legislature. Ends the Urban Redevelopment Act. Makes transfers from the General Fund to the Education Future Fund. Allows transfers to the General Fund from the Rural Workforce Housing Fund. Makes changes to the NEXT project statutes - requires \$1 billion in private donations. NET Changes: Beginning in July 2025, the State Treasurer shall transfer 25% to the Water Resources Cash Fund; and 25% to the State Park Cash Revolving Fund. Adds language that any money transferred from the NET to the Water Resources Cash Fund must be expended in accordance with the NET Act. Ends transfers to the 211 Act. Beginning July 1, 2025, takes interest from the NUSF (strikes the provisions that limited that take to 2027). Takes interest from the 911 Service System Act. OUTRIGHT REPEALS: The Resilient Soils and Water Quality Act; Carbon Dioxide Storage Facility Trust Fund; Prescription Drug Donation Program Act; Nebraska Nonprofit Security Grant Program Act; and the Nebraska Broadband Bridge Fund.

01-15-25 - Date of introduction

01-17-25 - Referred to Appropriations Committee

LB273 In Committee

(Hunt)

Change provisions relating to a power of attorney for health care

You are: Monitoring

Changes provisions relating to a power of attorney for health care's authority to make decisions that will result in the death of the principal's unborn child. Changes the standard from one in which it is probable the unborn child will develop to the point of live birth with continued health care to one in which it is likely the unborn child will develop to the point of live birth. Applies an exception if the principal's treating physician determines that the principal's life is at risk.

01-15-25 - Date of introduction

01-17-25 - Referred to Judiciary Committee

LB278 In Committee

(von Gillern)

Change requirements for certain insurance policies and contracts

You are: Monitoring

For preferred provider organization insurance policies, prohibits policies and contracts from excluding a provider with a practice containing a substantial number of patients who hold a visiting faculty permit (issued to graduates of foreign medical schools). Permits an insurance arrangement to exclude providers who fail to meet certain criteria for quality, accessibility, or economic considerations.

01-15-25 - Date of introduction

01-17-25 - Referred to Banking, Commerce and Insurance Committee

LB281 In Committee

(Quick)

Change provisions relating to the Board of Nursing and eliminate the Board of Advanced Practice Registered Nurses

You are: Monitoring

Eliminates the Board of Advanced Practice Registered Nurses and transfers its authorities to the Board of Nursing. Changes the Board of Nursing from 2 public members to 3, and 1 APRN to 4. Beginning Jan. 1, 2026, the terms for the APRNs serving on the board include 1 appointed for a 3-year term, 1 appointed for a 4-year term, and 1 appointed for a 5-year term with all subsequent appointments for 5-year terms. The preferred representation of the APRNs serving on the board includes 1 certified registered nurse anesthetist, 1 nurse practitioner, 1 clinical nurse specialist, and 1 certified nurse midwife, if possible. The Nursing Board shall establish standards for integrated practice agreements between collaborating physicians and certified nurse midwives; monitor the scope of practice by certified nurse midwives, nurse anesthetists, clinical nurse specialists, and nurse practitioners; recommend disciplinary action relating to relevant licenses; and engage in activities consistent with and adopt rules and regulations to implement the relevant nursing practice acts.

01-15-25 - Date of introduction

01-17-25 - Referred to Health and Human Services Committee

LB283 In Committee

(Spivey)

Require the Department of Health and Human Services to implement express lane eligibility**You are:** Monitoring

Requires the Nebraska Department of Health and Human Services to submit state plan amendments by Oct. 1, 2025, to the federal Centers for Medicare and Medicaid Services by Oct. 1, 2025, Two establish express lane eligibility for Medicaid and CHIP, allowing for streamlined eligibility determinations (utilizing SNAP data) and automatic enrollments for eligible children.

01-15-25 - Date of introduction

01-17-25 - Referred to Health and Human Services Committee

LB305 In Committee**(Ibach)****Adopt the Preceptorship Tax Credit Act****You are:** Monitoring

Allows licensed physicians participating in preceptorship programs to receive a nonrefundable income tax credit of \$1000 for each rotation completed without compensation. Each rotation must consist of at least 80 hours of clinical training, with a maximum credit of \$5000 per year. Prioritizes credits for physicians in rural locations and sets an annual limit of \$1 million in credits. Establishes a nonrefundable tax credit for licensed physicians serving as preceptors.

01-15-25 - Date of introduction

01-17-25 - Referred to Revenue Committee

01-23-25 - Notice of hearing for January 30, 2025

Revenue - Room 1524, 1:30 PM

LB308 In Committee**(Ibach)****Adopt the Health Care Staffing Agency Registration Act****You are:** Monitoring

Establishes the Health Care Staffing Agency Registration Act. Requires health care staffing agencies to register annually with the department and pay an annual registration fee of \$1,500. Staffing agencies must certify that they will not enforce noncompete clauses that restrict staff worker employment opportunities. Requires staffing agencies maintain records of staff qualifications and insurance coverage. Mandates quarterly reporting to the department regarding charges and payments related to staff workers. Violations of the Act permit the commissioner to access a civil penalty of no more than \$500 for the first offense and \$5,000 for every subsequent offense and to revoke registration. Requires the Labor Department to create a database of agencies.

01-15-25 - Date of introduction

01-17-25 - Referred to Business and Labor Committee

01-17-25 - Notice of hearing for January 27, 2025

Business and Labor - Room 2102, 1:30 PM

LB310 In Committee**(Hansen)****Provide an exemption from newborn screening for certain diseases or conditions****You are:** Monitoring

Provides an exemption from newborn screenings for certain diseases specified by the DHHS if the parent or guardian of the infant objects to such screenings.

01-15-25 - Date of introduction

01-17-25 - Referred to Health and Human Services Committee

01-21-25 - Notice of hearing for January 30, 2025

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

LB312 In Committee**(Strommen)****Provide for student loans to students in nurse anesthesia practice programs and loan repayments for nurse anesthetists under the Rural Health Systems and Professional Incentive Act****You are:** Monitoring

Adds nurse anesthetists to the Rural Health Systems and Professional Incentive Act. Provides the same provisions apply to requirements for the program for nurse anesthetists as all other health professionals within the statute. Provides no new funding.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB313 In Committee**(Ibach)**

Change provisions under the Nebraska Workers' Compensation Act relating to subrogation of third-party claims and the distribution of proceeds in the settlement of third-party claims

You are: Monitoring

Expands recovery for the injury or death of an employee under the Nebraska Workers' Compensation Act to include either the employer or a workers' compensation insurer. Provides that the court may distribute proceeds of any settlement of a 3rd party claim under the Nebraska Workers' Compensation act by: (a) deducting the reasonable expenses of making the recovery and paying 1/3 of the remainder to the employee or his or her personal representative; (b) paying the employer or workers' compensation insurer for all compensation payments that they have made, or payments that they may be obligated to make in the future, out of the balance remaining after the deduction and payment specified in (a); and (c) paying any balance remaining after the distributions described in (a) and (b) to the employee or his or her personal representative.

01-16-25 - Date of introduction

01-21-25 - Referred to Business and Labor Committee

LB322 In Committee

(Clouse)

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

You are: Monitoring

Adds enhanced penalties for assault against a pharmacist while such pharmacist is on duty at a pharmacy, hospital, or health clinic, and adds a requirement to display a sign in a pharmacy advising of the serious penalty for assaulting a pharmacist, similar to the current sign required in hospitals regarding assault on health care professionals.

01-16-25 - Date of introduction

01-21-25 - Referred to Judiciary Committee

LB326 In Committee

(Jacobson)

Change provisions relating to the Unfair Insurance Trade Practices Act, the Nebraska Property and Liability Insurance Guaranty Association Act, and mutual insurance holding companies and eliminate the provisions of the Health Insurance Access Act and the Health Care Purchasing Pool Act

You are: Monitoring

Expands the definition of person in the Unfair Insurance Trade Practices Act to include a health insurance lead generator operating as a natural or artificial entity. Provides that the standards that apply to insurers for unfair trade practice in the business of insurance also apply to health insurance lead generators and persons engaging in the business of insurance. It shall be an unfair trade practice in the business of insurance for a health insurance lead generator to fail to maintain its books, records, and documents in such an order that data regarding complaints and marketing are accessible and retrievable by the director. The director may examine and investigate the affairs of every health insurance lead generator in addition to every insurer doing business in the state to ensure they are not engaged in unfair trade practice.

01-16-25 - Date of introduction

01-21-25 - Referred to Banking, Commerce and Insurance Committee

LB331 In Committee

(Hardin)

Adopt the Nebraska EPIC Option Consumption Tax Act and terminate tax provisions

You are: Monitoring

Repeals the state income tax, property tax, sales and use taxes, motor vehicle tax, and inheritance tax, effective Dec. 31, 2027, transitioning to a consumption tax system. Establishes a consumption tax rate of 7.5%, with local governments allowed to impose an additional tax of up to 1%. Outlines the definitions of taxable property and services, exemptions, and the responsibilities of registered sellers. Includes provisions for tax administration, reporting, and penalties for non-compliance (class IV felony).

01-16-25 - Date of introduction

01-21-25 - Referred to Revenue Committee

LB332 In Committee

(Hardin)

Require medicaid coverage for psychology services provided by certain practitioners

You are: Monitoring

Provides that, by Jan. 1, 2026, DHHS shall provide medicaid coverage for psychology services by advanced level practitioners who have completed advanced training requirements for a doctoral internship or a post-doctoral fellowship and who are under current supervision by a licensed psychologist.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB338 In Committee

(Wordekemper)

Prohibit the use of genetic information for life insurance, disability insurance, and long-term care insurance**You are:** Monitoring

Aims to protect individuals from discrimination based on genetic information when applying for life insurance, disability insurance, or long-term care insurance. Establishes that insurers cannot cancel, limit, or deny coverage based on genetic data unless there is a clinical diagnosis. Prevents insurers from soliciting genetic information or considering genetic test results in their decision-making processes.

01-16-25 - Date of introduction

01-21-25 - Referred to Banking, Commerce and Insurance Committee

LB361 In Committee**(Conrad)****Change provisions of 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

Makes it unlawful for an entity covered by the Nebraska Fair Employment Practice Act to discriminate or retaliate against an individual because they reported a work-related injury, brought a claim, or sought remedies under the Nebraska Workers' Compensation Act. Specifies a right to a jury trial for any civil case brought under the Nebraska Fair Employment Practice Act, including cases brought against state and governmental agencies.

01-16-25 - Date of introduction

01-21-25 - Referred to Business and Labor Committee

LB369 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

Permit people 18 years or older, unless in the custody of DHHS pursuant to a juvenile court order, to make health care decisions for themselves. Permit people under 19 years committed to Department of Correctional Services may consent to decisions regarding medical care, and mental care, and related services without the consent of their parents.

01-16-25 - Date of introduction

01-21-25 - Referred to Judiciary Committee

LB374 In Committee**(Hansen)****Adopt the Licensed Midwives Practice Act****You are:** Monitoring

Replaces the Licensed Practical Nurse-Certified Practice Act with the Licensed Midwives Practice Act. Adds professional midwifery to the list of practices requiring credentials under the Uniform Credentialing Act. The board shall consist of 5 members: 3 licensed certified professional midwives, 1 physician licensed to practice in Nebraska, and 1 public member. An applicant for a license must prove to the department that they are qualified per the requirements. The department may grant temporary licenses for up to 120 days while awaiting results of certification exams. A licensed midwife may attend cases of childbirth, provide preconception, prenatal, intrapartum, and postpartum care, provide normal gynecological services, and provide care for newborns up to 6 weeks after birth. The Act does not require licensure for a person to provide care in accordance with practices of any church or religious denomination or with someone's sincerely held religious beliefs. The board shall adopt rules regarding standards and practices of professional midwifery, including appropriate testing for clients, authorization for a licensed midwife to obtain and administer various medications and devices, prohibitions on the use of forceps or vacuum extractors, and authorization to obtain a blood spot specimen. A health care provider who accepts a transfer from a licensed midwife shall not be liable for an outcome arising from the midwife's actions.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB376 In Committee**(Health and Human Services)****Change and eliminate programs and services administered by the Department of Health and Human Services and eliminate various reporting requirements****You are:** Monitoring

Changes abortion provisions to be consistent with § 71-6915 (12 weeks). Eliminates the designation of assets for or use of income by an individual for failure to use assets or income for medical support from provisions of child neglect and abandonment. Eliminates reporting requirements from the Board of Dentistry and State Board of Health in regard to the delivery of dental hygiene. Eliminates reporting requirements of the State Disbursement Unit. Eliminates reporting the number of children at the Hastings Regional Center. Adds children under tribal law to the bridge to independence program. Removes the language disregarding the income under § 68-922 for disabled people for government assistance. Remove reporting requirements about firearm purchases by Nebraska State Patrol and DHHS. Eliminates reporting for youth rehabilitation and treatment centers. Amends the definition of paramedic practice of emergency medical care and expands the scope to include visualized intubation and all acts an advanced emergency medical technician can perform. Allows grants from the Child Care Grant Fund from DHHS in excess of the appropriation for this program by spending available funds allowed for such grants

from the Child Care Development Fund. Eliminates the required report to the Legislature when changes to the Medicaid program are intended. Allows license fees under the Wholesale Drug Distributor Act to be used for the payment of expenses related to the prescription drug monitoring system.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB380 In Committee

(Fredrickson)

Establish requirements for Department of Health and Human Services' contractors providing medical assistance services

You are: Monitoring

A contractor shall: (a) Not reduce department-posted medicaid rates; (b) Not impose quantitative treatment limitations, or financial restrictions, limitations, or requirements, on the provision of mental health or substance use disorder services that are more restrictive than the predominant restrictions, limitations, or requirements imposed on substantially all benefit coverage for other conditions; (c) Maintain an adequate provider network to provide mental health and substance use disorder services; (d) Apply criteria in accordance with generally recognized standards of care and make utilization review policies available to the public, providers, and recipients through electronic or paper means when performing a utilization review of mental health or substance use disorder services; and (e) Not rescind or modify an authorization for a mental health or substance use disorder service after the provider renders the service pursuant to a determination of medical necessity, except in cases of fraud or a violation of a provider's contract with a health insurer.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB381 In Committee

(Fredrickson)

Change requirements relating to program integrity audits under the Medical Assistance Act

You are: Monitoring

Creates additional rules for audits performed on a Medicaid provider including notice provisions and reasonable time periods for returning requested documentation. Requires review of claims within 1 year (rather than 4); after 1 year from the date of payment, a payment shall not be subject to adjustment, except in the case of fraud by a provider.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB382 In Committee

(Meyer)

Provide for use of the Medicaid Managed Care Excess Profit Fund to reimburse designated area agencies on aging and state intent regarding appropriations

You are: Monitoring

Provides legislative intent to appropriate \$2 million dollars in fiscal year 2025-26 and \$2 million in fiscal year 2026-27 from the Medicaid Managed Care Excess Profit Fund to the area agencies on aging for the purpose of providing additional eligible activities and services as defined in section 81-2222. An equal amount shall be distributed to each of the state's 8 area agencies on aging.

01-16-25 - Date of introduction

01-21-25 - Referred to Health and Human Services Committee

LB386 In Committee

(Storer)

Adopt the Regional Mental Health Expansion Pilot Program Act, provide for videoconferencing of hearings under the Nebraska Mental Health Commitment Act and the Sex Offender Commitment Act, provide for detention of certain persons at mental health beds in jails, and change provisions relating to hearings and rights of confrontation

You are: Monitoring

Requires the Crime Commission to create a regional mental health expansion pilot program to provide funding to one county law enforcement agency to expand mental health beds and encourage cooperation between law enforcement agencies to service the region. The selected agency shall have an existing jail facility with the capacity to add mental health beds; have a history of cooperation with other law enforcement agencies; provide an assessment of the anticipated regional impact of the additional mental health beds on individuals with mental health issues and law enforcement agencies; and cooperate with other counties or law enforcement agencies through a memorandum of understanding to ensure the mental health beds provide a regional benefit. The commission shall identify grant funding and coordinate with the Attorney General to carry out the Act. Permits video-conferencing for hearings before the mental health board. Prohibits convicted sex offenders from being admitted to a mental health bed instead of jail under the Program.

01-17-25 - Date of introduction

01-22-25 - Referred to Judiciary Committee

LB410 In Committee

(Cavanaugh, J.)

Require insurance coverage of prosthetics and orthotics

You are: Monitoring

Requires insurance coverage of medically necessary prosthetics and orthotics. Covers treating medically necessary care, repair, and replacement of prosthetics or orthotics. Does not prohibit the use of deductibles, co-pays, or annual or lifetime limits on coverage.

01-17-25 - Date of introduction

01-22-25 - Referred to Banking, Commerce and Insurance Committee

LB415 In Committee

(Ballard)

Change provisions of the Nebraska Healthy Families and Workplaces Act

You are: Monitoring

Clean-up and clarification of Paid Leave initiative passed via November 2024 ballot initiative. Excludes an individual owner-operator and an independent contractor from the definition of employee under the Nebraska Healthy Families and Workplaces Act. Employees shall begin accruing paid sick time after 80 hours of consecutive employment. Adds that paid sick time provided to an employee on or after Jan. 1, 2025, and before Oct. 1, 2025, shall be counted toward an employer's obligations under the Act. An employer is not obligated to provide additional paid sick time under that Act or to allow an employee to accrue or carry over benefits beyond the employer's existing paid leave policy when the employer makes available an amount of paid leave that equals or exceeds the requirements of the Act. Employers are not required to pay an employee for unused paid sick time upon the employee's separation from employment.

01-17-25 - Date of introduction

01-22-25 - Referred to Business and Labor Committee

LB436 In Committee

(Health and Human Services)

Change provisions of the Nebraska Regulation of Health Professions Act

You are: Monitoring

Amends statutes authorizing the 407 credential review. New language allows the state to regulate an unregulated profession only when unregulated practice is harming or endangering the health, safety, or welfare of the public; removes a requirement that the regulation not impose significant new economic hardship on the public, diminish the supply of qualified practitioners, or otherwise create barriers inconsistent with the public welfare and interest; and includes new language allowing proposed regulation only if it is "adequate and appropriate in order for the state to protect the health, safety, and welfare of the public." Simplifies language for unregulated professions that are prohibited from the full practice of their profession, seeking regulation. States that the scope of practice of a regulated health profession shall only be changed when it would benefit the health, safety, or welfare of the public; the education and training ensures professional competency and protects the health, safety, and welfare of the public; and the state would have adequate means to assure qualifications and competency of licensees and take action for incompetence. Simplifies the requirements for a 407 application, allows for an explanation of "implications" of regulation rather than "costs" of regulation. Amends the 407 technical review committee (TRC) structure, applications for a change in scope of practice would be reviewed by the regulatory entity of that profession, while the existing TRC structure would be used for new entities seeking initial regulation. Allows for a neutral recommendation to the Board of Health by TRCs.

01-21-25 - Date of introduction

01-23-25 - Referred to Health and Human Services Committee

LB437 In Committee

(Riepe)

Repeal the Nebraska Health Care Certificate of Need Act

You are: Monitoring

Outright repeals the Nebraska Health Care Certificate of Need Act (71-5801-71-5870), which regulates allowances for new rehabilitation and nursing home beds. Amends the Nonprofit Hospital Sale Act accordingly.

01-21-25 - Date of introduction

01-23-25 - Referred to Health and Human Services Committee

LB446 In Committee

(Guereca)

Change provisions relating to release of health data and statistical research information

You are: Monitoring

Permits the release of data for quality improvement initiatives and to researchers for quality improvement or statewide quality improvement purposes. Requires the department to publish at least annually on the website analyses of the information received for scientific and public health purposes without disclosing individual identities.

01-21-25 - Date of introduction

01-23-25 - Referred to Health and Human Services Committee

LB455 In Committee

(Hallstrom)

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

You are: Monitoring

Prohibits the disclosure of injury reports to the public except as necessary for the Workers' Compensation Court. Permits employees to waive confidentiality. Permits employees and their attorneys, and employers and their attorneys, and insurance companies to request the report.

01-21-25 - Date of introduction

01-23-25 - Referred to Business and Labor Committee

LB456 In Committee

(Hallstrom)

Provide for a patient's waiver for the release of employee hospital and medical records under the Nebraska Workers' Compensation Act

You are: Monitoring

For workers compensation claims, requires an employee filing a claim to provide a patient waiver allowing the employer or workers' compensation insurer or its representative to obtain all previous hospital and medical records, including patient information forms, concerning the employee's previous treatment with any physician, psychologist, or other medical provider. Protects an employee's records on previous treatment for sexual abuse, HIV, reproductive health conditions, or mental health conditions, unless the employee is seeking coverage for mental health injuries or alcohol or controlled substance abuse.

01-21-25 - Date of introduction

01-23-25 - Referred to Business and Labor Committee

LB462 In Committee

(McKinney)

Change reporting requirements relating to child abuse or neglect, parental rights, and juvenile court jurisdiction

You are: Monitoring

Permits minor children of sufficient maturity, physical condition and mental ability to engage in independent activities, and it is not considered child abuse or neglect. Defines child abuse as placing a child in a situation that endangers the child's physical or mental health, under circumstances such that the danger is sufficiently obvious that a reasonable and prudent person would not cause or permit a child to be in such situation. Requires deprivation of necessities to be willful to constitute child abuse. 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, school employee, 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, 2027, 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. Prohibits the exercise of juvenile court jurisdiction under 43-247(3)(a) or the termination of parental rights under 43-247 because a juvenile is of sufficient maturity, physical condition, and mental ability, and able to engage in independent activities. (Similar to LB271 (McKinney) (2023).)

01-21-25 - Date of introduction

01-23-25 - Referred to Judiciary Committee

LB467 In Committee

(Riepe)

Provide a duty to implement a prior authorization application programming interface under the Utilization Review Act

You are: Monitoring

Requires health carriers or utilization review agents to implement and maintain an prior authorization application programming interface before Jan. 1, 2028.

01-21-25 - Date of introduction

01-23-25 - Referred to Banking, Commerce and Insurance Committee

LB512 In Committee

(Holdcroft)

Adopt the Chemical Abortion Safety Protocol Act

You are: Monitoring

Requires a physician to document their in-person examination prior to providing an abortion-inducing drug, to schedule a follow-up visit for 3-14 days after the drug is provided. Requires the physician to confirm the terminated pregnancy and document adverse events. Requires physicians providing an abortion inducing drug to report to the department information about the encounters, but not include personally identifying information for the woman provided the drug. Relieves the woman provided the drug from liability under the Act.

01-21-25 - Date of introduction

01-22-25 - Holdcroft FA11 filed

Placeholder amendment.

01-22-25 - Holdcroft FA10 filed

Placeholder amendment.

01-22-25 - Holdcroft FA9 filed

Placeholder amendment.

01-22-25 - Holdcroft FA8 filed

Placeholder amendment.
 01-22-25 - Holdcroft FA13 filed
 Placeholder amendment.
 01-22-25 - Holdcroft FA12 filed
 Placeholder amendment.
 01-22-25 - Holdcroft MO18 Indefinitely postpone pursuant to Rule 6, Sec. 3(f) filed
 01-22-25 - Holdcroft MO21 Bracket until June 10, 2025 filed
 01-22-25 - Hunt MO22 Bracket until June 10, 2025 filed
 01-22-25 - Hunt MO23 Recommit to the Health and Human Services Committee filed
 01-22-25 - Hunt MO24 Indefinitely postpone pursuant to Rule 6, Sec. 3(f) filed
 01-22-25 - Holdcroft MO19 Indefinitely postpone filed
 01-22-25 - Holdcroft MO20 Bracket until June 10, 2025 filed
 01-22-25 - Holdcroft MO17 Recommit to the Health and Human Services Committee filed
 01-22-25 - Holdcroft MO16 Recommit to the Health and Human Services Committee filed
 01-23-25 - Referred to Health and Human Services Committee

LB515 In Committee**(Quick)****Provide requirements for certain prescription refills****You are:** Monitoring

Permit pharmacists to dispense emergency refills of no more than 30-day supplies when they obtained the information from the prescription label, a record, in the pharmacy, or a common database. Permissible if the refill is not for controlled substance, is a maintenance medication, and, in their professional judgement, the interruption of therapy would have negative consequences to physical or mental welfare.

01-21-25 - Date of introduction

01-23-25 - Referred to Health and Human Services Committee

LB527 Introduced**(Jacobson)****Adopt the Medicaid Access and Quality Act, redefine health benefit plan under the Nebraska Life and Health Insurance Guaranty Association Act, and change provisions relating to taxes on health maintenance organizations, prepaid limited health service organizations, and insurance companies****You are:** Monitoring

Implements a 6% assessment on HMO premiums to draw down federal funds to enhance medicaid rates paid to nonhospital providers of physical health services, with the goal of attaining an overall 20% increase. Includes additional targeted increases for evaluation and management services as well as labor and delivery services. Provides an additional rate enhancement for physical health care services provided in rural areas. Implements a primary care medical home program by providing at least a \$75 monthly per-member fee to qualified primary care providers to serve as a primary care medical home for target populations. States intent to not lower the practitioner fee schedule rates nor appropriations for medicaid rates below the July 1, 2024 amount.

01-22-25 - Date of introduction

LB532 Introduced**(Kauth)****Require employers to use E-Verify, prohibit knowingly hiring an unauthorized alien, and provide for discipline against employers' licenses****You are:** Monitoring

Requires an employer to use E-Verify. Defines employer as a person engaged in an industry with 25 or more employees for each working day in each of 20 or more calendar weeks. Employer does not include local, state, or federal governmental agencies or political subdivisions or their wholly owned corporations, or an entity that hires a bona fide independent contractor. Provides a process for violations discovered by the Department of Labor, requires notification to any state agency that has issued a license, permit, certificate, approval, registration, charter, or authorization required by law, and such state agency is required to place such employers license on probation for a period of 1 year. Bars employers from knowingly employing an unauthorized alien, including by contracting with a person who employs or contracts with an unauthorized alien. Allows for reinstatement of a state license if the employer demonstrates the alien has been fired and pays a reinstatement fee of \$1,000 or the commission's costs in investigating and enforcing the violation. Bars employees terminated to comply with the act from bringing a civil action for wrongful termination. Requires the Department of Labor to randomly audit employers for compliance. Provides the Department of Labor with investigation and enforcement authority.

01-22-25 - Date of introduction

LB533 Introduced**(Kauth)****Provide requirements relating to clinician-administered drugs under the Pharmacy Benefit Manager Licensure and Regulation Act****You are:** Monitoring

Insurance industry's white-bagging bill regulating requirements on specialty pharmacies shipping clinician-administered drugs. Requires specialty pharmacies to provide access to a pharmacist or nurse 24/7. Requires a PBM or health plan requiring dispensing of clinician-administered drug through a specialty pharmacy to establish and disclose an appeal process. Bars PBMs from requiring a specialty pharmacy to dispense a clinician-administered drug directly to a patient for the patient to transport the drug to a health care provider for administration.

01-22-25 - Date of introduction

LB535 Introduced**(Kauth)****Prohibit assault on a frontline behavioral health provider or health care worker and clarify provisions relating to assault on officers, emergency responders, certain employees, and health care professionals****You are:** Monitoring

Includes health care workers and frontline behavioral health providers to provisions in the criminal code relating to assault on officers. Defines frontline behavior health providers as direct support professionals. Defines health care workers as any person employed by a health care facility. Applies the penalty only when the relevant worker is on duty at their respective facility. Require behavioral health facilities to have signage noting it is a crime to assault a provider.

01-22-25 - Date of introduction

LB553 Introduced**(Riepe)****Change provisions of the Rural Health Systems and Professional Incentive Act****You are:** Monitoring

Adds dietician nutritionist programs in the Rural Health Systems and Professional Incentive Act for student loans or loan repayment.

01-22-25 - Date of introduction

LB554 Introduced**(Riepe)****Create the Nebraska Health Professions Commission****You are:** Monitoring

Creates the Nebraska Health Professions Commission to take on the roles of the previous 407 technical review committee established under the Nebraska Regulation of Health Professions Act. The Commission's powers include the review of proposals, investigating proposals for credentialing health professions or changing the scope of practice regulations, and monitoring and evaluating health care quality and public health impact of any recommended changes enacted by the Legislature. The Commission shall share its recommendations to the HHS Committee of the Legislature and shall detail its finding in a report to be filed with the State Board of Health, the Director of Public Health of the Division of the DHHS, and the chairperson of the HHS Committee. States the intention of the Legislature to appropriate \$300,000 annually to the Commission, \$100,000 of which is to be allocated to support the Health Professions Tracking Service of UNMC in collecting data on practice locations and scope of practice. The commission shall be co-chaired by a representative from a college of public health at Nebraska's largest postsecondary educational institution with a college of medicine and a representative from a research institute focused on population health that operates under the auspice of a different postsecondary educational institution with a college of medicine in Nebraska. Other members shall include (i) the chief medical officer of DHHS; the chairperson of the State Board of Health, and no more than seven additional members designated by the co-chairs of the commission, of whom no more than four shall reside in the three most populous counties in Nebraska and no more than two shall be from the same regulated health profession.

01-22-25 - Date of introduction

LB565 Introduced**(Quick)****Provide and change requirements relating to agency guidance documents****You are:** Monitoring

Provides that the first page of a guidance document (defined as a statement developed by an agency that provides information or direction of general application to the public to interpret or implement statutes or such agency's rules or regulations) shall include a description, including an estimates quantification, of the fiscal impact on state agencies, political subdivisions, and regulated persons or businesses. Adds that an agency shall not issue guidance documents on or after July 1, 2025 and before July 1, 2027 unless required by federal rules or laws. A guidance document is not to impose greater regulations on Nebraska residents or businesses than federal requirements. All guidance documents and provider bulletins issued on or after July 1, 2022 and before July 1, 2025 are revoked pending a formal rulemaking process.

01-22-25 - Date of introduction

LB569 Introduced**(Health and Human Services)****Change duties of the Board of Emergency Medical Services****You are:** Monitoring

Requires the EMS board to annually review and report to the Legislature, instead of once every 5 years. The report shall include aggregate data on the number of emergency medical services telephone calls in Nebraska, the number of emergency medical services calls by EMS organizational status, the total number of EMS calls listed by EMS primary patient caregiver level of care, the average response times for each region, the age range of patients, the nature of each patient complaint, the provider impression for each patient, the disposition of each patient, the number of active EMS providers licensed in Nebraska, and data with comparisons to other national regions or states. Strikes the recommendations of the EMS board from the report.

01-22-25 - Date of introduction

LB570 Introduced

(Cavanaugh, J.)

Provide for scholarships for nursing students**You are:** Monitoring

Requires DHHS to award grants of \$2,500/semester to nursing students who reside in Nebraska; enroll in an approved nursing program leading to an associate degree, diploma, or certificate in nursing or an accelerated bachelor of science in nursing degree; and agree to work for 3 years in Nebraska as a LPN, LRN, or nurse aide. Provides intent to appropriate \$5 million for FY2025-26 to DHHS for this section.

01-22-25 - Date of introduction

LB577 Introduced

(Dorn)

Change licensure requirements for remote dispensing pharmacies and verification requirements for pharmacists**You are:** Monitoring

Requires verification of pharmacy technician data entry to be done by a pharmacist located in a licensed pharmacy in Nebraska.

01-22-25 - Date of introduction

LB583 Introduced

(Spivey)

Change provisions relating to the rate and disbursement of the documentary stamp tax, the Child Care Grant Fund, child care grants, the Military Installation Development and Support Fund, the Affordable Housing Trust Fund, the Innovation Hub Cash Fund, the Economic Recovery Contingency Fund, and the Health Care Homes for the Medically Underserved Fund**You are:** Monitoring

Adds funds to the Child Care Grant Fund. Permits DHHS to award grants to licensed child care providers to maintain and grow programs. Limits grants to \$15,000 and is awarded based on need. Limits eligibility to once every two years. Require DHHS to contract with a statewide organization for grant application processes. Requires funds under the Military Installation Development and Support Fund to be used for funding community-based organizations through the distribution of at least \$100,000 to statewide skill bridge strategy or to attract veterans to Nebraska; and \$100,000 to mental health organizations for veterans. Allocates 5 cents for emerging developers, and 25 cents to special populations and innovation housing programs for each \$1.05 received for the Affordable Housing Trust Fund. Increases doc stamp to \$3.30/\$1,000 (from \$2.25/\$1,000) and allocates money from this fund to various Funds and organizations. Requires funds under the Nebraska Innovation Hub Act to be used for operational support for innovation hubs. Requires the Health Care Homes for the Medically Underserved Fund receive money pursuant to § 76-903.

01-22-25 - Date of introduction

LB610 Introduced

(Bostar)

Change provisions relating to supplemental reimbursement for ground emergency medical transport under the Medical Assistance Act**You are:** Monitoring

Amends the per transport basis for medicaid reimbursement of ground emergency medical transport to the "basis of actual and allowable costs that are federally permissible." Removes outdated language related to federal approvals.

01-22-25 - Date of introduction

LB621 Introduced

(Dover)

State legislative intent regarding appropriations and provide for transfers from the Nebraska Health Care Cash Fund**You are:** Monitoring

Increases transfer from Health Care Cash Fund from \$54 million annually to \$61.65 million annually for the next two years only. Provides legislative intent that an increase of \$7.5 million in fiscal year 2025-26 and fiscal year 2026-27 from the Nebraska Health Care Cash Fund be transferred to DHHS for Program 502, for aid to the federally qualified health centers to fund expanded health care access, including but not limited to, expanding existing lines of service such as behavioral health or dental services, adding new lines of service and locations, purchasing equipment, or completing capital projects. Each FQHC shall receive \$700,000, with the remaining funds to be distributed proportionately based on the previous fiscal year's number of uninsured patients.

01-22-25 - Date of introduction

LB627 Introduced

(Dover)

Provide for a capital construction project for the University of Nebraska**You are:** Monitoring

Provides \$23 million for residential facilities for students in nursing and allied health professions in Norfolk, Nebraska.

01-22-25 - Date of introduction

LB630 Introduced**(Hansen)****Provide and change scope of practice requirements under the Occupational Therapy Practice Act****You are:** Monitoring

Updates the Occupational Therapy Practice Act. Change the definition of electrotherapeutic agent modalities, occupational therapy assistance, and superficial thermal agent modalities. Defines temporary licenses. Sets requirements for licensure examinations under the Occupational Therapy Practice Act. Provides guidelines for what occupational therapist can do. Adds instrument-assisted modalities. Defines aides for occupational therapists. Defines the practice of occupational therapy.

01-22-25 - Date of introduction

LB632 Introduced**(Hansen)****Require a health care facility to dispose of the remains of aborted unborn children****You are:** Monitoring

Requires that health care facilities performing elective abortions provide for "dignified and safe disposal" of the remains of an aborted unborn child. Requires a health care facility dispose of an aborted unborn child by cremation, internment by burial, or, if not possible, as directed by the Board of Health.

01-22-25 - Date of introduction

LB642 Introduced**(Bostar)****Adopt the Artificial Intelligence Consumer Protection Act****You are:** Monitoring

Aims to mitigate algorithmic discrimination by requiring developers and deployers of high-risk artificial intelligence systems to implement reasonable care and transparency measures. Starting Feb. 1, 2026, developers must disclose known risks and provide documentation to assist in compliance with the act. Deployed systems must undergo impact assessments and provide consumers with clear information about their use. The Attorney General is granted exclusive authority to enforce the act, ensuring that consumers are protected from potential discrimination arising from AI systems. Outlines exemptions and does not impose obligations that infringe on individual rights.

01-22-25 - Date of introduction

LB655 Introduced**(Murman)****Provide for medical conscience-based objections****You are:** Monitoring

Allows a health care provider or health care payor to opt out of participation in, or payment for, any health care services if the provider or payor has a conscience-based objection to participation in the health care service. States that a health care provider shall not be discriminated against for declining to participate. Allows a health care provider or health care payor to file a complaint with the Attorney General for violations of this act. Bars civil liability solely for declining to participate. Does not override EMTALA. Bars disciplinary action against a health care provider's license solely because they publicly comment, including on social media, about a health care service or public policy if they are not providing medical advice or treatment to a patient or otherwise violating any other law or rule.

01-22-25 - Date of introduction

LB664 Introduced**(Storer)****Change the Administrative Procedure Act to require agencies to allow for public comment and submissions on proposed rules and regulations and change permissible venue for civil actions challenging rules and regulations****You are:** Monitoring

Requires a state agency proposing changes to rules and regulations to allow the submission of comments either electronically or by mail, and bars the agency from requiring a person wishing to comment to travel to any location. Amends the Administrative Procedures Act to allow a petition be filed in any district court with proper venue, instead of only in Lancaster County district court. Venue is proper in the county where the petitioner resides, where the petitioner's principal place of business is located, Lancaster County, or the county in which the agency has its headquarters. Bars agencies from attempting to restrict venue.

01-22-25 - Date of introduction

LB676 Introduced**(Hansen)****Change and eliminate provisions relating to certified nurse midwives and provide for applicability of the Nebraska Hospital-Medical Liability Act****You are:** Monitoring

Strikes the requirement for a collaboration agreement between a nurse midwife and physician, subject to the control and regulation of the Board of Advanced Practice Registered Nurses. Defines consultation as a process whereby a certified nurse midwife seeks the advice or opinion of a physician or another health care provider. A certified nurse midwife may provide health care services within the midwife's specialty area. A certified nurse midwife shall function by establishing collaborative, consultative, and referral networks as appropriate with other health care professionals. A certified nurse midwife shall refer a patient who requires care beyond the scope of practice of the certified nurse midwife to an appropriate health care provider. Establishes what the practice of a certified nurse midwife may include, but is not limited to. Changes the required accreditation from the American College of NurseMidwives to the Accreditation Commission for Midwifery Education. Updates definitions. Permits certified midwives to provide healthcare in their specialty areas. Adds certified midwives to healthcare provider definition under 44-2803.

01-22-25 - Date of introduction

LB697 Introduced

(Strommen)

Change requirements relating to compounding and delegated dispensing permits under the Pharmacy Practice Act

You are: Monitoring

Amends the Pharmacy Practice Act. Increases the Board of Pharmacy from 5 to 8 members, adding 1 pharmacist (from 4 to 5), 1 pharmacy technician, and 1 public member (from 1 to 2). Bars pharmacy compounding for resale "by an outsourcing facility operating pursuant to 21 U.S.C. 353b or section 71-470." Expands allowance for dispensing of approved formulary drugs and devices by a public health clinic worker or designated health care professional without an onsite pharmacist under a delegated dispensing permit for a public health clinic, if the drug or device is dispensed by a practitioner licensed in Nebraska working in affiliation with a public health clinic pursuant to a delegated dispensing permit.

01-22-25 - Date of introduction

LB698 Introduced

(Strommen)

Change provisions of the Nebraska Healthy Families and Workplaces Act

You are: Monitoring

Carves out kids under 16 and seasonal or temporary agricultural workers from the new paid sick leave requirement. Removes an employee's right to bring a civil action under the Act.

01-22-25 - Date of introduction

LB701 Introduced

(McKinney)

Provide for reimbursement of doula services by the Department of Health and Human Services

You are: Monitoring

Amends the Medicaid statutes to require the department to reimburse providers for doula services by Jan. 1, 2027, with state funds. Requires the department to establish a work group of stakeholders and experts to develop an implementation plan. Sets the composition of the work group. Defines a doula as a trained professional who provides emotional, physical, and informational support for individuals before, during, and after labor and birth. This includes, but is not limited to, attending prenatal visits, support during delivery, and providing resources during the postpartum period. Requires a doula have appropriate training, certification, or experience, as determined by the implementation plan developed by the work group. Prohibits a doula from performing clinical or medical tasks and from diagnosing or treating in any modality.

01-22-25 - Date of introduction

LR10CA In Committee

(Hardin)

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

Beginning Jan. 1, 2028, the State of Nebraska shall impose a retail consumption tax or an excise tax on all new goods and services. The Legislature may authorize political subdivisions to do the same. Requires an exemption for grocery items purchased for off-premises consumption.

01-13-25 - Date of introduction

01-15-25 - Referred to Revenue Committee

LR11CA In Committee

(Hardin)

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

You are: Monitoring

Beginning Jan. 1, 2028, no governmental entity in the State of Nebraska may impose taxes other than retail consumption taxes or excise taxes.

01-13-25 - Date of introduction

01-15-25 - Referred to Revenue Committee

