



## **2006 Summary of Legislative Bills Impacting or of Interest to the Health and Human Services System**

### **LB 85 (Byars) Change Burial Pre-Need Sale Act provisions relating to designation of irrevocable funds.**

LB 85 increases the amount placed in a pre-need burial trust fund that may be designated as irrevocable at the request of the pre-need purchaser. This amount will increase from \$3,000 to \$4,000. The Director of Health and Human Services shall exclude this new amount from the definition of available resources in determining need for public assistance.

The Department of Health and Human Services shall annually increase this new amount on September 1, beginning with the year 2006, by the percentage change in the Consumer Price Index for all Urban Consumers, at the close of the 12-month period ending on August 31 of such year.

LB 85 becomes effective July 14, 2006.

### **LB 454 (Combs) Adopt the Concealed Handgun Permit Act.**

LB 454 will require persons carrying a concealed handgun to inform emergency services personnel. Emergency services personnel may secure the handgun or direct that it be secured if it is necessary for safety. If it has been determined that the person carrying a concealed handgun is not a threat to safety, the emergency service personnel shall return the handgun.

An applicant, under this act, shall not have been found in the previous 10 years to be mentally ill and dangerous person under the Nebraska Mental Health Commitment Act or a similar law of another jurisdiction or not be currently adjudged mentally incompetent.

Also, this bill provides an application process, training and safety requirements, permit process, and criminal penalties.

This bill becomes operative January 1, 2007.

**LB 508 (Schrock) Change provisions relating to water wells.**

LB 508 changes provisions relating to construction or opening of water wells, breaking seals and installation of pumps. Specifically, this bill allows a licensed pump installation contractor or pump installation supervisor to wire pumps and pumping equipment at a water well location to the first control. Also, the breaking of a seal of a water well may be carried out by a state electrical inspector as well as the owner of the well, a certified natural resources ground water technician and certified operator of a public water system or someone under his/her supervision. This bill adds “connecting all wire to the first control” to the definition of installation of pumps and pumping equipment.

In addition, LB 508 changes provisions relating to membership for the Water Well Standards and Contractors’ Licensing Board, the definition of headwater segment of a natural stream, registration and notice requirements for decommissioning of water wells and natural resource district cost-share programs.

LB 508 becomes effective July 14, 2006.

**LB 833 (Byars) Change consultation provisions relating to out-of-state physicians.**

LB 833 changes the classes of persons that are not engaged in the unauthorized practice of medicine. These classes of persons will now include the following:

- Physicians who are licensed in good standing under the laws of another state when contacted via electronic or other medium for consultation (does not include interpretation of a radiological image by a physician who specializes in radiology) with a physician licensed in another state;
- Physicians who are licensed in good standing to practice medicine in another state, but order diagnostic or therapeutic services on an irregular or occasional basis under certain circumstances;
- Physicians who are licensed in good standing to practice medicine in another state and, on an irregular and occasional basis, are granted temporary hospital privileges to practice medicine and surgery at a hospital or other medical facility licensed in this state; and
- Until July 1, 2007, advanced practice registered nurses and certified registered nurse anesthetists practicing their professions and practicing in accordance with the Advanced Practice Registered Nurse Act.

These exceptions do not apply to persons who have had their license applications or licenses denied, refused renewal or disciplined by order of limitation, suspension or revocation.

This bill provides technical changes to the exemption relating to temporary practice rights by the Board of Medicine and Surgery and deletes “surgery” and “surgeon” in current language in this section of law.

LB 833 becomes effective July 14, 2006.

**LB 898 (Preister) Change provisions relating to the Open Meetings Act.**

LB 898 changes open meetings laws relating to closed sessions. Specifically, the subject matter and the reason necessitating the closed session shall be identified in the motion to close. The entire motion as well as the vote of each member on the question of holding a closed session and the time when the close session commenced and concluded shall be recorded in the minutes. If the motion to close passes, then the presiding officer immediately prior to the closed session shall restate on the record the limitation of the subject matter of the closed session.

This bill also requires agenda items to be sufficiently descriptive to give the public reasonable notice of the matters to be considered at the meeting.

Public bodies shall make available at least one current copy of the Open Meetings Act posted in the meeting room at a location accessible to the members of the public. At the beginning of the meeting, the public shall be informed about the location of the posted information.

Lastly, if a citizen files a lawsuit alleging a violation of this act, it shall not be a defense that the citizen attended the meeting and failed to object at such time.

LB 898 becomes effective July 14, 2006.

**LB 915 (Aguilar) Provide standards and procedures for rehabilitation of clandestine drug lab sites.**

LB 915 provides definitions for clandestine drug lab, contaminated property, department, law enforcement agency, methamphetamine and rehabilitation.

A property owner with knowledge of a clandestine drug lab on his/her property shall report this knowledge and location to the local law enforcement agency or the Nebraska State Patrol. This bill also provides reporting requirements of clandestine drug labs for law enforcement agencies and the Nebraska State Patrol.

Local public health departments serving the municipality or county where a clandestine drug lab has been discovered shall monitor the rehabilitation of the contaminated property in accordance with standards and procedures established or approved by the Department of Regulation and Licensure. Also, local public health departments may charge and collect fees from the owner/owners of contaminated property to cover monitoring costs and contract with other local public health departments or other appropriate entities to assist in this monitoring. Upon completion of this rehabilitation, the local public health department shall release the property for human habitation and commercial or other use in a timely manner.

The owner/owners of contaminated property shall not permit human habitation or use of such property until the property has been rehabilitated and released. An owner who knowingly

violates this law may be subject to a civil penalty not to exceed \$1,000. Further, an owner may terminate a lease agreement upon three days written notice if leased property contains a clandestine drug lab.

The Department of Regulation and Licensure shall adopt and promulgate rules and regulations to establish rehabilitation standards. Also, the Department shall enforce the penalty against owners that permit human habitation before rehabilitation and release.

LB 915 becomes effective July 14, 2006.

**LB 940 (Schimek) Create the Office of Homeland Security and the Homeland Security Policy Group and change provisions relating to political parties, polling sites, lobbying and campaign committees.**

LB 940 creates the Office of Homeland Security. The Governor shall appoint the Director of State Homeland Security. The purpose of this office is to ensure preparedness by the State of Nebraska in response to terrorist acts. This office shall coordinate efforts regarding domestic security issues with the U.S. Department of Homeland Security. The Director shall serve as the contact between the state and the U.S. Department of Homeland Security.

LB 940 creates the Homeland Security Policy Group. The Director of State Homeland Security shall serve as the chairperson. This group is charged with assessing strategic alternatives and recommending broad courses of action for the development of comprehensive strategies. The Executive Board shall select one member of the Government, Military and Veterans Affairs and one member of the Appropriations Committee to serve as a nonvoting member. The Governor shall appoint other members of this policy group. In addition, this bill provides reporting requirements relating to federal funds for this policy group and exempts this policy group from the Open Meetings Act.

LB 940 changes provisions relating to the names of political parties, prohibited acts near polling places, definitions regarding political accountability and campaign committee activities.

LB 940 becomes effective July 14, 2006.

**LB 962 (Price) Change an appropriation restriction on the Nursing Faculty Student Loan Cash Fund, limitation of financial assistance under the Rural Health Systems and Professional Incentive Act and provisions relating to education.**

LB 962 allows appropriations from the State General Fund under the Nursing Faculty Student Loan Act.

This bill changes the amount of financial assistance provided through loan repayments pursuant to the Rural Health Systems and Professional Incentive Act. Specifically, the

limitations, in state funds, for physicians, dentists and psychologists are increased to \$20,000 per recipient per year of full-time practice in a designated health profession shortage area and shall not exceed \$60,000 (formerly \$30,000) per recipient. For physician assistants, advanced practice registered nurses, pharmacists, physical therapists, occupational therapists, and mental health practitioners, this limitation is increased to \$10,000 per recipient per year of full-time practice in a designated health profession shortage area and shall not exceed \$30,000 (formerly \$15,000) per recipient.

LB 962 also changes provisions relating to Peru State College, the Coordinating Commission for Postsecondary Education Act and student financial awards.

LB 962 becomes effective July 14, 2006.

**LB 965 (Jensen) Adopt the Long-Term Savings Plan Act, provide an income tax credit and establish the Long-Term Care Partnership Program.**

LB 965 creates the Long-Term Savings Plan. This bill allows taxpayers to set up accounts with approved financial institutions. Qualified individuals are persons who turned 65 years of age or older during the taxable year who have a medical necessity for long-term care, are disabled who have a medical necessity for long-term care during taxable year or turned 62 years of age or older during the taxable year who made payments for long-term care insurance premiums. Qualified individuals may make withdrawals to pay or reimburse long-term care insurance premiums.

The State Treasurer shall select the administrator of the plan or may enter into agreements with banks, loan associations, credit unions or subsidiaries of such entities. If an administrator is selected, participants shall enter into participation agreements with the State Treasurer. If no administrator is selected, the participants may make contributions with the financial institutions the Treasurer has agreements with. A lifetime maximum of \$165,000 may be contributed by the participant. If the participation agreement is canceled or the plan is terminated, a participant may receive the principal amount of all contributions. If an administrator for the plan is selected, the State Treasurer shall be responsible for the administration, operation and maintenance of the plan. However, the state investment officer will have fiduciary responsibility to make all investment decisions.

Federal adjusted gross income shall be reduced by contributions, up to \$2,000 per married filing jointly return or \$1,000 for any other return. Federal adjusted gross income shall be increased by the withdrawals made by a participant in this plan who is not a qualified individual or for reasons other than for long-term care.

LB 965 also establishes the Long-Term Care Partnership Program. This program allows individuals who utilize private insurance coverage for long-term care for a period of time to qualify for Medicaid without having to spend down to normal resource limits. This program shall be administered by HHS Finance and Support in accordance with federal requirements on state long-term care partnership programs. In order to implement this program, the

department shall file a state plan amendment with the federal Centers for Medicare and Medicaid Services pursuant to federal law.

The Long-Term Care Savings Plan Act became operative January 1, 2006 while the Long-Term Care Partnership Program becomes effective July 14, 2006.

**LB 994 (Health and Human Services Committee) Change health and human services provisions.**

LB 994 is the Health and Human Services System (HHSS) “Clean-up” bill. This bill changes provisions in the areas of pharmacy, behavioral health, child care licensing, public assistance, health professions, organization of HHSS, vital records, family health, release of health information, veterans’ homes and the Radiation Control Act.

**PHARMACY:**

LB 994 amends the Wholesale Drug Distributor Licensing Act. New definitions of chain pharmacy warehouse, emergency medical reasons, normal distribution chain, co-licensed products, pedigree, repackage, repackager, wholesale drug distribution, wholesale drug distributor and wholesale medical gas distributor are provided. Manufacturers and wholesale medical gas distributors are exempt from licensing requirements under this act. This bill provides the application process for initial or renewal licenses as a wholesale drug distributor. Designated representatives of wholesale drug distribution facilities are required to provide information prior to the issuance of an initial or renewal license. License fees are provided. Applicants for initial or renewal licenses as a wholesale drug distributor shall submit to the Department of Regulation and Licensure (Department) proof of a bond of not less than \$100,000. Each wholesale drug distributor doing business in this state shall be inspected by the Department. This bill provides requirements relating to exchanges of prescription drugs, furnishing prescription drugs, maintaining records, and electronic pedigrees. Unlawful activities and criminal penalties are provided. Also, this bill exempts wholesale drug distribution from the current credentialing fee structure. This section of LB 994 becomes effective August 1, 2006.

LB 994 requires the Department of Regulation and Licensure to establish an immunosuppressant drug repository program for accepting donated immunosuppressive drugs and dispensing them. Participation in this program shall be voluntary. Definitions are provided. Any person or entity may donate these drugs to a participant or return previously prescribed immunosuppressant drugs to the transplant center where they were originally prescribed. An immunosuppressant drug shall only be accepted or dispensed if such drug is in its original, unopened, sealed and tamper-evident packaging. There are no limitations to number of doses. Immunosuppressant drugs that bear an expiration date prior to date of donation or adulterated or misbranded shall not be accepted. Participants shall comply with state and federal law relating to storage, distribution and dispensing. Drugs under this program shall not be resold. The Department shall, upon the recommendation of the Board of Pharmacy, shall adopt and promulgate rules and regulations to carry out this act. Persons

or entities which exercise reasonable care in donating, accepting, distributing or dispensing these drugs shall be immune from civil and criminal immunity and professional disciplinary actions. Drug manufacturers who donate under this program are not absolved this immunity. This section of the bill became effective April 13, 2006.

#### BEHAVIORAL HEALTH:

This bill creates the Rural Behavioral Health Training and Placement Program Act. Legislative findings relating to behavioral health profession shortage areas are provided. The Rural Behavioral Health Training and Placement Program shall be administered by the Munroe-Meyer Institute at the University of Nebraska Medical Center. This program shall address behavioral health professional shortages in rural areas by offering service learning opportunities, educating physicians to integrate behavioral health into primary care practice, providing outreach clinical training opportunities and placing program graduates in primary care practices. Funding under this act shall support faculty clinical training activities, internship stipends and training and service provision expenses. This section of the bill becomes effective July 14, 2006.

This bill eliminates the State Behavioral Health Council. Also, the State Advisory Committee shall provide advice and assistance which will include, but not be limited to the development, implementation, provision and funding of organized peer support services. Further, this committee shall promote the interests of consumers and their families, including, but not limited to, their inclusion and involvement in all aspects of services design, planning, implementation, provision, education, evaluation and research. This section of the bill becomes effective July 14, 2006.

#### CHILD CARE LICENSING:

This bill requires the Department of Regulation and Licensure to review and provide recommendations to the Governor for updating child care licensing rules and regulations adopted and promulgated at least every 5 years.

The training requirements for child care providers shall include, but not be limited to, information on sudden infant death syndrome, shaken baby syndrome and child abuse.

Language regarding the Early Childhood Interagency Coordinating Council report is moved from Section 71-1917 to Section 43-3402(7).

LB 994 provides clarification to the Child Care Licensing Act. Recreation camps are defined. Language is provided that excludes school age child care services operated only during the summer from licensure. This bill also clarifies that an individual who had a license suspended or revoked for reasons other than nonpayment of license fees shall not provide care to “any number of children” until they are licensed by the state. Finally, this bill clarifies who signs the application when a child care program is owned by a corporation or limited liability company with a sole owner.

The sections of this bill relating to child care licensing become effective July 14, 2006.

#### MEDICAID/PUBLIC ASSISTANCE:

LB 994 updates references to the federal Social Security Act in State Medicaid statutes. This section of the bill becomes operative July 1, 2006.

LB 994 deletes outdated waiver language in the Welfare Reform Act to bring Nebraska into compliance with newly passed federal law (Deficit Reduction Act of 2005). Specifically, the language “to Extend Beyond Eight Weeks Each Year” following the policy of “Permit Job Search” is deleted. “Work experience” is changed from 3 months to 6 months. The reassessment of the comprehensive assets assessment and the self-sufficiency contract if an intensive job search does not result in employment within 3 months is deleted. This portion of the bill became effective April 13, 2006.

#### HEALTH PROFESSIONS:

LB 994 adopts the Physical Therapy Practice Act. Purpose language to update and re-codify these statutes is provided. Physical therapy is redefined. Other definitions include approved educational program, direct supervision, evaluation, general supervision, mobilization or manual therapy, non-treatment-related tasks, physical therapist, physical therapist assistant, physical therapy aide, testing, and treatment-related tasks. This bill provides requirements when a physical therapist or physical therapist assistant use their title.

LB 994 exempts the following classes from unauthorized practice of physical therapy:

- member of another profession who is credentialed by the Department of Regulation and Licensure (Department) and is acting within scope of practice,
- student in an approved educational program who is performing physical therapy and under the direct supervision of a physical therapist,
- person practicing physical therapy or as a physical therapist assistant in this state pursuant to federal regulations,
- person credentialed to practice physical therapy or as a physical therapist assistant in another U.S. jurisdiction or in another country who is teaching physical therapy or demonstrating or providing physical therapy, or
- person employed by a school district, education service unit, or other educational institution or entity providing personal assistance services.

This bill modifies provisions relating to application for licensure for physical therapists and application for certification for physical therapist assistants. Requirements for physical therapists supervising physical therapist assistants or physical therapy aides are provided. This bill provides duties of physical therapists for patients under their care. The department, upon recommendation of the Physical Therapy Board, shall adopt and promulgate rules and regulations to carry out this act.

Sections of this bill pertaining to the Physical Therapy Act become effective July 14, 2006.

LB 994 expands the membership of the Board of Veterinary Medicine and Surgery to include one veterinary technician. This section of the bill became effective April 13, 2006.

LB 994 changes the name of Division of Dental Health to Office of Oral Health and Dentistry. Also, this bill changes the name of chief of the Division of Dental Health to Dental Health Director. This section of the bill became effective April 13, 2006.

LB 994 changes the prescribing authority of nurse practitioners and advanced practice registered nurses (APRN). Language is reinserted that clarifies that the prescriptive authority only relates to health conditions within the APRN's or nurse practitioner's scope of practice. APRNs and nurse practitioners are permitted to prescribe therapeutic measures and medications. Restrictions relating to the prescription of Schedule II controlled substances are removed. This section of the bill becomes effective July 14, 2006.

#### ORGANIZATION OF HHSS:

LB 994 transfers functions and personnel of the Division of Home and Community Services for Aging and Persons with Disabilities from the Department of Health and Human Services to the Department of Health and Human Services Finance and Support. This transfer will become operative July 1, 2006.

LB 994 requires the Governor to appoint a chief administrative officer for the Health and Human Services System. References to the policy secretary are deleted. This section of the bill becomes effective January 1, 2007.

#### VITAL RECORDS:

LB 994 increases the fees for certified copies and searches for vital records from \$7 to \$11. This section of the bill becomes effective July 1, 2006.

#### FAMILY HEALTH:

LB 994 provides technical changes to newborn screening tests. Specifically, the model informed consent form is transferred from the Department of Health and Human Services to the Department of Regulation and Licensure. This section of the bill became effective April 13, 2006.

LB 994 promotes awareness of sudden infant death syndrome and shaken baby syndrome. Information on the prevention of sudden infant death syndrome and shaken baby syndrome will be included in the packet, "Learning Begins at Birth". Legislative findings are provided relating to shaken baby syndrome. Hospitals, birth centers, or other medical facilities that discharge a newborn child shall request that each maternity patient and father view a video presentation and read printed materials, approved by the Department of Health and Human Services (HHS), related to sudden infant death syndrome and shaken baby syndrome. After viewing this presentation and reading these materials, the hospital, birth center or medical

facility shall request the parents, if available, to sign a form. These materials, presentation and forms may be provided by HHS. HHS shall conduct public awareness activities designed to promote the prevention of sudden infant death syndrome and shaken baby syndrome. These sections of the bill became effective April 13, 2006.

#### RELEASE OF HEALTH INFORMATION:

LB 994 modifies the laws on the release of health information.

Restrictions on the re-release of confidential patient information to out-of-state cancer registries are eliminated. Also, current release and acknowledgment provisions do not apply to cancer registries located in another state which receive data through approved data exchange agreements.

Case-specific and patient-identifying data may be released to those individuals or entities who have reported information to the Department of Regulation and Licensure (department). Such data may be released for the purpose of confirming the accuracy of the data provided and to coordinate information among sources.

Upon the request by an official local health department within the State of Nebraska, the department may release such data to the requesting local health department. This data no longer pertains just to the residents within the jurisdiction of the requesting local health department.

Sections of this bill pertaining to release of health information became effective April 13, 2006.

#### VETERANS' HOMES:

LB 994 changes the name of Thomas Fitzgerald Veterans' Home to Eastern Nebraska Veterans' Home. This section of the bill will become effective July 1, 2007.

LB 994 adds the Director of Veterans' Homes to the list of exempt, appointed positions within the Department of Health and Human Services. This section of this bill became effective April 13, 2006.

#### RADIATION CONTROL ACT:

LB 994 changes provisions in the Radiation Control Act.

First, the reference to the Central Interstate Low Level Radioactive Waste Compact Commission in the definition of management of low-level radioactive waste is eliminated.

Second, a new category of limited radiographer in bone densitometry equipment is created. The Department of Regulation and Licensure (Department) is allowed to recognize successful completion of the American Registry of Radiologic Technologists (ARRT)'s Bone Densitometry Equipment Operator Examination as the basis for limited licensure in bone densitometry.

Third, the Department is authorized to take and dispose of impounded radiation sources using options such as making arrangements with the source manufacturer to take it back, disposing of it in a low-level radioactive waste facility or selling it to someone who is appropriately licensed to possess it. Notice requirements are provided. Also, any source of radiation impounded by the department is declared a common nuisance and cannot be subject to a replevin (recovery) action.

Sections of this bill relating to the Radiation Control Act become effective July 14, 2006.

**LB 1039 (McDonald) Provide for and establish limits on expenditure of state lottery revenue.**

The Lottery Division of the Department of Revenue (division) shall spend not less than 5% of the advertising budget for the state lottery on problem gambling prevention, education, and awareness messages. The division shall coordinate these messages with the Compulsive Gamblers Assistance Program. Advertising budget for the state lottery includes amounts budgeted and spent for advertising, promotions, incentives, public relations, marketing, or certain contracts. This bill becomes effective July 14, 2006.

**LB 1060 (Brashear, at Request of Governor) Appropriate funds for state government expenses.**

LB 1060 is the budget bill for this year. Included in this bill are appropriations changes in certain programs of each HHSS agency.

REGULATION AND LICENSURE:

LB 1060 provides appropriations for public health administration and professional licensure. Included in these appropriations is \$100,000 for technical support to local public health departments for pandemic flu response.

HEALTH AND HUMAN SERVICES:

In the Department of Health and Human Services, LB 1060 provides a technical change in the Protection and Safety of Children Division by changing General Fund to Cash Fund.

An appropriation is provided for fire/life safety projects and projects to comply with the federal Americans with Disabilities Act of 1990 at the Norfolk Regional Center pertaining to

LB 1199, sex offender legislation. This appropriation pertains to LB 1199 (2006), sex offender legislation.

An appropriation of \$75,000 is provided to the Office of Juvenile Services to develop a Request for Proposals and contract for a review and update of the 1999 facilities master plan for the juvenile services system.

Also, this bill provides appropriations changes in mental health operations, Veterans' Homes and the Beatrice State Developmental Center.

FINANCE AND SUPPORT:

LB 1060 provides the General Fund appropriation of \$132,327 for FY2005-06 and \$667,572 for FY2006-07 for Medicaid reform initiatives. These reform initiatives consist of the Mental Health Drugs Best Practices Program, Preferred Drug List/Pooling Study, Partial-Month Eligibility, Parental Buy-In to Specialized Programs, Public Education on Health System/Medicaid, Targeted Medicaid Public Health Education, Long-Term Care Rates Study, Long-Term Care Assessment Tool, Cash and Counseling Pilot, Home and Community-Based Advisory Committee, and Long-Term Care Technology Study. Also, this appropriation includes health insurance premium adjustments.

LB 1060 provides General Fund appropriations to the Health Aid program. Specifically, \$750,000 is appropriated to the Ryan White AIDS Program. \$65,000 is appropriated to Citizen Advocacy.

In the Behavioral Health Aid program, there is included in the amount shown as General Fund aid \$4,008,017 General Funds for FY2006-07 to be used for an annual 3.25% increase in rates paid to providers of mental health and substance abuse services, which funds shall only be used for such purpose.

It is the intent of the Legislature that phased-down state contributions to the federal government as defined and required by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 may be made from appropriations to the Children's Health Insurance and Medicaid program.

In addition, LB 1060 provides appropriations changes for the programs: public health aid, developmental disability aid, medical assistance, public assistance, children's health insurance, rural health, and behavioral health.

LB 1060 became effective April 14, 2006.

**LB 1061 (Speaker, at Request of the Governor) Create and transfer funds.**

LB 1061 eliminates obsolete fund transfer language relating to the Department of Health and Human Services Cash Fund, Behavioral Health Services Fund, and Attorney General Child Protection Cash Fund. This bill became effective April 4, 2006.

**LB 1069 (Byars) Change regulated motor carrier provisions relating to transportation of certain persons.**

The Department of Health and Human Services Finance and Support (Department) may reimburse an individual for the costs incurred by such individual in the transportation of a person eligible to receive transportation services through the Health and Human Services System (HHSS) if:

- the individual is under contract with HHSS and provides transportation to the eligible person and
- the eligible person has chosen the individual to provide the transportation.

The Department shall reimburse for the costs incurred in the transportation at a rate no greater than that provided for reimbursement of state employees.

Transportation provided to an eligible person by an individual does not constitute transportation for hire.

The Department may adopt and promulgate rules and regulations.

LB 1069 becomes effective July 14, 2006.

**LB 1086 (Synowiecki) Adopt the Nebraska Prostitution Intervention and Treatment Fund Act, change provisions relating to prostitution and prohibit forced labor.**

LB 1086 creates the Nebraska Prostitution Intervention and Treatment Act. Legislative findings are provided. This bill provides intent language relating to funding for education and treatment of individuals involved in prostitution-related activities. The Legislature shall appropriate funds to create a coordinated program of education and treatment for individuals that participate in prostitution-related activities. The Department of Health and Human Services (Department), in consultation with the regional behavioral health authorities, shall distribute funds to regional behavioral health authorities that can demonstrate a high incidence of prostitution. In making this determination, the Department may consider number of criminal convictions for these activities, evidence that these activities are negatively impacting residents, amount of local law enforcement resources devoted in curtailing this activity, evidence that the regional behavioral health authorities have consulted with these neighborhoods and the amount of local subdivision treatment funding. Each regional behavioral health authority may contract with qualifying entities for providing treatment and education. Such qualifying entities may obtain additional funding from cities

and counties to provide these services. The Department shall adopt and promulgate rules and regulations to carry out this act.

LB 1086 changes and provides penalties relating to prostitution, provides for the crime of solicitation of prostitution and changes provisions relating to testimony.

LB 1086 prohibits persons from knowingly subjecting or attempting to subject another person to forced labor or services. No person shall knowingly recruit, entice, harbor, or transport a minor for purposes of commercial sexual activity, sexually-explicit performance or production of pornography. Definitions and criminal penalties are provided. Reporting requirements are provided for the Attorney General and the Department of Health and Human Services.

LB 1086 becomes effective July 14, 2006.

**LB 1107 (Thompson) Permit students to self-manage diabetes at schools and related activities.**

Schools shall allow a student with diabetes to self-manage his/her diabetic condition. A written request of the student's parent or guardian and authorization of the student's physician, receipt of a signed statement relating to the schools' immunity from civil actions and diabetes medical management plan are required. Upon receipt of this written request, the school, parent or guardian, in consultation with a physician, shall develop a diabetes medical management plan. As part of this plan, a student with a diabetic condition is permitted to self-manage his/her diabetic condition in the classroom or in any part of the school. If the student has endangered himself/herself through misuses of such medical supplies, the school may prohibit the possession of these medical supplies. Parents or guardians are responsible for any costs associated with an injury of a student or school personnel caused by the misuse of these medical supplies. This bill becomes effective July 14, 2006.

**LB 1113 (Bourne) Change provisions relating to civil and criminal regulation.**

FOREIGN NATIONAL MINORS:

LB 1113 requires the Department of Health and Human Services (department), in conjunction with the appropriate consulate, to provide a method of early identification of foreign national minors and minors holding dual citizenship and their families. When a court makes a minor a ward of the department, the department shall determine whether the minor is a foreign national minor or minor holding dual citizenship. If the minor fits these categories, the department shall provide this minor or parents/custodians information on the juvenile process and the nearest consulate. The department shall notify the appropriate consulate in writing. This notice shall be within 10 working days after initial date of custody, parent's request that consulate be notified or the determination that a non-custodial parent resides in the country represented by the consulate. The department shall provide the consulate with

the name and date of birth of these minors, parents' names and name/phone number of caseworker. The consulate may request additional information from the department, conduct interviews and assist the department in completing applications for special immigrant juvenile status. The department may obtain a birth certificate from the appropriate country for these minors. The department shall work with the consulate regarding home studies, welfare services, court appearances and the protection and well-being of these minors. The department may adopt and promulgate rules and regulations to carry out this act. There is no waiver of immunity under federal law, international law and international treaties between the U.S. and foreign countries for a consulate or a consulate's agent.

#### AUTOPSIES:

LB 1113 changes provisions relating to autopsies performed by the county coroner or coroner's physician. This bill requires the Attorney General to create guidelines for county coroners or coroner's physicians regarding autopsies on persons younger than 19 years old. No cause of death shall be certified as sudden infant syndrome unless an autopsy, a death scene investigation and review of the child's medical history reveal no other possible cause. Counties may request reimbursement from the Attorney General for the cost of an autopsy.

#### CHILD ADVOCACY CENTERS:

LB 1113 changes provisions relating to child abuse and neglect investigations. The child advocacy centers (CACs) in Nebraska are formally recognized and given a defined statutory role in the child abuse investigation process. Specifically, this bill provides the following:

- Each county or contiguous group of counties will be assigned by HHS to a CAC.
- Each CAC shall meet accreditation criteria from the National Children's Alliance.
- County attorneys are responsible for convening the child abuse and neglect investigation team (team) and ensuring that protocols are established and implemented.
- A representative of the CAC assigned to the team shall assist the county attorney in facilitating case review, developing and updating protocols and arranging training opportunities.
- Each team must have protocols that includes procedures for arranging a videotaped forensic interview at a CAC for children 16 years or younger who are alleging sexual abuse/serious physical abuse or neglect, who have witnessed a violent crime, been removed from a clandestine drug lab or been recovered from kidnapping; and responding to drug-endangered children.
- A child protective services representative from HHS shall be on the team.
- Statutes allowing the sharing of confidential information concerning juveniles with the team are amended to include the Attorney General and child advocacy centers.

#### SOCIAL SECURITY NUMBERS IN COURT DOCUMENTS:

LB 1113 deletes references to social security numbers in certain court documents. Social security numbers will not be included in a dissolution decree or support order, but will still be provided to the court. Regarding dissolution decrees, the social security number of each

parent and the minor child shall be furnished to the clerk of the district court. The social security number of the declared father of the child shall be furnished to the clerk of the district court in a document accompanying the judgment. The language, “accompanying documents” is also added to domestic relations orders.

#### DETENTION OF JUVENILES:

LB 1113 changes juvenile detention provisions. Juvenile offenders under an order continuing placement or detention are entitled to have a hearing within 48 hours. Further, this bill clarifies that any juvenile taken into custody may request a detention review hearing. This review hearing shall be conducted within 48 hours. In addition, if a juvenile is placed in detention after the initial level of treatment is determined by the committing court, this court shall hold a hearing every 14 days to review the status of the juvenile. Finally, placement of a juvenile in detention shall not be considered as a treatment service.

#### CHILD SUPPORT ADVISORY COMMISSION:

LB 1113 changes provisions relating to the State Disbursement and Child Support Advisory Commission. This commission is renamed the Child Support Advisory Commission. Membership provisions are changed to allow the Supreme Court to appoint the two district court judges. Two members of the Legislature are struck and replaced by the chairpersons of the Judiciary Committee and the Health and Human Services Committee. The Judiciary Committee chairperson shall now chair this commission. The vendor operating this commission is replaced by the State Treasurer. The Supreme Court shall notify the Executive Board chairperson of its intent to review the child support guidelines and this commission’s chairperson will then call a meeting. Appointment of new members will occur when this commission meets. The scope of this commission’s review is limited to the child support guidelines.

#### OTHER:

This bill also allows a natural resource district to provide public access for recreational use at water projects, changes Nebraska’s DNA database, amends the crime of stalking, changes laws on administrative subpoenas and interception orders relating to sexual assault crimes, exempts DNA laboratories from purging of records, clarifies language relating to obscene literature and provides changes to the Community Corrections Council.

LB 1113 becomes effective July 14, 2006.

#### **LB 1115 (Bourne) Change provisions relating to legal processes and reporting.**

#### FOSTER PARENTS:

LB 1115 clarifies notice requirements for courts reviewing foster care placements. Specifically, notice of the court review and right of participation involving foster care placements shall be provided by the court to *all of the following that are applicable to the*

*case*: person charged with care of child, parent/guardians, foster care child if 14 years or over, foster parent or parents of foster child, guardian ad litem, state board, pre-adoptive parent and the relative providing care for the child. Notice to the foster care parent, pre-adoptive parent, or relative providing care shall not be construed to require *each is a necessary party* to the review. Also, the court may inquire into the well-being of the foster child by asking questions of the foster parent, pre-adoptive parent, or relative providing care for the child.

#### VITAL STATISTICS:

LB 1115 provides that an abstract of marriage may be used in place of a certified copy of a marriage license for providing proof of marriage to all courts and to HHSS. An abstract of marriage is defined as a certified document that summarizes the facts of marriage, including, but not limited to, the name of the bride and groom, the date of the marriage, the place of the marriage and the name of the office filing the original marriage license. An abstract of marriage does not include signatures. These sections of LB 1115 become operative January 1, 2007.

#### INFECTIOUS DISEASES:

LB 1115 changes infectious disease testing provisions when the state is a guardian of the patient. School district employee is included in the definitions of emergency services provider and public safety official. The juvenile code is amended to provide that the district court shall have exclusive jurisdiction over juveniles in cases involving infectious diseases. The district court's sovereign immunity shall be limited in these cases.

#### ADMINISTRATIVE PROCEDURE ACT:

LB 1115 amends the Administrative Procedure Act. Specifically, this bill requires an agency to affirm, modify, or reverse its findings and decision in a case by reason of additional proceedings and file the decision following remand with the reviewing court. The agency shall serve a copy of the decision following remand upon all parties to the district court proceedings. The agency decision following remand shall become final unless a petition for further review is filed with the reviewing court. Copies of petitions for further review shall be served upon all parties to the district court proceeding. After the service of these petitions, the agency shall prepare and transmit to the court a certified copy of the official record of the additional proceedings. Also, the physical custody of an agency record, for contested cases, shall be maintained by the agency. The agency shall permit the parties to inspect the agency record and obtain copies of the agency record.

#### OTHER:

LB 1115 changes provisions relating to civil proceedings, the Court of Appeals and county courts, marriage ceremonies, the Nebraska Rules of Professional Conduct, audiovisual court appearances, conflict of state laws and payment or delivery of money or personal property to a minor.

With the exception of the provisions relating to abstract marriages, this bill becomes effective July 14, 2006.

**LB 1116 (McDonald) Change provisions of the Cancer Drug Repository Program Act.**

LB 1116 provides that there shall be no limitation on the number of doses that can be donated to the program as long as the donated drugs meet the requirements of current law. An injectable cancer drug may be accepted if it does not have temperature requirements other than controlled room temperature.

LB 1116 changes expiration dates of these drugs. Cancer drugs shall not be accepted or dispensed under this program if such drug bears an expiration date prior to the date of donation or such drug has expired while in the repository.

This bill also modifies the forms for administering this program by including the name of the person to whom the drug was originally prescribed.

This bill becomes operative July 1, 2006.

**LB 1126 (Business and Labor Committee) Provide for payment of claims for state.**

LB 1126 consists of approved agency write-offs and claims against the state that have been approved for payment by the State Claims Board. This bill includes write-offs filed by the Health and Human Services System that have been reviewed and approved by the State Claims Board.

This bill became effective April 4, 2006.

**LB 1148 (Cornett) Provide for student self-administration of asthma or anaphylaxis medication at school or related activities.**

LB 1148 requires schools to allow a student with asthma or anaphylaxis to self-manage his/her condition. Students must have a written request of their parents/guardian, authorization of their physician, receipt of a signed statement relating to schools' immunity from liability, and a management plan. Upon the receipt of a written request and authorization from a physician, the school and parent/guardian, in consultation with the student's physician, shall develop an asthma or anaphylaxis medical management plan for the student for the current school year. The requirements of this plan are provided. Pursuant to this plan, the student shall be permitted to self-manage their condition in the school. The school nurse or designees shall be notified by the student about their medication. Disciplinary action is provided for misuse of this medication. Immunity from civil liability is provided for nurses and their designees. This bill becomes effective July 14, 2006.

**LB 1178 (Jensen) Change reporting requirements for the brain injury registry.**

LB 1178 requires each hospital and each rehabilitation center located within a hospital in the State of Nebraska to annually report to the Department of Regulation and Licensure a brain or head injury which results in admission or treatment.

LB 1178 deletes the reporting requirements of race and ethnicity. This report will still require cause of injury, but it must be practicable, whether the injury resulted from an accident involving the use of alcohol.

This bill becomes effective July 14, 2006.

**LB 1199 (Bourne) Change provisions relating to sex offenders.**

LB 1199 provides crimes and penalties regarding sexual assault of a child, provides civil commitment for sex offenders, provides for community supervision of sex offenders, changes provisions of the Sex Offender Registration Act, adopts the Sexual Predator Residency Restriction Act and establishes a working group to study sex offender treatment and management services.

CRIMES AND PENALTIES:

A person commits sexual assault of a child in the first degree if he or she subjects another person under 12 years old to sexual penetration and the actor is at least 19 years of age or older. Sexual assault of a child in the first degree is a Class IB felony with a mandatory minimum sentence of 15 years in prison for first offense. Any person who is found guilty of sexual assault of a child in the first degree under this section of law and who has prior convictions of sexual assault shall be guilty of a Class IB felony with a mandatory minimum sentence of 25 years in prison.

Sexual assault of a child is in the second degree if the actor causes serious personal injury to the victim. Sexual assault of a child in second degree is a Class II felony for the first offense. Any person found guilty of this offense and who has prior convictions of sexual assault shall be guilty of a Class IC felony and shall be sentenced to a mandatory minimum term of 25 years in prison.

Sexual assault of a child is in the third degree if the actor does not cause serious personal injury to the victim and is a Class IIIA felony for the first offense. Any person who is guilty of this offense and has prior sexual assault convictions shall be guilty of a Class IC felony.

Time limitations for prosecution or punishment will not apply to these sexual assault crimes.

CIVIL COMMITMENT:

LB 1199 provides a process for emergency protective custody of dangerous sex offenders. Such persons shall be admitted to an appropriate and available medical facility unless they have a prior sex offense conviction. If such persons have a prior sex offense conviction, they shall be admitted to a jail or Department of Corrections unless a medical or psychiatric emergency exists.

LB 1199 adopts the Sex Offender Commitment Act. The purpose of this act is to provide for the court-ordered treatment of sex offenders who completed their sentences, but continue to pose a threat of harm to others. It is the public policy of this state that dangerous sex offenders be encouraged to obtain voluntary treatment. This act provides for the civil commitment of dangerous sex offenders. The procedures such as filing of petition, mental health board hearings, treatment orders, commitments, execution of warrant and rules of evidence mirror the current Mental Health Commitment Act. The language, Sex Offender Commitment Act, is incorporated into the current mental health commitment statutes.

At least 90 days prior to the release of a sex offender, the agency with jurisdiction over such individual shall notify the Attorney General, Nebraska State Patrol, prosecuting county attorney and the county attorney in which an individual is incarcerated, supervised or committed. Also, the Board of Parole shall notify these same parties within 5 days after scheduling a parole hearing. Further, a county attorney shall, no later than 45 days after receiving notice of the pending release of a sex offender, notify the Attorney General whether he/she intends to initiate civil commitment proceedings against such individual upon their release.

LB 1199 creates a separate legal standard for sex offenders. This standard defines dangerous sex offender as a person:

- who suffers from a mental illness which makes the person likely to engage in repeat acts of sexual violence, who has been convicted of one or more sex offenses and who is substantially unable to control his/her criminal behavior or
- with a personality disorder which makes the person likely to engage in repeat acts of sexual violence, who has been convicted of two or more sex offenses and who is substantially unable to control his/her criminal behavior.

This bill requires the Department of Corrections to order evaluations for offenders convicted of first degree sexual assault, repeat offenders, child predators who refuse treatment and offenders who have violated the Sex Offender Registration Act. This evaluation shall be ordered at least 180 days before the release of the individual. Upon completion of this evaluation, this department shall send written notice to the Attorney General, county attorney of the county where the offender is incarcerated and the prosecuting county attorney. An affidavit of the mental health professional shall be included in the notice.

#### COMMUNITY SUPERVISION:

LB 1199 provides for lifetime community supervision of sex offenders. Upon completion of his/her term of incarceration or release from civil commitment, the following classes of sex offenders will be supervised in the community by the Office of Parole Administration (Office) for the remainder of his/her life:

- Repeat sex offenders,
- offenders convicted of sexual assault of a child in the first degree or
- offenders convicted of penetration of a victim 12 years or more through the use of force or threat of serious violence or victim under the age of 12 years of age.

Lifetime community supervision applies to any of these individuals, on or after the effective date of this act.

The agency or political subdivision which has custody of such individuals shall notify the Office at least 60 days prior to release. Such individuals shall undergo a risk assessment and evaluation by the Office. Conditions of community supervision imposed by the Office are provided.

Individuals that violate one or more of the conditions of community supervision shall undergo a review by the Office. The Office may revise or impose additional conditions, request prosecution by Attorney General or county attorney or recommend civil commitment. Criminal penalties are provided.

LB 1199 provides duties for parole officers. Also, this bill provides notification and supervision duties for the Office. Such individuals are entitled to an appeal whenever there is a determination or revision of conditions of community supervision. An appeal process is provided. In addition, notification requirements to such individuals are provided for the sentencing court.

Prior to the release of a person serving a sentence for an offense requiring lifetime community supervision, the Department of Corrections, Department of Health and Human Services, or city or county correctional or jail facility shall provide written notice that he/she shall be subject to lifetime community supervision by the Office. This notice shall inform the person that he/she is subject to lifetime community supervision, consequences of violations of conditions and right to challenge the determination of the conditions. Also, these agencies or county/city jails must require the defendant to read and sign a form stating they understand these conditions and retain a copy of the written notification.

#### SEX OFFENDER REGISTRATION ACT:

LB 1199 expands the list of offenses that require registration under this act. Specifically, the offenses of sexual assault of a child in second or third degree, sexual assault of a child in the first degree and debauching a minor are included. Also, any person who enters the state and is required to register as a sex offender under the laws of another state, territory, commonwealth or other U.S. jurisdiction must register in this state.

LB 1199 clarifies the reporting requirements of sex offenders under this act. Within 5 working days, persons under this act must notify, in writing, the sheriff of any changes in address, employment, vocation, school of attendance, temporary domicile, and name change.

LB 1199 provides additional requirements for courts and the Department of Corrections relating to informing the defendant that fingerprints and a photograph will be obtained by any registering entity in order to comply with the registration requirements.

Public notice provisions are expanded to allow disclosure of information of sex offenders under community supervision to the Office of Parole Administration. Also, information of sex offenders working at or attending a postsecondary educational institution must be disclosed to law enforcement or campus police.

This bill increases the penalty for second convictions for failing to comply with this act. Also, persons who have violated this act and have been committed to the Department of Corrections are required to attend treatment and counseling programs.

#### SEXUAL PREDATOR RESIDENCY RESTRICTION ACT:

This bill allows a political subdivision to enact an ordinance, resolution, or other legal restriction prescribing where sex offenders may reside only if the restrictions are limited to sexual predators and extend no more than 500 feet from a school or child care facility. Exemptions for correctional institutions, treatment facilities and dates of establishing a residence are provided. Ordinances, resolutions or other legal restrictions are void if they do not meet the requirements of this act.

#### SEX OFFENDER WORKING GROUP:

The Director of Regulation and Licensure shall establish a working group to study sex offender treatment and management services and recommend improvements. This working group shall include a member of the Legislature appointed by the Executive Board of the Legislative Council. The Governor shall appoint a representative from HHS, Corrections, Probation System, Board of Parole, law enforcement, courts, private providers of this treatment, and victim advocates. Also, the Governor shall appoint a licensed psychologist, licensed alcohol and drug counselor and sex offender participating in a treatment program. Other interested persons may be appointed in a nonvoting capacity as needed.

This working group shall study sex offender treatment and management on the state level to determine future legislative and executive actions. These actions shall be based on the recommendations of the 2001 Governor's Working Group on the Management and Treatment of Sex Offenders report involving credentialing of professionals providing this treatment, mandated treatment standards and increased training opportunities for these professionals.

The Director of Regulation and Licensure, in consulting with this working group, shall submit a report of this study to the Legislature and Governor by December 1, 2006. This working group terminates on December 1, 2006.

LB 1199 becomes effective July 14, 2006.

**LB 1248 (Jensen) Adopt the Medical Assistance Act.**

The purposes of this act are to:

- reorganize and recodify statutes relating to the medical assistance program,
- provide for implementation of the Medicaid Reform Plan,
- clarify public policy relating to the medical assistance program,
- provide for administration of the medical assistance program within the department, and
- provide for legislative oversight and public comment regarding the medical assistance program.

This section establishes the medical assistance program which shall also be known as Medicaid.

The following findings by the Legislature are provided:

- many low-income Nebraska residents have health care and related needs and are unable, without assistance, to meet such needs,
- publicly funded medical assistance provides essential coverage for necessary health care and related services for eligible low-income Nebraska children, pregnant women and families, aged persons, and persons with disabilities,
- publicly funded medical assistance cannot meet the health care and related needs of all low-income Nebraska residents,
- the State of Nebraska cannot sustain a rate of growth in medical assistance expenditures that exceeds the rate of growth of General Fund revenue,
- policies must be established for the medical assistance program that will effectively address the health care and related needs of eligible recipients and effectively moderate the growth of medical assistance expenditures, and
- publicly funded medical assistance must be integrated with other public and private health care and related initiatives providing access to health care and related services for Nebraska residents.

LB 1248 states the public policy. It is the public policy of the State of Nebraska to provide a program of medical assistance on behalf of eligible low-income Nebraska residents that:

- assists eligible recipients to access necessary and appropriate health care and related services,

- emphasizes prevention, early intervention, and the provision of health care and related services in the least restrictive environment consistent with the health care and related needs of the recipients of such services,
- emphasizes personal independence, self-sufficiency, and freedom of choice,
- emphasizes personal responsibility and accountability for the payment of health care and related expenses and the appropriate utilization of health care and related services,
- cooperates with public and private sector entities to promote the public health,
- cooperates with providers, public and private employers, and private sector insurers in providing access to health care and related services and encouraging and supporting the development and utilization of alternatives to publicly funded medical assistance for such services,
- is appropriately managed and fiscally sustainable, and
- qualifies for federal matching funds under federal law.

LB 1248 provides technical changes. Also, this bill provides that any reference in the Medical Assistance Act to the federal Social Security Act or other acts or sections of federal law shall be to such federal acts or sections as they existed on April 1, 2006.

LB 1248 provides definitions of committee, department, director, Medicaid Reform Plan, Medicaid state plan, provider and waiver.

LB 1248 provides the following duties and authority:

- The department (HHS Finance and Support) shall administer the medical assistance program.
- The department may enter into contracts and interagency agreements, adopt and promulgate rules and regulations, adopt fee schedules, apply for and implement waivers and managed care plans, and perform such other activities as necessary and appropriate to carry out its duties under this act.
- The department shall maintain the confidentiality of information relating to Medicaid.
- The department shall prepare a biennial summary and analysis of the medical assistance program for legislative and public review. Timelines for this report are provided.

LB 1248 establishes reporting requirements relating to Medicaid rules and regulations, state plan amendments and waivers:

- All contracts, agreements, rules and regulations relating to Medicaid entered into before the operative date of this act shall remain in effect until revised, amended, repealed or nullified pursuant to law.
- The Department shall provide a report to the Governor, Health and Human Services Committee (committee) and the Medicaid Reform Council (council) summarizing the purpose, content, and impact of proposed rules and regulations relating to Medicaid.
- The committee or council may conduct a public meeting on this report and shall provide any comments and recommendations in writing to the department. The department shall promptly respond in writing to these comments and recommendations to the committee or council.

- The department shall monitor and report, at least annually, to the Governor, Legislature and council on the implementation of rules and regulations, Medicaid state plan amendments and Medicaid waivers and the effect of such on eligible Medicaid recipients and Medicaid expenditures.

LB 1248 revises language relating to sources of Medicaid funding and payment for services.

LB 1248 establishes federal mandatory services as mandatory in Nebraska and federal optional services as optional in Nebraska.

LB 1248 provides the following changes relating to limits on Medicaid-covered services:

- The department may establish premiums, co-payments, and deductibles; limits on the amount, duration, and scope of goods and services; and requirements for recipients of Medicaid as a necessary condition for the continued receipt of such assistance.
- In establishing, prioritizing and limiting coverage for services under this program, the department shall consider the effect, public policy of this act, experience and outcomes of other states, nature and scope of federally recognized benchmark or benchmark-equivalent health insurance coverage, and other relevant factors as determined by the department.
- Current coverage of these mandatory and optional services shall remain in effect until revised, amended, repealed or nullified pursuant to law. Any proposed reduction or expansion of these services or limitation of services is subject to the reporting requirements of this bill.
- Proposed rules and regulations relating to establishment of premiums, co-payments, deductibles or limits on amount, scope or duration of covered services shall not become effective until the conclusion of the earliest regular session of the Legislature in which there has been a reasonable opportunity for legislative consideration of such rules and regulations. This requirement does not apply to rules and regulations required by federal or state law, related to a waiver in which recipient participation is voluntary or proposed due to a loss of federal matching funds. Legislative consideration includes, but is not limited to, the introduction of a bill, resolution or amendment relating to such rules and regulations.

LB 1248 makes technical changes to provisions regarding public awareness activities relating to the children's health insurance program (CHIP).

LB 1248 provides for applications for Medicaid, notification of any eligibility decisions, and the right of appeal from eligibility decisions.

LB 1248 makes technical changes to Medicaid eligibility provisions.

LB 1248 establishes the Medicaid Reform Council. The council shall consist of 10 people appointed by the chairperson of the HHS Committee, in consultation with the committee, Governor and director. This section provides language on membership, appointment of chairperson, duties and this section terminates on June 30, 2010.

LB 1248 also provides the following:

- Legislative intent is provided to implement program reforms such as for aged and disabled persons as those contained in the Medicaid Reform Plan, including an incremental expansion of Home and Community based services and an increase in care coordination and disease management programs for high costs recipients.
- The department shall develop recommendations relating to the provision of health care and related services for Medicaid-eligible children under CHIP. The department shall provide a draft report of such recommendations to the committee and the council. The council shall conduct a public meeting and provide any comments and recommendations to the director and committee. The department shall provide a final report to the Governor, committee and council on December 1, 2007.
- The department shall develop recommendations relating to the defined benefit structure of the Medicaid program. The department shall provide a final report to the Governor, committee and council on December 1, 2008.

LB 1248 requires the Health and Human Services Committee to provide for an independent study and actuarial analysis of the impact of behavioral health insurance parity legislation in Nebraska. A report of this study and analysis shall be submitted to the Governor, Health and Human Services Committee and the Banking, Commerce and Insurance Committee on or before December 1, 2006.

LB 1248 became effective April 14, 2006.

**LB 1256 (Brashear) Create the Nebraska Childhood Endowment and authorize a board of trustees.**

LB 1256 creates the Nebraska Early Childhood Education Endowment. Funding for early childhood programs is provided. Duties for the Department of Education are provided. The Early Childhood Education Endowment Board of Trustees is created to administer the grant program. This board of trustees shall consist of the Commissioner of Education or his/her designee, the Director of Health and Human Services or his/her designee and the following persons appointed by the Governor: two persons nominated by the endowment provider, an early childhood professional representing an urban at-risk area and an early childhood professional representing a rural at-risk area. Terms and elections of the board members are provided. This bill becomes effective July 14, 2006.