

2014 Summary of Legislative Bills Passed into Law Impacting DHHS

May 19, 2014

LB 76 (Nordquist) Adopt the Health Care Transparency Act.

This bill creates the Health Care Data Base Advisory Committee. This committee shall make recommendations to the Director of Insurance regarding the Health Care Data Base. This committee is comprised of several members from the health care field (i.e. hospitals, health care providers, health insurers). This bill requires the Director of the Medicaid and Long-Term Care Division or his/her designee and the Director of the Public Health Division or his/her designee to serve as ex officio members of this committee.

This bill became effective February 14, 2014.

LB 254 (Adams) Eliminate a termination date for insurance coverage for anti-cancer medication and provide insurance coverage for autism spectrum disorder and funding for amino acid-based elemental formulas.

This bill eliminates a termination date for insurance coverage for anti-cancer medication. This section of the bill becomes effective July 18, 2014.

This bill requires insurance policies and benefit plans to provide coverage for the screening, diagnosis and treatment of autism spectrum disorder in an individual under 21 years of age. Coverage for behavioral health treatment is subject to a maximum limit. Insurers shall have the right to review of the treatment. This section of the bill becomes effective July 18, 2014.

This bill requires the Department to establish a program to provide amino-based elemental formulas. These formulas shall be used for the diagnosis and treatment of Immunoglobulin E and non-Immunoglobulin E mediated allergies to multiple proteins, food-protein-induced enterocolitis syndrome and other disorders of the gastrointestinal tract when the ordering physician has issued a written order that this formula is medically necessary for this treatment. Up to 50% of the actual out-of-pocket cost, not to exceed \$12,000, for these formulas shall be available to an individual without fees each 12-month period. The Department shall distribute funds on a first-come, first-served basis. Nothing in this bill is deemed an entitlement. The maximum total General Fund expenditures per year for these formulas shall not exceed \$250,000 each fiscal year in FY2014-15 and FY2015-16. The Department shall provide an electronic report on the program to the Legislature annually on or before December 15 of each year. This section of this bill becomes effective July 1, 2014.

LB 276 (Nordquist) Change provisions of the Early Intervention Act, the Medical Assistance (Medicaid) Act, the Tax Equity and Educational Opportunities Support Act and the Special Education Act.

This bill requires the Department (DHHS) and the Department of Education (DoE) to jointly implement and administer the statewide billing system for accessing federal Medicaid funds for special education.

This bill requires the DHHS and the DoE, on or before October 1, 2015, to jointly revise the statewide billing system to streamline and simplify the claims process, to update reimbursement rates and incorporate services included in the state plan amendment. After the reimbursement rates have been updated, such rates shall be reviewed at least once every 5 years.

This bill requires 11.54% of federal Medicaid funds received by school districts to be considered reimbursement for the costs of school districts and such costs to be included in the Medicaid reimbursement rates to be established for each service.

This bill requires, from the amount provided to aid in the carrying out of the Early Intervention Act (Act), DHHS shall retain, for the purposes of implementing and administering this billing system and early intervention services, an amount equal to the lesser of the actual cost of implementing and administering this system and service or

- For fiscal year 2014-15, \$242,000.
- For fiscal year 2015-16, \$300,000; or
- For fiscal year 2016-17, and each fiscal year thereafter, the amount retained for such purposes for the prior year increased by 5%.

This bill requires, for 2015 and each year thereafter, on or before December 1, DHHS and DoE to jointly certify to the Department of Administrative Services (DAS) the aggregate amount to be included in the local system formula resources for all local systems for state aid to schools.

For fiscal year 2016-17 and each fiscal year thereafter, it is the intent of the Legislature that, in addition to other state and federal funds used to carry out this Act, funds equal to the lesser of the amount certified to DAS or the amount appropriated or transferred for these purposes for the immediately preceding fiscal year increased by 5% be appropriated from the General Fund to aid in carrying out this Act.

This bill requires, on or before October 1, 2014, DHHS, after consultation with DoE, to submit a state plan amendment to the federal centers for Medicare and Medicaid (CMS), as necessary, to provide that the following are direct reimbursable services when provided by school districts as an individualized education program or individualized family service plan:

- Early and periodic screening, diagnosis and treatment services for children;
- Medical transportation services;
- Mental health services;
- Nursing services;
- Occupational therapy services;
- Personal care services;
- Physical therapy services;
- Rehabilitation services;

- Speech therapy and other services for individuals with speech, hearing or language disorders; and
- Vision-related services.

This bill defines excess cost as it relates to school aid and Medicaid.

This bill changes provisions relating to special education appropriations.

This bill becomes effective July 18, 2014.

LB 359 (Cook) Change asset and income limitations for certain programs of public assistance and change eligibility redeterminations relating to a child care subsidy.

This bill, in determining eligibility for the Aid to Dependent Children Program, Supplemental Nutrition Assistance Program and the Child Care Subsidy program, excludes the following:

- Assets in or income from an educational savings account, a Coverdell educational savings account, a qualified tuition program or any similar savings account or plan established to save for qualified higher education;
- Income from scholarships or grants related to postsecondary education, whether merit-based, need-based or a combination; and
- Income from postsecondary educational work-study programs, whether federally funded, funded by a postsecondary educational institution or funded from any other source.

This bill requires the Department to participate in the federal Child Care Subsidy program. In determining ongoing eligibility for this program, 10% of a household's gross earned income shall be disregarded after 12 continuous months on the program and at each subsequent redetermination. Initial program eligibility standards shall not be impacted by the provisions of this law.

This bill becomes effective July 18, 2014.

LB 464 (Ashford) Change provisions relating to juvenile justice system, arraignment, court jurisdiction, services for juveniles and families, and truancy.

This bill provides changes relating to the Title IV-E Plan and Foster Care, Juvenile Facilitated Conferencing, Office of Juvenile Services duties, payment of costs, evidence-based practices, other matters dealing with the juvenile justice system, police reports and truancy.

TITLE IV-E PLAN AND FOSTER CARE:

This bill authorizes the Department, as the single state agency administering the Title IV-E plan, to enter into the agreement with the Office of Probation Administration (Probation) to act as a surrogate of the Department to administer this plan for children it has placement and care authority of. The Department as the public agency administering or supervising this plan, to obtain federal reimbursement for allowable maintenance, administrative, and training expenses,

maintains the ultimate responsibility to supervise Probation's activities regarding the Title IV-E requirements for eligible children served under the agreement.

Probation has placement and care responsibility for juveniles in out-of-home placement (foster care) which includes the development of an individual case plan. Placement and care constitutes accountability for the day-to-day care and protection of juveniles. Placement and care does not include rights retained by the legal custodian.

This part of the bill becomes operative July 18, 2014.

JUVENILE FACILITATED CONFERENCING:

This bill allows the court, in any juvenile case, to provide parties the opportunity to address issues involving restorative justice and other concerns through facilitated conferencing or mediation. Facilitated conferencing may also include, but not limited to, expedited family group conferences, child welfare mediation, permanency prehearing conferences, termination of parental rights prehearing conferences and juvenile victim offender dialogue. Funding and management for such service will be part of the office of the State Court Administrator.

This bill provides definitions of expedited family group conference, family group conference, and juvenile victim offender dialogue.

A prehearing conference may be scheduled at any time during the child welfare or juvenile court process, from initial removal through permanency, termination of parental rights and juvenile delinquency court processes.

It is the intent of the Legislature to transfer \$450,000 in General Funds from the Department's 2014-15 budget to the State Court Administrator's budget for the purpose of making the State Court Administrator directly responsible for contracting and paying for court-connected prehearing conferences, family group conferences, expedited family group conferences, child welfare mediation, permanency prehearing conferences, termination of parental rights prehearing conferences, juvenile victim offender dialogue, and other related services. Such funds shall be transferred on or before October 15, 2014.

The Department shall continue to be responsible for contracting with mediation centers approved by the Office of Dispute Resolution to provide family group conferences, mediation, and related services for non-court involved and voluntary child welfare or juvenile cases through June 30, 2007, unless extended by the Legislature.

This part of the bill becomes operative July 18, 2014.

OFFICE OF JUVENILE SERVICES DUTIES (OJS):

When it is alleged that the juvenile has exhausted all levels of probation supervision and options of community-based services have been satisfied, a motion of commitment to a youth and

rehabilitation treatment center (YRTC) may be filed and proceedings held. Motion and hearing requirements are provided.

Upon commitment by the court to OJS, the court shall immediately notify OJS of the commitment.

OJS shall notify those required to be served, all interested parties and the committing court of the pending discharge of a juvenile from the YRTC 60 days prior to discharge and again in every case not less than 30 days prior to discharge. Upon notice of pending discharge by OJS, the court shall set a continued disposition hearing in anticipation of reentry.

OJS shall provide a copy of the individualized reentry plan to the juvenile, the juvenile's attorney, and the county attorney or city attorney prior to the continued disposition hearing. At the continued disposition hearing, the court shall review and approve or modify this plan, place the juvenile under probation supervision and enter any other order allowed by law. No hearing is required if all interested parties stipulate to this plan by signed motion. In such case, the court shall approve the conditions of probation, approve this plan, and place the juvenile under probation supervision.

OJS is responsible for transportation of the juvenile to and from the YRTC. OJS may contract for such services. A plan for a juvenile's transport to return to the community shall be a part of the individualized reentry plan. OJS may approve family to provide such transport when specified in the plan.

This part of the bill becomes operative July 18, 2014.

PAYMENT OF COSTS OF JUVENILES:

OJS is required to make payment of costs for any period of time from when the court commits the juvenile to OJS until the juvenile is discharged by OJS. These costs include, but are not limited to, evaluations, placement, services, detention (including prior to placement) and transportation to and from the YRTC.

OJS shall also pay the costs incurred during an evaluation or placement ordered by the court.

This bill also changes payment of costs provisions relating to counties and Probation.

This part of the bill becomes operative July 18, 2014.

OJS-EVIDENCE BASED PRACTICES:

OJS shall begin implementing evidence-based practices, policies and procedures by January 15, 2016. Thereafter, on November 1 of each year, OJS shall submit to the Governor, the Legislature, and the Chief Justice of the Supreme Court, a comprehensive report on its efforts to implement evidence-based practices. The report to the Legislature shall be by electronic

transmission and may be attached to preexisting reporting duties. The report shall include at a minimum:

- Percentage of juveniles being supervised in accordance with evidence-based practices;
- Percentage of state funds expended by each respective department for programs that are evidence-based, and a list of all programs which are evidence-based;
- Specification of supervision policies, procedures, programs, and practices that were created, modified, or eliminated; and
- Recommendations of OJS for any additional collaboration with other state, regional, or local public agencies, private entities, or faith-based and community organizations.

Each report and executive summary shall be available on the website of OJS.

The Executive Board of the Legislature may request the Consortium for Crime and Justice Research and Juvenile Justice Institute at the University of Nebraska at Omaha to review, study and make policy recommendations on the reports assigned by the Executive Board.

This part of the bill becomes operative July 18, 2014.

JUVENILE JUSTICE SYSTEM:

This bill provides a reporting requirement for the State Court Administrator on juveniles in the state juvenile system. This part of this bill becomes operative January 1, 2015.

This bill changes provisions relating to the transfer of juveniles from district court or county court to juvenile court. This part of the bill becomes operative January 1, 2015.

This bill changes the definition of staff secure juvenile facility. This part of the bill becomes operative July 18, 2014.

This bill changes provisions relating to juvenile court exclusive original jurisdiction. This part of the bill becomes operative January 1, 2015.

This bill changes provisions relating to courts' ordering of evaluations, juvenile court petitions, and county attorneys' and city attorneys' role in median and transfers. This part of the bill becomes operative January 1, 2015.

This bill outlines Probation's placement and care responsibilities. This part of the bill becomes operative July 18, 2014.

This bill changes provisions relating to the Community and Family Reentry Process and the Community-based Juvenile Services Aid Program. This part of the bill becomes operative July 18, 2014.

POLICE REPORTS/TRUANCY:

This bill also changes provisions relating to police reports and truancy. These portions of the bill become operative July 18, 2014.

LB 526 (Howard) Change provisions relating to use of pharmaceutical agents by optometrists.

This bill defines pharmaceutical agents, for therapeutic purposes, to include an epinephrine autoinjector for treatment of anaphylaxis and an oral steroid, oral glaucoma agent, or oral immunosuppressive agent.

This bill allows the practice of optometry to include oral therapeutic agents used in the treatment of glaucoma, oral steroids or oral immunosuppressive agents.

This bill clarifies language relating to certification of optometrists.

This bill becomes effective July 18, 2014.

LB 588 (Watermeier) Change veteran employment preference provisions.

This bill expands the definition of veteran to include the spouse of a veteran who has a 100% permanent disability as determined by the U.S. Department of Veterans Affairs.

This bill adds the language “numerical scoring” to the 5% preference on tests.

This bill requires, when no examination or numerical scoring is used, the preference to be given to the qualifying veteran if two or more equally-qualified candidates are considered for the position.

This bill requires that all notices of employment available for the veterans preference and all applications for such positions to state the position is subject to a veterans preference.

This bill requires a veteran desiring to use the veterans preference to provide the hiring authority with a copy of the veteran’s Defense Department Form 214.

This bill requires, within 30 days after filling a position, veterans who have applied and are not hired to be notified (i.e. mail, telephone, electronic mail) that they have not been hired. This notice shall advise the veteran of any administrative appeal available.

This bill becomes operative on January 1, 2015.

LB 660 (Krist) Provide for extension of a pilot program and a contract relating to case management.

Before June 30, 2014, the Department may extend the contract for the case management pilot project. If this pilot project is extended by the Department, an evaluation of the pilot project shall be completed by the Legislature before December 31, 2014. The Legislature shall use all

necessary resources, including the hiring of a consultant if deemed necessary. The Department, and any child welfare entity which it has contracted with, shall provide all data and information to the Legislature to assist with the evaluation.

This bill became effective April 3, 2014.

LB 690 (Bolz) Create the Aging Nebraskans Task Force and require a grant application.

This bill requires the Department to apply to the U.S. Department of Health and Human Services for a grant under the State Balancing Incentive Payments Program (BIPP). Funds from the grant shall be used to develop a comprehensive and coordinated system of home and community-based long-term care services. The Department shall file the grant application no later than July 31, 2014. The application shall meet federal requirements. On or before December 1, 2014, the Department shall report electronically to the Health and Human Services Committee on the status of the grant application.

This bill creates the Aging Nebraskans Task Force. The purpose of this task force is to develop and facilitate implementation of a statewide strategic plan for addressing the needs of the aging population. This task force shall provide a forum for collaboration among state, local, community, public and private stakeholders in long-term care programs.

This bill provides membership for this task force. The executive committee of this task force shall include as voting members the chairperson of the Health and Human Services Committee, member of the Appropriations Committee, member of the Health and Human Services Committee, member of the Legislative Planning Committee and an at-large member. The voting members of the executive committee shall choose a chairperson and vice-chairperson from the voting members. The chief executive officer of the Department or his/her designee and the Chief Justice of the Supreme Court or his/her designee shall be non-voting, ex officio members of the executive committee. The remaining members of this task force shall be non-voting members appointed by the executive committee through an application and selection process.

This bill provides duties for this task force. The executive committee of the task force shall advise the task force regarding the interaction among the three branches of government related to long-term care programs and services. The task force shall work with several administrators involved with long term care (i.e. area agencies on aging, nursing homes, hospitals, managed-care companies) to establish effective community collaboration for informed decision-making. This task force is also required to create a statewide strategic plan for long-term care services which includes independent living, fiscal management, workforce development, gaps in service delivery and evaluation.

On or before December 15, 2014, this task force shall present electronically to the Legislature a report of the recommendations of the strategic plan. The Department is also required to electronically report to the Legislature the percentage of growth of Medicaid spending for people over 65 years old for no fewer than 5 years following the acceptance of the BIPP application.

This task force terminates on June 30, 2016.

This bill became effective April 10, 2014.

LB 699 (Larson) Change hunting permit and hunter education provisions, provide reports to a firearm database and eliminate certain firearm provisions.

This bill allows a hunting permit to be issued to any person who has a developmental disability and who has a license-purchase exemption certificate issued by the Game and Parks Commission. Any such person must be accompanied by a licensed hunter who is not developmentally disabled. Also, this person must provide written physician authorization indicating that they are at all times capable of understanding and following directions given by another person and not a danger to himself/herself or others. The Commission may not issue an exemption certificate to one who has been found by a court or mental health board to pose a danger to himself/herself or others.

This bill requires the Nebraska State Patrol (NSP) and the Department to electronically report to the Legislature on a biannual basis the following:

- Number of total records of persons unable to purchase or possess firearms because of disqualification or disability;
- Number of shared records by category of such persons;
- Change in number of total shared records and change in number of records;
- Number of records existing, but not able to be shared with the National Instant Criminal Background Check System; and
- Number of hours or days, if any, during which the database was unable to share records with the System.

The report shall also be published on the websites of NSP and the Department.

This bill eliminates certain firearm provisions.

This bill became effective April 3, 2014.

LB 719 (Crawford) Require a report and change complaint procedures regarding rules and regulations.

This bill adds a public comment summary as part of the information an agency prepares before submission to the Secretary of State, Attorney General and Governor. Specifically, the agency is required to attach to the proposed rule or regulation a written report that includes a summary of the testimony offered at the public hearing. This report shall also include a response from the agency to the issues or questions raised in the hearing process. This written report shall also be submitted to the Executive Board of the Legislative Council. The chairperson of the Executive Board shall refer this report to the chairperson of the standing committee with subject matter jurisdiction or primary sponsor of the bill.

This bill adds criteria for filing a complaint regarding a rule or regulation. This criteria includes undue burden, circumstances have changed since the passage of the statute which the rule or regulation implements or the rule or regulation overlaps, duplicates, or conflicts with federal, state, or local laws, rules, regulations or ordinances.

This bill becomes effective July 18, 2014.

LB 728 (Harms) Change provisions relating to criminal history record information checks for certain employees of the Division of Developmental Disabilities of the Department of Health and Human Services.

This bill requires each employee of state-operated services and facilities providing developmental disabilities services to be subject to criminal history record information check requirements. These employees shall file a complete set of his/her legible fingerprints with the Department. The Department shall transmit such fingerprints to the Nebraska State Patrol (NSP). NSP shall then transmit a copy of the applicant's fingerprinting to the Identification Division of the Federal Bureau of Investigation for a national criminal history record information check.

The national criminal history record information check shall include information concerning the employee from federal repositories if authorized by federal law.

This bill requires NSP to undertake a search for Nebraska criminal history record information concerning the employee. NSP shall issue a report to the Department which contains the results of the criminal history record information check.

Criminal history record information subject to federal confidentiality requirements shall remain confidential and may be released only upon the written authorization of the employee.

The Department, in cooperation with NSP, shall adopt and promulgate rules and regulations to carry out this law.

This bill does not apply to employees of private agencies.

This bill became effective March 29, 2014.

LB 811 (Schilz) Change provisions relating to controlled substances, prescriptions and certain assault provisions.

CONTROLLED SUBSTANCES:

This bill changes the provisions in the Uniform Controlled Substances Act relating to "synthetic cannabinoids (i.e. synthetic marijuana, K2, Spice, bath salts, potpourri or herbal incense). Specifically, the definition of imitation controlled substance is changed and new definitions of compounding and cannabinoid receptor agonist are added. Indole carboxlates are added as a controlled substance. Also, any non-naturally occurring substance, chemical compound, mixture

or preparation, not specifically listed elsewhere in these schedules and not approved for human consumption, containing a cannabinoid receptor agonist are added as a controlled substance. In determining whether a substance is an imitation controlled substance, the court or other authority concerned shall consider the following additional factors:

- Whether the substance was approved by the federal Food and Drug Administration for over-the-counter sales and contained the packaging and labeling information approved by the federal Food and Drug Administration; and
- Whether the person in possession or control of the substance utilized deception, fraud, or evasive tactics or actions to prevent the seizure, discovery or detection of the substance by law enforcement.

PRESCRIPTIONS:

This bill amends and updates pharmacy practice provisions of the Uniform Controlled Substances Act.

Requirements for prescriptions for Schedule II controlled substances prior to being filled by a pharmacist or dispensing practitioner are provided. Language is also revised for prescriptions involving Schedule III, IV and V controlled substances.

If a prescription is created, signed, transmitted and received electronically, all records related to that prescription must be retained electronically.

This bill provides filing requirements for paper prescriptions involving Schedule II controlled substances as well as requirements relating to maintenance of prescriptions and labeling.

This bill allows a registrant who is the owner of a controlled substance to transfer controlled substances to another registrant as provided by law.

This bill allows the owner of any stock of controlled substances to cause such substances to be destroyed pursuant to this bill. Complete records of this destruction shall be maintained. Specific requirements are provided for an owner who is a registrant.

ASSAULT PROVISIONS:

This bill adds emergency responder, state correctional employee, DHHS employee or a health care professional to the assault on an officer provisions. These provisions involve the criminal offense against a pregnant woman, unlawful membership recruitment into an organization and assaults on officers in the first, second and third degree and assault on an officer by using a motor vehicle. Also, out-of-hospital emergency care provider is defined.

This bill becomes effective July 18, 2014.

LB 853 (McGill) Change and rename acts, a register, and an advisory committee relating to children and young adults and require case manager training as prescribed.

Specifically, this bill provides changes to young adult services, case manager training and alternative response.

YOUNG ADULT BRIDGE TO INDEPENDENCE ACT:

This bill renames the Young Adult Voluntary Services and Support Act to the Young Adult Bridge to Independence Act. Also, this bill renames the extended services and support program to the Bridge to Independence program. This program is defined as the extended services and support available to a young adult under this act other than the current state-extended guardianship assistance program. This bill makes the following changes to this program:

Juvenile courts shall have jurisdiction over the proceedings under this act.

Young adults after age 19 are allowed to receive payments from the Department if they are eligible for extended guardianship assistance.

Guardianships of, and services by, the Department are allowed to continue until the child reaches 21 years of age if the child is in this program regardless whether the child is regularly attending school or training programs.

Case management services are expanded to include the assistance to create a health care proxy, or other similar document recognized under state law, at the young adult's option.

If a young adult chooses to terminate this agreement, the Department shall provide information about and contact information for community resources that may benefit him/her.

If the Department determines that the young adult is no longer eligible, the independence coordinator shall make efforts to meet with him/her in person to explain the information in the written termination notice and to assist him/her in reestablishing eligibility if he/she wishes to continue participating in this program.

If the young adult remains in this program until attaining 21 years of age, the Department shall provide him/her with a clear and developmentally-appropriate written notice informing the young adult of the termination of this agreement and information about and contact information for community resources that may benefit him/her.

The juvenile court has the jurisdiction to conduct permanency reviews. This bill outlines this permanency process under this program. The Department shall prepare and present to this court a report, at the direction of the young adult, addressing the goals in the case plan. This court shall then determine if the appropriate services are being provided in this program. At least 30 days prior to each permanency review, the independent coordinator shall meet with the young adult to explain the date, time, location, and the review, to explain the purpose of the review, and

to identify additional persons the young adult would like to attend this review and assist in making arrangements for their attendance.

In conducting periodic case reviews, the Department is required to facilitate the participation of the young adult. These reviews shall be conducted in an informal matter and, whenever possible, scheduled at times that allow for the attendance and participation of the young adult. At the end of this review, the reviewer shall notify the young adult for their right to request a client-directed attorney and an additional permanency review. Also, the reviewer shall provide the young adult with notice relating to such attorney and permanency review.

The guardian is required to ensure that any guardianship assistance funds provided by the Department and received by the guardian shall be used for the benefit of the young adult. The Department shall adopt and promulgate rules and regulations defining services and supports encompassed by such benefit.

The adoptive parent/parents are required to ensure that any adoption assistance funds provided by the Department and received by the adoptive parent/parents shall be used for the benefit of the young adult. The Department shall adopt and promulgate rules and regulations defining services and supports encompassed by such benefit.

CASE MANAGER TRAINING:

This bill requires the same program for initial training of case managers to be used by all case managers in order to facilitate consistency in training all case managers and allow for Title IV-E reimbursement for case manager training. This would apply to case managers employed by the Department or by an organization under contract with the Department.

The initial training of all case managers shall be provided by the Department or one or more organizations under contract with the Department. The Department shall create a formal system for measuring and evaluating the quality of the training. All case managers shall complete a formal assessment process after initial training.

The training curriculum for case managers shall include, but not be limited to:

- Benefits of utilizing evidence-based and promising casework practices;
- Importance of fidelity to evidence-based and promising casework practices; and
- Commitment to evidence-based and promising family-centered casework practices that use a least restrictive approach for children and families.

ALTERNATIVE RESPONSE:

Definitions:

This bill renames the Child Protection Act to the Child Protection and Family Safety Act.

This bill defines alternative response (AR) as a comprehensive assessment of child safety, risk of future child abuse or neglect, family strengths and needs and provision of or referral for necessary services and support. AR is an alternative to traditional response and does not include an investigation or a formal determination as to whether child abuse or neglect has occurred. The subject of the report shall not be entered into the central registry of child protection cases.

This bill defines comprehensive assessment as an analysis of child safety, risk of future child abuse or neglect, and family strengths and needs. This definition does not include a determination as to whether the child abuse or neglect occurred, but does determine the need for services and support.

This bill defines investigation as fact gathering related to the current safety of a child and the risk of future child abuse or neglect that determines whether child abuse or neglect has occurred and whether child protective services are needed.

This bill defines Review, Evaluate and Decide Team (RED Team) as an internal team of staff within the Department and shall include no fewer than 2 supervisors/administrators and 2 staff members knowledgeable on the policies and practices of the Department, including, but not limited to, the structured review process. County attorneys, child advocacy centers or law enforcement may attend team reviews upon request of a party.

Traditional response is defined as an investigation by a law enforcement agency or the Department which requires a formal determination of whether child abuse or neglect has occurred.

Intent:

This bill provides a legislative declaration that the state public policy is to protect children whose health or welfare may be jeopardized by abuse or neglect. The Legislature also recognizes that most families want to keep their children safe, but circumstances or conditions sometimes interfere with their ability to do so. Families and children are best served by interventions that engage their protective capabilities and address immediate safety concerns and ongoing risks of child abuse or neglect. Further, this bill provides legislative intent to strengthen the family and make the home, school, and community safe for children by promoting responsible child care in all settings and to provide a safe temporary or permanent home environment for abused or neglected children.

Also, this bill provides that it is state public policy to require child abuse and neglect reporting, provide for alternative response, provide for traditional response and provide protective and supportive services.

Duties of the Department:

This bill requires the Department, in consultation with the Nebraska Children's Commission (commission), to develop an AR implementation plan. This plan shall include the provision of concrete supports and voluntary services. When this plan has been developed, the Department

may begin using AR in up to 5 AR demonstration project locations (i.e. city, township, village, county, group of counties, townships or villages). The Department shall provide a report of an evaluation on the status of AR implementation to the commission and electronically to the Legislature by November 15, 2015. The commission shall provide feedback on the report to the Department by December 15, 2015. The Department may begin using AR in up to 5 additional project locations on or after January 1, 2016. The Department may continue to use AR until July 1, 2017, but continued use of AR thereafter shall require approval of the Legislature.

This bill requires the Department to contract with an independent entity to evaluate the AR demonstration projects. The Department shall provide a report of this evaluation to the commission and electronically to the Legislature by November 15, 2016. The evaluation shall include, but not be limited to:

- Screening process used to determine which cases shall be assigned to AR;
- Number and proportion of repeat child abuse and neglect allegations;
- Number and proportion of substantiated child abuse and neglect allegations;
- Number and proportion of families with any child entering out-of-home care;
- Changes in child and family well-being in the domains of behavioral and emotional functioning and physical health;
- Number and proportion of families assigned to AR track who are reassigned to traditional response; and
- Cost analysis that will examine the key elements of services received.

The Department shall provide to the commission regular updates on:

- The AR implementation plan;
- The status of AR implementation;
- Inclusion of child welfare stakeholders, service providers and other community partners,
- Any findings or recommendations made by the independent evaluator;
- Any AR programmatic modifications; and
- Status of the adoption and promulgation of rules and regulations.

The Department shall adopt and promulgate rules and regulations to carry out this act. These rules and regulations shall include, but not be limited to, transfer of cases, notice to families, AR services, data, and AR ineligibility criteria. Whenever the Department proposes to change the AR ineligibility criteria, public notice of the changes shall be given. The Department shall provide public notice and time for public comment by publishing the proposed changes on the website at least 60 days prior to the public hearing. The Department shall provide a copy of these proposed rules and regulations to the commission no later than October 1, 2014.

AR Demonstration Projects (Duties of Review, Evaluate and Decide (RED) Team and Department):

This bill requires the RED team to convene and review intakes, evaluate the information and determine assignment for AR or traditional response. This team shall use consistent criteria to review the severity of the child abuse and neglect allegation, access to the perpetrator,

vulnerability of the child, family history and other necessary information. At the conclusion of the review, the intake shall be assigned to either traditional response or AR. Decisions of the team shall be made by consensus. If the team cannot come to consensus, the intake shall be assigned to traditional response.

This bill requires the Department, in the case of an AR, to complete a comprehensive assessment. The Department shall transfer the AR case to traditional response if the child is unsafe. If it is determined that the child is safe, the case shall not be transferred to traditional response.

This bill requires the Department, by the next working day after the receipt of the child abuse and neglect report, to enter into the tracking system child protection cases, all reports of child abuse or neglect that are opened for AR, and any action taken.

This bill requires the Department to make available to the appropriate investigating law enforcement agency and the county attorney a copy of all reports relating to a case of suspected child abuse or neglect. Aggregate, non-identifying child abuse and neglect reports receiving AR shall be made available quarterly to requesting agencies outside the Department. Such AR data shall include, but not be limited to, nature of the report, age of child/children, nature of services offered, location of cases, number of monthly cases and number of AR cases transferred to traditional response. Only, the Inspector General of Nebraska Child Welfare (IG), Public Counsel, law enforcement agency personnel and county attorneys shall be provided specific, identifying reports of child abuse or neglect being given AR. The IG shall have access to all reports relative to cases of suspected child abuse or neglect subject to traditional response and AR. The Department and the IG shall develop procedures allowing for the IG review of AR cases. Reporting requirements are provided for the IG.

REGISTER:

This bill updates the Child Abuse and Neglect Register to the term Child Abuse and Neglect Registry.

This bill becomes effective July 18, 2014.

LB 854 (Krist) Prohibit issuance of a long-term care request for proposals before September 1, 2015.

This bill provides legislative intent language that sufficient planning and meaningful input from stakeholders is critical for establishing an effective managed care system for Medicaid recipients. Stakeholders include, but are not limited to, service providers and consumers. To ensure the safety and well-being of the state's most vulnerable population, the Department shall not release a request for proposals relating to procurement of managed care for long-term care services and support prior to September 1, 2015. This bill becomes effective July 18, 2014.

LB 859 (Krist) Change provisions for onsite vaccinations at certain health care facilities.

This bill clarifies that when a national shortage of vaccine exists or it is contraindicated in individual cases, immunization will not be required. This bill becomes effective July 18, 2014.

LB 863 (Karpisek) Change provisions relating to cemeteries and alcohol sales, prohibit sales to and use of vapor products and alternative nicotine products by minors, prohibit certain sales of tobacco products, and adopt by reference provisions of the National Electrical Code.

This bill prohibits the selling, giving or furnishing of vapor products or alternative nicotine products to a minor. Also, this bill makes it unlawful to sell or distribute cigarettes, cigars, vapor products, alternative nicotine products or tobacco in any form whatever through a self-service display. Tobacco specialty stores and cigar bars are exempt from this requirement. Definitions and criminal penalties are provided.

This bill also changes provisions relating to cemeteries, alcohol sales and the National Electrical Code.

This bill became effective April 10, 2014.

LB 901 (McGill) Provide for internships and change duties of the Behavioral Health Education Center and adopt the Nebraska Mental Health First Aid Training Act.

BEHAVIORAL HEALTH EDUCATION CENTER INTERNSHIPS:

This bill requires the Behavioral Health Education Center to provide funds for internships in Nebraska. These interns shall be placed in communities to increase access to behavioral health services for patients residing in rural and underserved areas in Nebraska.

NEBRASKA MENTAL HEALTH FIRST AID TRAINING ACT:

This bill creates the Nebraska Mental Health First Aid Training Act.

Legislative findings and definitions are provided.

This bill requires the Division of Behavioral Health of the Department to establish a mental health first aid training program. This Division shall, using contracts through the behavioral health regions, help the public identify and understand the signs of a mental illness or substance abuse problem or a mental health crisis and to provide the public with skills to help a person who is developing or experiencing these problems and to de-escalate crisis situations if needed. The training program shall provide an interactive mental health first aid training course administered by the state's regional behavioral health authorities. Instructors in the training program shall be certified by a national authority for Mental Health First Aid USA or similar organization. The training program shall work cooperatively with local entities to provide training for individuals to become instructors.

The mental health first aid training program shall be designed to train individuals to accomplish the following objectives as deemed appropriate considering the trainee's age:

- Help the public identify, understand and respond to the signs of mental illness;
- Emphasize the need to reduce the stigma of mental illness; and
- Assist a person who is believed to be developing or has developed a mental health or substance abuse problem or who is believed to be experiencing a mental health crisis.

This bill requires this Division to ensure that evaluative criteria are established which measure the efficacy of this program, including trainee feedback, with the objective of helping the public identify, understand, and respond to the signs of mental illness and alcohol and substance abuse. The regions shall submit an aggregated annual report electronically to the Legislature on trainee demographics and outcomes of the established criteria.

This bill requires the regions to offer services to and work with agencies and organizations (i.e. schools, universities, law enforcement) to develop a program that offers grants to implement this act in ways that reflect the economic and cultural diversity of this state.

This bill provides legislative intent language to appropriate \$100,000 annually to the Department to carry out this act.

This bill becomes effective July 18, 2014.

LB 905 (Speaker Adams) Provide for deficit appropriations.

This bill appropriates funding for the Rural Health Provider Incentive Program, Children's Health Insurance, community-based aging services, health aid, sex offender treatment, early childhood education, and developmental disability provider rates (2% increase).

This bill also provides new language relating to appropriations:

Juvenile Services Project Contingency:

This bill sets aside \$7.4 million General Funds to reflect a potential shortfall in funds appropriated in the 2013, LB 561A (changes to juvenile justice system). No expenditures shall be made for this program. The probation administrator, or his/her designee, shall certify to the Department of Administrative Services budget administrator the amounts necessary to supplant these funds if 2013 General Funds are insufficient.

Electronic Records:

This bill, includes the appropriation of \$500,000 General Funds for Fiscal Year 2013/2014 and \$500,000 for Fiscal Year 2014/2015, for the electronic records initiative.

Medicaid Medical Information System (MMIS):

This bill provides legislative intent that the Department provide quarterly status reports electronically as the Request for Proposal (RFP) is being developed for MMIS. The Department shall provide a report electronically to the Legislature specifying the criteria used for the RFP for the MMIS replacement contract prior to the release of the RFP. The criteria shall include, but not be limited to, the successful completion of MMIS projects in other states and quality ongoing customer services provided during implementation of the project. The Department shall evaluate using an independent consultant to develop the MMIS RFP and evaluate respondents in order to maximize specific technical expertise and minimize political considerations. Upon awarding of the contract, the Department shall provide electronically to the Legislature all documentation submitted by the entity that was awarded the contract.

Community Health Centers:

This bill appropriates \$250,000 General Funds and \$750,000 Cash Funds from the Nebraska Health Care Cash Fund for the 6 community health centers. Each center is to receive an amount to be distributed proportionally based on the previous year's number of uninsured clients as reported on the Uniform Data System. The distribution shall be made to Charles Drew Health Center, OneWorld Community Health Center, East Central District Health Department Good Neighbor Community Health Center, Community Action Partnership of Western Nebraska Health Center, Norfolk Community Health Care Clinic and People's Health Center.

Health Aid:

This bill appropriates \$212,000 General Funds for tuition reimbursement for Emergency Medical Services Responders' initial and ongoing training.

This bill appropriates \$85,000 General Funds for citizen advocacy programs.

Lincoln Regional Center Kitchen Replacement:

This bill authorizes the Department to replace the kitchen facilities at the Lincoln Regional Center.

Behavioral Health Aid:

This bill appropriates an additional \$10 million to Behavioral Health Aid. Also, it is the intent of the Legislature that any unexpended General Funds remaining from appropriations to this program on June 30, 2014, shall be allocated to the behavioral health regions.

State Ward Permanency Pilot Project:

This bill appropriates \$1.5 million General Funds for the State Ward Permanency Pilot Project which is hereby created. This pilot project shall provide developmental disabilities services to state wards in order to provide optimal habilitative supports and promote permanency.

This pilot project shall serve state wards who are eligible for services through the Developmental Disabilities (DD) Division and who do not qualify for priority status and state wards who are in need of habilitative supports to achieve permanency. Services shall include any service provided pursuant to the Developmental Disabilities Act available to persons under 21 years of age.

A state ward shall be eligible to participate in this project if he/she qualifies for developmental disabilities services and has been assessed to need individually-planned and coordinated habilitative supports. State wards currently receiving an enhanced level of care through letters of agreement between the Children and Family Services (CFS) Division and providers of this care and state wards with above-average habilitative needs shall be given priority to participate in this project.

The DD Division, CFS Division or any lead agency, State Department of Education and DD service providers shall collaborate to implement this project to promote stability and permanency for state wards, to provide assessments and to provide training to caseworkers and service providers.

This project shall collect data on the following:

- Impact of services provided;
- Number of state wards participating in this project who achieve permanency;
- Level of stability in placements for these state wards;
- Total number of state wards participating in this project and their current status in the child welfare system; and
- Impact on the overall support to families before and after permanency.

Data collected from this project shall be reported to the Foster Care Review Office which shall analyze the data and electronically report to the Health and Human Services Committee and the Appropriations Committee every 6 months during the term of the project.

This project terminates on June 30, 2016.

This bill became effective April 1, 2014.

LB 906 (Speaker Adams) Transfer funds and create and eliminate funds.

This bill requires the State Treasurer to transfer \$6.8 million from the Health and Human Services Cash Fund to the General Fund on or before July 15, 2014, on such date as directed by the Department of Administrative Services.

This bill increases the annual transfer from the Nebraska Medicaid Intergovernmental Trust Fund and the Nebraska Tobacco Settlement Trust Fund to the Nebraska Health Care Cash Fund from \$59.1 million to \$61.1 million beginning July 15, 2014.

This bill also changes provisions relating to water funds, job training, game and parks, judges' retirement and employment security settlements.

This bill became effective April 1, 2014.

LB 907 (Ashford) Add, change and eliminate provisions relating to criminal justice, incarceration, probation, parole and legal education financial assistance.

This bill prohibits a public employer from asking an applicant to disclose, orally or in writing, information concerning the applicant's criminal history until the public employer has determined the applicant meets employment qualifications. This bill does not apply to any law enforcement agency. Also, exceptions are provided in cases where this employer is a school district or educational service unit or when this background check is required by state or federal law.

This bill also changes provisions relating to corrections and legal education.

This bill became effective April 17, 2014.

LB 908 (Coash) Change child guardianship, ward and adoption for child out of wedlock provisions.

This bill changes provisions relating to notices of objection to adoption and intent to obtain custody, abandonment and guardianships.

NOTICE OF OBJECTION TO ADOPTION AND INTENT TO OBTAIN CUSTODY:

This bill changes the time of filing of a Notice of Objection to Adoption and Intent to Obtain Custody by the biological father from within 5 business days after the birth of the child to any time during the pregnancy through no later than 5 days after the birth of the child.

ABANDONMENT:

This bill defines abandonment as a parent's intentionally withholding from a child, without just cause or excuse, the parent's presence, care, love, protection, and maintenance and the opportunity for the display of parental affection for the child.

GUARDIANSHIPS:

This bill allows the juvenile court to appoint a guardian for a child adjudicated under the current child abuse and neglect law.

This bill does not eliminate guardianship payments on the child's 19th birthday if the child is eligible for an extended guardianship assistance.

This bill strikes the term, "guardianship" and replaces it with "legal custody and care" as it relates to the Department's relationship to the child.

This bill allows the Department to provide subsidies to the adoptive and guardianship families subject to a hearing and court approval whenever permanent free homes for children cannot be obtained.

This bill provides if the permanency plan for a child does not recommend return of the child to his/her parent or that the child is placed for adoption, the juvenile court may place the child in a guardianship, relative home or kinship home. This court may also place the child with an individual provided the child is a juvenile, child has been in the placement for at least 6 months, child consents to the guardianship (10 years of age or older) and the guardian has met certain requirements relating to a safe home, notice of change in address, and commitments to the child.

This bill sets out the duties for the juvenile court in the order granting guardianship.

This bill requires the juvenile court to retain jurisdiction over the child for modification or termination of the guardianship order. The court shall discontinue permanency reviews and case reviews and shall relieve the Department of the responsibility of supervising the placement of the child. Notwithstanding the retention of juvenile court jurisdiction, the guardianship placement shall be considered permanent for the child. The child shall remain in the custody of the guardian unless this order is modified by the court.

This bill requires that a guardianship terminates on the child's 19th birthday unless the child is eligible for continued guardianship assistance payments and an agreement is signed by the Department, guardian and the young adult to continue this assistance. The guardian shall ensure that any of these funds be used for the benefit of the young adult. The Department shall adopt and promulgate rules and regulations defining services and supports encompassed by such benefit.

This bill provides, upon the child's 19th birthday, the guardian shall have no legal authority to make decisions on behalf of the child and shall have no more authority over the person or property of a child than a biological or adoptive parent would have over his/her child, absent consent from the child.

This bill provides that this guardianship does not terminate the parent-child relationship relating to inheritances, consent to adoption, and financial and medical support.

This bill allows the Department to terminate voluntary post-adoption and post-guardianship case management services when the extended guardianship assistance payments are terminated.

This bill requires the Department to adopt and promulgate rules and regulations for the administration of this law.

This bill becomes effective July 18, 2014.

LB 974 (Mello) Provide strategic duties for divisions of the Department of Health and Human Services.

This bill requires, for the biennium ending June 30, 2017, and the biennium ending June 30, 2019, the Divisions of Behavioral Health, Developmental Disabilities and Medicaid and Long-Term Care, as part of the appropriations request process, to include a strategic plan that identifies the main purpose/purposes of each program, verifiable and auditable key goals that are fair measures of progress and benchmarks for improving performance of these goals. These divisions shall also report whether the benchmarks are being met and, if not, the expected timeframes for meeting them. These goals and benchmarks shall be developed by the divisions with the assistance of the budget division of the Department of Administrative Services.

Also, this bill requires, not later than September 15, 2015, and not later than September 15, 2017, these divisions to report electronically to the Health and Human Services Committee and the Appropriations Committee on the progress towards the key goals that occurred in the previous 12 months. These divisions shall annually appear at a joint hearing of these two legislative committees and present the report.

This bill also extends the existing strategic plan requirement for the Division of Children and Family Services to the biennium ending June 30, 2019, and the existing reporting requirement to no later than September 15, 2017. This division shall annually appear at a joint hearing of these two legislative committees and present the report.

This bill also changes provisions relating to special education funding, pre-audits, contracts, warrants and vehicles.

This bill became effective April 3, 2014.

LB 994 (Health and Human Services Committee) Change fees as prescribed for vital statistics.

This bill increases the fee for certified copies of vital records or abstracts of marriage from \$11 to \$16. In addition, the fee for searches of death certificates is increased from \$2 to \$3 per individual search or copy requested.

This bill became effective April 18, 2014.

LB 999 (Ashford) Provide duties relating to establishment of a Hastings Correctional Behavioral Health Treatment Center.

This bill provides legislative findings that a need exists for additional behavioral health treatment beds for inmates in the state correctional system. In order to follow an orderly and reasonable process based upon defined and documented need and an analysis of the utilization of existing facilities, the Legislature authorizes the Behavioral Health Division to study the feasibility of the establishment of a Hastings Correctional Behavioral Health Treatment Center at the Hastings Regional Center (HRC).

This bill requires the Behavioral Health Division to prepare a complete program statement for the Hastings Correctional Behavioral Health Treatment Center. The program statement must be prepared in accordance with the Procedural Manual for Capital Construction Projects, as approved by the state building division of the Department of Administrative Services. The state building division shall assist the Department in the preparation and submission of the program statement.

The program statement shall plan for the long-term needs of the mentally-ill inmates in the correctional system as well as inmates who have drug and alcohol addictions. The intent is to provide a facility for up to 200 inmates in one or more buildings at HRC renovated or constructed to meet the needs of this program. The program statement shall identify the classification of inmates to be placed in the center, the programs needed to provide mental health and substance abuse treatment, and the capitol cost of renovation needed to fully support the program objectives. The program statement shall estimate building renovation costs, staffing costs, and operational costs for the center along with a proposed project schedule.

The completed program statement shall be submitted electronically to the Governor and the Legislature by December 15, 2014.

This bill becomes effective July 18, 2014.

LB 1001 (Wallman) Allow growth and cultivation of industrial hemp.

This bill changes the Uniform Controlled Substances Act. Specifically, industrial hemp which is grown and cultivated for research purposes under an agricultural pilot program is not considered marijuana under this act. Industrial hemp is defined as the plant *Cannabis sativa L.* and part of such plant, whether growing or not, with a delta-9 tetrahydrocannabinol concentration of not more than .30% on a dry weight basis.

This bill becomes effective July 18, 2014.

LB 1050 (Campbell) Change provisions relating to inspections of certain child care facilities.

This bill requires all child care providers who are required to be licensed in Nebraska to have a health and safety inspection prior to being issued a license. Also, this bill strikes language that allows family child care home I inspections to occur within 60 days of an amendment to a license. In addition, this bill changes provisions relating to announced visits.

This bill becomes effective July 18, 2014.

LB 1072 (Lathrop) Change provisions relating to prescription drug monitoring and create a fund.

This bill allows the Department to use state funds and accept grants, gifts, or other funds in order to implement and operate the technology for prescription drug monitoring.

This bill creates the Prescription Drug Monitoring Program Fund. The Department shall administer the funds which shall include any state funds, grants or gifts. Any money in the fund available for investment shall be invested by the state investment officer.

This bill becomes effective July 18, 2014.

LB 1076 (Campbell) Change provisions relating to the Nebraska Telehealth Act.

This bill redefines telehealth to mean medical information electronically exchanged from one site to another, whether synchronously, to aid a health care practitioner in the diagnosis or treatment of a patient. Tele-health includes services originating from a patient's home or any other location where such patient is located, asynchronous services involving the acquisition and storage of medical information, and telemonitoring.

This bill defines telemonitoring as the remote monitoring of a patient's vital signs, biometric data, or subjective data by a monitoring device which transmits such data electronically to a health care practitioner for analysis and storage.

This bill does not require the Medicaid reimbursement rate for a telehealth consultation to depend on the distance between the health care practitioner and the patient.

This bill clarifies language relating to adopting and promulgating rules and regulations.

This bill becomes effective July 18, 2014.