

## **Health and Human Services Committee**

### **LB 402**

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**Department of Health and Human Services**

Good afternoon, Senator Riepe, and members of the Health and Human Services Committee. My name is Jenifer Roberts-Johnson (J-E-N-I-F-E-R R-O-B-E-R-T-S – J-O-H-N-S-O-N) and I am a Deputy Director in the Division of Public Health in the Department of Health and Human Services (DHHS). I am here to testify in opposition to LB 402. This bill would change provisions of the Nebraska Regulation of Health Professions Act.

LB 402 changes the number of technical review committee members from seven to six, requiring the six committee members to be appointed from the membership of the Board of Health with one Board of Health member being designated as chairperson of the technical review committee. This proposed legislation would greatly tax the members of the Board of Health who volunteer their time. It has the potential to double or triple their time away from their employment to perform additional service as technical review committee members. DHHS recommends maintaining the current process, whereby the technical review committee membership is appointed from a pool of volunteers representing both professionals and public/consumers. Three professional members and three public/consumers are appointed. In addition, one person from the Board of Health is appointed to serve as chairperson resulting in a seven member technical review committee. This approach permits non-conflicted professionals with general subject matter expertise, as well as consumers, to participate in the deliberations.

This bill also states the technical review committee may recommend approval of an application for regulation of a health profession not currently regulated and strikes the technical review committee's ability to recommend denial of an application. The possible impact is there is not specific direction for action by a technical review committee if the committee does not recommend approval. DHHS would recommend including language that allows for the technical review committee to either support approval or not support approval of an application for regulation of a health profession not currently regulated.

Finally, LB 402 requires proponents and opponents of proposed changes to the Scope of Practice to "collaborate" with the technical review committee in order to best advise the Legislature. The technical review committee is a fact-finding body that reviews information and seeks to understand the information presented by an applicant group, proponents and opponents, in regard to a change in Scope of Practice of a health profession. By requiring a technical review committee to collaborate with proponents and opponents, the role of the

technical review committee can become that of mediator rather than a fact-finding and decision-making body. In addition, the technical review committee could be viewed as taking a side instead of remaining a neutral, fact-finding body. As an alternative, DHHS would suggest encouraging stakeholders to collaborate prior to beginning a credentialing review process. The purpose of the stakeholder meetings would be to reach agreements, identify points of disagreement and work to find common ground. The stakeholders would then be required to demonstrate to a technical review committee during a review the collaborative efforts they have put forth to reach common ground. By requiring stakeholders to meet prior to the beginning of a credentialing review, the parties involved will understand the issues, understand the position of various parties and lessen the adversarial nature that may occur during a review.

I appreciate the opportunity to testify before you regarding LB402. I'm happy to answer any questions you may have.