

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

[LB834 LB894 LB924]

The Committee on Health and Human Services met at 1:30 p.m. on Wednesday, January 24, 2018, in Room 1510 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on LB834, LB894, and LB924. Senators present: Merv Riepe, Chairperson; Steve Erdman, Vice Chairperson; Sue Crawford; Sara Howard; Mark Kolterman; Lou Ann Linehan; and Matt Williams. Senators absent: None.

SENATOR RIEPE: We're now going to go into our regular hearing for Health and Human Services. Because we have some new individuals arrive, I apologize that we're running a little bit late, but I think it was well worth it. We need to hear that out. I'm Merv Riepe. I'm Chairman of the Health and Human Services Committee. I'd like to...some of this will be a repeat, but I'm going to ask our senator here, to my far right...Senator Kolterman was there a second ago. We'll come back to him. We'll start with you, Senator Howard.

SENATOR HOWARD: I'm Senator Sara Howard. I represent District 9 in midtown Omaha.

SENATOR ERDMAN: Steve Erdman, District 47.

KRISTEN STIFFLER: Kristen Stiffler, legal counsel.

SENATOR CRAWFORD: Good afternoon. Senator Sue Crawford, District 45, which is eastern Sarpy County.

SENATOR WILLIAMS: Matt Williams, District 36: Dawson, Custer, and the north part of Buffalo County. Sorry I'm late; I was introducing a bill in Government Committee.

SENATOR RIEPE: And Senator Kolterman, who will be occupying the chair here...

KRISTEN STIFFLER: There's another over here.

SENATOR RIEPE: Oh, I'm sorry, I'm sorry. I cut you off.

SENATOR LINEHAN: I introduced myself already, that's why.

SENATOR RIEPE: No, that's okay; go ahead.

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR LINEHAN: But I will again. I'm Lou Ann Linehan, District 39: western Douglas County.

TYLER MAHOOD: Tyler Mahood, committee clerk.

SENATOR RIEPE: And again, Senator Kolterman was here, and he will be back in short order. With that, I'd like to talk a little bit about rules of engagement. If you're signing in, we'd ask you to sign an orange form that goes to one of the...planning on speaking, it goes to the...one of the pages. If you want to...if you will not be testifying on the microphone, but you will want to be on record, we have some white sign-in sheets near the entrances, and we'll leave your name and other pertinent information. And these sign-in sheets will become exhibits in the permanent record at the end of the...today. Rules of engagement...some of the committee members, just as Senator Williams was opening out on a bill in another committee, some of our senators or committee members will have to leave and come back and, also, some will be using computers and laptops. We're trying to move into the 21st century. Also, I'm going to ask you, please, to silence or turn off your cell phones. If you're going to testify, we'd ask you, as it gets closer, to come up to the front. The process will be: the introducer of the bill will present; then we will go to proponents, then we will go to opponents; and then, if we have any neutrals; we'll ask the senator to come back and close; and we'll ask for any letters that may have been sent to us, that have been asked to be put into the record. The...when you're presenting we ask, for the record, that you state your name, spell your name, and we'd ask you to be concise. We work on a five-minute clock which means we have four minutes on the green, one on the amber, and then we go to a red light. And when we get to the red light, we're asking you to try to wrap it up as quickly as you can. And you may be fortunate enough to get a question from someone on the committee, that will help you to be able to go forward. If it goes too long, I will ask you...I will intervene and ask you to personally try to pull it together and finish up, in the interest of everyone else that wishes to testify. That said, we are ready to start. We're going to start today with Senator Howard, and it's LB834. Senator Howard. [LB834]

SENATOR HOWARD: (Exhibit 1) Thank you. Good afternoon, Senator Riepe and members of the Health and Human Services Committee. My name is Senator Sara Howard, H-o-w-a-r-d, and I represent District 9 in midtown Omaha. Today I'm bringing before you LB834, a bill that would waive initial licensing fees for certain individuals, to allow them an easier transition into the Nebraska workforce. The licensing fees that would be affected by this bill are covered under the Uniform Credentialing Act, and these credentials are listed on pages 2 and 3 of the bill. And I've also passed out a fee schedule for your review, just in case you're curious about how much each licensure costs. LB834 specifically affects three groups of people...first, low-income, who are defined as a household income at 130 percent of the federal poverty level. For one person in a household, that would be about \$15,000 a year, and for a four-person household, so I imagine two parents and two kids, that's about \$31,000 a year. If the Division of Public Health wanted to

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

increase that FPL, they certainly would have the opportunity to do under this legislation. A low-income person may also be identified as someone who is enrolled in a state or federal public assistance program. The second group that this bill impacts is military families. These are active-duty service members, honorably-discharged veterans, spouses of active-duty service members or veterans, and surviving spouses of deceased service members. And the third group is young workers, so these are individuals between the ages of 18 and 25. I actually first learned about this legislation over the summer, when a young man who testified in front of our committee from the Foundation for Government Accountability--totally accurate. And I thought it was a great idea because it just seemed like the thing that we were looking for, in terms of helping people get into the workforce. I thought it would be an innovative way to reduce some of the barriers that we've been talking about for a couple of years. So in 2012 a study by the Institute for Justice looked at licensing requirements and found 102 different low- and medium-income occupations had an average requirement of \$209 in fees. Many individuals who are looking at paying this fee, especially for the first time, might be fresh out of school and likely facing the burden of paying off student loans, something that I can tell you, personally, is very stressful. Other states are also addressing this issue, though. In 2017 the Arizona legislature passed a bill that allows individuals with household incomes below 200 percent of the federal poverty level to obtain an occupational license without paying the accompanying fee. A similar bill passed in Florida this year, and it grants fee waivers to those with household incomes less than 130 percent of the federal poverty level and extends a fee waiver to military members and their spouses. Other states that have legislation to waive or reduce fees for occupational licensing for low-income or military families include: Arkansas, Iowa, Kentucky, Missouri, Michigan, Oklahoma, and West Virginia. And, as you can see, two of those states are our border states. And when deciding where to start your business and start your career, it might be easier to move somewhere that gives them a jump-start on that career. Not being able to afford a license should not be a barrier to gainful employment and following a career path for an individual. By creating a path to employment for these individuals, we will be benefiting those who want to work and profiting a better economy. I would ask you to, please, advance LB834 to General File. I'm happy to try to answer any questions you may have. [LB834]

SENATOR RIEPE: Do I see questions? Senator Crawford. [LB834]

SENATOR CRAWFORD: Thank you. Thank you, Chairman Riepe, and thank you, Senator Howard. I appreciate the efforts to get people into the workforce and to address the concerns of military families, as well. Do you have any questions or comments on terms of the fiscal note? [LB834]

SENATOR HOWARD: So I, you know, I didn't know what to expect from the fiscal note. I find it interesting that, with a waiver, they would need two more people to work there... [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: Um-hum. [LB834]

SENATOR HOWARD: ...to waive the fees. But I think that's the only commentary that I have, that it seems a little excessive that you need two people to waive fees. They should already be offering these credentials and doing all of the background work involved for them now. And so in this sense, they would just be not collecting a fee. They would still be doing the licensing. So I can't imagine they need more humans for that, but that's just me. [LB834]

SENATOR CRAWFORD: All cash funds. [LB834]

SENATOR HOWARD: It's all cash funds, yes. [LB834]

SENATOR RIEPE: Okay. Are there other...Senator Linehan, please. [LB834]

SENATOR LINEHAN: On the fiscal note, too, this...it's at the bottom of the front page, "With the revenue loss, fees for those not covered by the exemption would eventually need to be increased to cover the cost of processing the exempt applications." So I know it's a fiscal note and they always confuse me, but that would have to be a law, right? I mean they can't just...we don't automatically increase. I don't understand what the Fiscal Office is saying there. [LB834]

SENATOR HOWARD: Yeah, we would have to...we would have to increase the fees. It would have to be a statute. [LB834]

SENATOR LINEHAN: So they're just telling us that's their opinion right there. [LB834]

SENATOR HOWARD: I think so. [LB834]

SENATOR LINEHAN: Okay. Because it wouldn't automatically increase them, right? [LB834]

SENATOR HOWARD: No, uh-uh. [LB834]

SENATOR LINEHAN: Okay, all right. Thank you, Senator Howard. [LB834]

SENATOR HOWARD: Thank you. [LB834]

SENATOR RIEPE: Senator Erdman, please. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR ERDMAN: Thank you, Senator Riepe. Thank you, Senator Howard. So let me follow up on what Senator Linehan asked. So if we reduce the fee for some people, some other people are going to have to pay more? Is that what you're saying? [LB834]

SENATOR HOWARD: They're saying that potentially we would have to increase the fees at some point, if the...there was a revenue loss. [LB834]

SENATOR ERDMAN: On page 2 of the fiscal note, it says there that 42 percent of the people would be in that age group of 18-25. And so 42 percent of the licensure people would be getting free licensing. And so that resulted in \$175,000 lost revenue. [LB834]

SENATOR HOWARD: I mean I... [LB834]

SENATOR ERDMAN: That's a pretty significant number. [LB834]

SENATOR HOWARD: Right. When I look at a fiscal note, I tend to judge it based on whether it's coming from the Legislature or the state. So I put a lot more weight on the legislative fiscal note and its veracity. The...page 2 is coming from the state agency. I can only imagine...gosh, that's a lot of young workers. 42 percent seems like a high number of everybody who's licensed. But I suppose we would have to ask them more questions about that. [LB834]

SENATOR ERDMAN: When young people get out of school, they've got to get a job. [LB834]

SENATOR HOWARD: They do, yeah. Or at least we want them to get a job. [LB834]

SENATOR ERDMAN: And so they have to have a license. [LB834]

SENATOR HOWARD: Absolutely. [LB834]

SENATOR ERDMAN: So that number seems reasonable. [LB834]

SENATOR HOWARD: That it's 42 percent? [LB834]

SENATOR ERDMAN: The 42 percent. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR HOWARD: And we can ask them more questions about how many licenses they're giving out and maybe get a population feel for the demographics of the licenses that are going out. [LB834]

SENATOR ERDMAN: Well, that same information is on the first page also. [LB834]

SENATOR HOWARD: Um-hum, um-hum. [LB834]

SENATOR ERDMAN: Thank you. [LB834]

SENATOR HOWARD: Thank you. [LB834]

SENATOR RIEPE: Senator Howard, will this be your priority bill, or do you have a priority aligned yet? [LB834]

SENATOR HOWARD: You know, I haven't picked a priority yet, but this one...I actually really like this bill. I'm really excited about it. So yes, this would definitely be on my radar for that. [LB834]

SENATOR RIEPE: Okay. Are there other questions? We assume you'll be waiting for your close? [LB834]

SENATOR HOWARD: I will wait here. Thank you so much. [LB834]

SENATOR RIEPE: Okay. Proponents, please. Welcome. Please have a seat. We need to have you close to the mic so that we can get you recorded. If you'd be kind enough to state your name and spell it, and then the organization you're with, and then proceed forward, please. [LB834]

SHANNON MANION: Yes. My name is Shannon Manion: Shannon, S-h-a-n-n-o-n Manion, M-a-n-i-o-n. My husband is the 55th wing commander at Offutt Air Force Base, so I represent the spouses of Offutt Air Force Base and the military in general. I'm obviously here as a proponent of LB834. I'd first like to say thank you. My husband and I arrived in June and we could not feel more welcome by our local community. And we're blown away by the support we received from our local senators--Senator Blood, Senator Crawford, Senator Howard now--really working hard to help support military families. And this is another bill that could do that. Before I moved to Nebraska, I didn't realize...I didn't think people understood the struggles of military spouses. We're married to people who give service to our country, and we happily do so. Like attracts like.

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

Often, if you ask a military spouse what they do for a living or what they went to school for, you will hear: nurse, teacher, social worker, and the like because, I think, as I said, service attracts service. We're people who give service. Unfortunately, you'll also hear: but I'm not working right now. The hardships of moving every two years--sometimes one--gets overwhelming. And we lose a lot of those service-oriented spouses, just from the hardships of having to recertify, relicense in every state. I won't go into my personal struggles. I'm an educator by trade, and that's being dealt with tomorrow, thank goodness. But two spouses I wanted to highlight: one is a cosmetologist and one is an occupational therapist. They both now have Nebraska licenses, but their struggles...they would have benefited from this bill. The first, Julie, an occupational therapist, has moved 13 times; she has 13 different licenses as an occupational therapist. This has cost her thousands of dollars and many, many hours. As an occupational therapist, I guess, according to her, each state requires all the other places to testify to your worthiness, so to speak. So each time she needs a new license--and this was true for Nebraska--she has to reach out to all those last 13 places and pay them to tell Nebraska that she's wonderful. So that costs time and money, so much so that she ended up not working, even though she now has a Nebraska license. It took so much time and money that, by the time she got it finished, she was like, well, I only have a year left. So she has not worked in Nebraska as an occupational therapist. And I believe you need occupational therapists, so that's a sad testimony. My second example is Samantha, an enlisted spouse, so enlisted--by nature have less money than officers' spouses. And she's younger; she's only moved five times. And her issues as a cosmetologist, as a hairdresser or...actually both occupations, both the occupational therapist and the hairdresser, they have to maintain their license in some other state in order to mitigate paperwork, or what have you, so they're always paying two license fees. They're paying whatever state they want to maintain and then they're paying Nebraska's license fee. So they're really, to keep it up, paying two license fees. Further with the cosmetologists, sometimes your licenses require different amounts of hours, so she spent over \$1,500 to get more training to up her hours in order to be a cosmetologist. So they're paying duplicate fees often and they're having to do it over and over again. And when you're forced to pay double fees, when you're forced to have to reinvent yourself and reapply to all these things, and it takes you months, it's just a hardship as a military spouse. And there's a saying in the Air Force: We recruit airmen but we retain families. And the number one reason service members leave the Air Force and the military is family hardships. The children and the spouses just don't have it in them anymore to do it. So we, the spouses of Offutt Air Force Base, appreciate your consideration for this bill. Any relief, even if its just a fee waiver for one year, goes a long way to alleviate the hardships of our constant moves. Thank you. [LB834]

SENATOR RIEPE: Thank you very much. Let's see if we have some questions from...Senator Linehan. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR LINEHAN: So I remember talking about educators and getting a license to teach in Nebraska. Are you getting a license? [LB834]

SHANNON MANION: I am not. So most educators, up until now when they look at the Nebraska State Education Web site, we cry. And we just go: I can't do it. And so that's what I did back in June. Plus, with my husband's position, I'm pretty busy, so... [LB834]

SENATOR LINEHAN: Yeah. [LB834]

SHANNON MANION: So I chose not to, but tomorrow they're looking at some great things and giving a special permit for military spouses, so that they have two years to do those fees, because education has actually been worse than the state licenses because you have to retest. You've been teaching history 20 years, you've retested in every state and you have to retest again. And if you want to teach history and English, that's two different tests for \$100 each, plus the fee, it's... [LB834]

SENATOR LINEHAN: When you say they, are you talking about the Nebraska Department... [LB834]

SHANNON MANION: State Board of Education. [LB834]

SENATOR LINEHAN: State Board of Education, Nebraska Department... [LB834]

SHANNON MANION: Yes, um-hum. So tomorrow. [LB834]

SENATOR LINEHAN: Okay, thank you very much. Thanks. [LB834]

SHANNON MANION: Very exciting. [LB834]

SENATOR RIEPE: Okay. Additional questions? Senator Crawford. [LB834]

SENATOR CRAWFORD: Thank you, Chairman Riepe. And thank you for being here, Ms. Manion. And I just want to thank you for your service and thank you for being here to testify. And I really appreciate your advocacy for the spouses and looking at these different licensure issues. So thank you. [LB834]

SHANNON MANION: Thank you. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Okay. Any other questions from the committee? Seeing none, thank you very much for being with us. Additional proponents, please. [LB834]

NICOLE FOX: (Exhibit 2) Good afternoon, Chairman Riepe. [LB834]

SENATOR RIEPE: Would you be kind enough to introduce yourself... [LB834]

NICOLE FOX: Yeah. [LB834]

SENATOR RIEPE: ...and give us your name and spell it, please. [LB834]

NICOLE FOX: Yeah. So Nicole Fox, N-i-c-o-l-e F-o-x, and I am director of government relations for the Platte Institute. Thank you for this opportunity to discuss occupational licensing. And I'd like to thank Senator Howard for introducing this bill. In the 1950s, 1 in 20 occupations in the country required a government permission slip, also known as an occupational license, to work. Fast forward to today, and now one in three occupations in the country require this government permission slip. This national trend holds true for Nebraska. Occupational licensing laws were initially created as a means of protecting the public from negligent and unqualified practitioners but, more and more, instead of protecting the public from harm, we now know that occupational licensing is making it difficult for new workers to enter the workforce. 102 occupations have been deemed low-income by the U.S. Bureau of Labor Statistics. 45 of those 102 occupations require licensure here in Nebraska. A low-income occupation is defined as an occupation where the average income is less than half of the national average. The Institute for Justice's November 2017 "License to Work" report revealed that it takes an average of nine months of training, one exam, and \$203 in fees to work in one of these 102 low-income occupations. Keep in mind that workers applying for these licenses may have experienced loss of income while obtaining needed training, may have had significant tuition costs and, in many cases, may also have to pay for continuing education to maintain that license, moving forward. Occupational licensing greatly impacts military families. According to the Obama administration's 2015 occupational licensing report, 35 percent of military spouses in the labor force work in professions that are regulated. And they are ten times more likely to have moved across state lines in the last year than their civilian counterparts. These military spouses may have difficulty acquiring a new license each time they move, as we just heard from. Given the fact that Nebraska is home to Offutt Air Force Base, we need to ensure that our occupational licensing requirements allow military spouses and veterans to readily enter our workforce. It is not uncommon for one entering an occupation only to realize it is not the occupation they are meant to be in throughout their working years. The Federal Trade Commission has stated that, because of the time and the cost involved, occupational licensing reduces opportunities, restricts employment, and keeps individuals in jobs that may not be the best fit for them. LB834 waives

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

first year licensing fees for occupations under the Uniform Credentialing Act, for individuals who are identified as low-income, part of a military family, or a person between the ages of 18 and 25. And as mentioned in her opening comments, there are...Senator Howard's opening comments, there's been similar legislation passed in other states and I also believe that the FGA will be talking about those states as well. A side note--just learning about the fiscal note, I would say that the Platte definitely would oppose this. We don't feel that...I mean first of all, workers are paying for a government permission slip to work. And then we don't feel that it is appropriate for workers to be subsidizing government jobs. So we find this to be--this fiscal note--to be ridiculous. The Platte Institute supports waiving these fees for first year...these first-year fees on taxes, on government permission slips to earn a paycheck. The Platte Institute views LB834 as a win for workers, and it will help grow Nebraska's economy. I ask that committee members advance LB834 to General File. And with that, I'll take any questions. [LB834]

SENATOR RIEPE: Thank you very much. Questions from the committee? Seeing none, thank you very much. More proponents? Welcome, sir. [LB834]

JAMES GODDARD: (Exhibit 3) Thank you. Good afternoon. My name is James Goddard; that's J-a-m-e-s G-o-d-d-a-r-d. I'm the director of the economic justice and healthcare access programs at Nebraska Appleseed, here today to testify in support of LB834. People that work hard should be able to get ahead but, despite hard work, many families still struggle with poverty. Nearly 30 percent of working families in Nebraska earn 200 percent of the poverty level or less. This means earning less than about \$41,000 per year for a family of three. To get a better, higher-paying job often requires additional training and, ultimately, licensure. By 2022, 58 percent of Nebraska's labor market will be made up of middle-skill jobs, but only 48 percent of Nebraskans have the training to meet this demand. The path to a better-paying job should be as accessible as possible, and that is what this bill would aim to do. LB834 would waive the fees associated with application for occupational licenses for low-income folks, young workers, and military families. This is important because even small licensing fees can be a barrier to obtaining an occupational license for people with low incomes. LB834 will help working families avoid this barrier and can help people get a better, higher-paying job. For these reasons we would urge the committee to advance LB834. I'd be happy to take any questions. [LB834]

SENATOR RIEPE: Thank you. We'll see if there are some questions. Are there questions from the committee? Must have been a special job, so thank you very much. [LB834]

JAMES GODDARD: Thank you. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Again, more proponents, those that are supporting this? Okay, thank you. Again, if you'd be kind enough to state your name, spell it for us, please, for the record, and be kind enough to tell us the organization you represent, if you do. [LB834]

JARED MEYER: Yeah. [LB834]

SENATOR RIEPE: And proceed forward. [LB834]

JARED MEYER: (Exhibits 4 and 5) Jared Meyer, J-a-r-e-d M-e-y-e-r. And thank you, Chairman Riepe, for the chance to testify today. I'm a senior fellow at the Foundation for Government Accountability, which is a nonprofit, multistate research organization that promotes work. And that's why we're so excited about LB834, because that's what it does. It promotes work, especially for, as we talked about earlier and as Senator Howard laid out, the three groups that are disproportionately harmed by occupational licensing. And to kind of condense all this and explain why these groups are harmed, I handed out a one-pager that explains some of the key facts. And I think something that's really important to highlight that hasn't been brought up yet, with military families, is that while unemployment rates for many groups are at their lowest levels in years, unemployment rates for military spouses remain almost four times higher than the general population. This is something that both the Trump administration and the Obama administration worked hard to lower, but found that the challenges that military spouses face...there are many of them. This is one way to start chipping away at this problem that we see throughout the country, is by exempting military spouses, unremarried widows, and spouses of veterans from having to pay an initial licensing fee. And I think, when discussing this, it's important to keep in mind, especially in light of the department's fiscal note, that this is only for initial licensing fees. Even if their projections are correct, even if they are they're not taking into account that moving more people into these occupations by lowering the barriers that people face, will lead to more renewal fees in the long term. With licensing you don't simply pay a fee on the first year, then you're done. It's that you, every year or two years, you have to pay a renewal fee. So I see it as by a workforce development initiative, where what we're doing is saying we're going to let go of a little bit of funding in the short term and, in the long term, that's going to lead to the boards being able to stay in operation. And if there is a slight decrease, which I should point out in the states like Arizona, which have a 200 percent federal poverty-line waiver, they've seen no negative effects. Florida has a bill that's almost exactly like this one, that passed unanimously last year. They've seen no negative effects. But even if there were slight ones, I really don't think it's the position that the government should take, that people who are defending their country, just starting their careers, or working to bring their families out of federal--or out of poverty--should be funding these boards. So I see it as a way that this is a justice issue. It's a workforce development issue, and it's really one of fairness and creating opportunity because, as we discussed, \$200...it may not be the end of the world if one of us had to pay it, but \$200 is the average that a working class family spends on a week's worth of

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

groceries. When you have to choose between a week's worth of groceries or going and paying to be able to start work, some families don't have the luxury to make that choice. And we see this all over. A lot of people would benefit from this, from a lot of low- and middle-income occupations, and as I said with the military spouses, I think this follows nicely on LB88, which was passed last year in Nebraska, that allowed military spouses to transfer their nursing license and receive some reciprocity from the state. So I see it as continuing some of the progress that Nebraska has made and the strong commitment that the state has to helping military families and low-income individuals. And the last point I'll make is just that young workers will be helped by this as well because, as we talked about military spouses facing elevated unemployment rate, but young workers are still struggling with the economic recovery. If you look, the teenage unemployment rate is over 14 percent still. And young workers, 20-24, face an over 7 percent unemployment rate. So while the rest of the country--older workers who have had a chance to get a license and establish themselves in the workforce--might be doing better, a lot of young workers are still struggling. So I see this as a great way to help those three groups all participate more in the labor force and make Nebraska's economy more dynamic. And I'm happy to answer any other questions about the bill, and thank you for your time today. [LB834]

SENATOR RIEPE: I want to jump in quickly with a question. I think I picked up on some of the language you used that said the unremarried widows, and I'm kind of going...tell me more. [LB834]

JARED MEYER: Oh, so someone whose spouse served in the military and their spouse died in service to their country, if they're not remarried, they would also have the licensing fees waived. That's how it's defined. [LB834]

SENATOR RIEPE: But if they're married, they're not qualified...if they remarry. [LB834]

JARED MEYER: If they remarry to a nonmilitary household, then they do not qualify, as written in the bill under ...it's defined in Section 2, point 4. Yes, it says "unremarried surviving spouses of deceased service members." [LB834]

SENATOR RIEPE: And with no time limit. [LB834]

JARED MEYER: Correct, no time is put in on that. [LB834]

SENATOR RIEPE: It seems like that might be...it's a little punitive, but that's me, maybe. Other questions from committee members? Seeing none... [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

JARED MEYER: Thank you. [LB834]

SENATOR RIEPE: Thank you; thank you for being here with us today. Again, more proponents? Proponents speaking in favor? Seeing none, any opponents, those in opposition? Seeing none, is there anyone here in a neutral capacity, or feels like they're in a neutral capacity? Okay. Seeing none, Senator, would you like to close? And while you're doing that, Tyler, do we have any letters? [LB834]

TYLER MAHOOD: (Exhibits 6, 7, 8, and 9) Yes. I have a letter...I have a letter, signed by Dr. Robert Rhodes of the Nebraska Medical Association, in support; David McBride of the Nebraska Optometric Association, in support; a letter, signed by the members of the Board of Cosmetology, Electrology, Esthetics, Nail Technology and Body Art, in opposition; and a letter, signed by Terry Werner of the Nebraska Chapter of the National Association of Social Workers, in neutral. [LB834]

SENATOR RIEPE: Okay. [LB834]

SENATOR HOWARD: Well, I bet you never thought you'd see this day, where it's sort of strange bedfellows, I would say. I got really excited about this bill because, when I was first barred in Illinois after I finished law school, I got my first year free to be an attorney, and I got my first job. And then I had to pay, after my first year, and it was maybe \$1,000, and I wasn't making very much money at this little nonprofit. And so \$1,000 was a lot of money to me at the time. But I had to be grateful for that first year that I had because I couldn't have afforded it my first year when I was looking for work. And so this bill is actually a really wonderful idea, and I'm very excited to introduce it. So I'm happy to try to answer any follow-up questions you might have. [LB834]

SENATOR RIEPE: Will you be pursuing the fiscal note more? [LB834]

SENATOR HOWARD: Yeah, I'll ask after the fiscal note because that it a little concerning. But yes, thank you. [LB834]

SENATOR RIEPE: Okay. Are there other questions? Comments? [LB834]

SENATOR HOWARD: No? [LB834]

SENATOR RIEPE: Thank you very much. [LB834]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR HOWARD: Thank you so much. [LB834]

SENATOR RIEPE: With that, I declare LB834 has received a full and fair hearing, and this closes the hearing on LB834. Thank you so much for those of you who travelled, and do know we appreciate our Air Force and our Navy and our Army...all of them. Thank you. Our next bill up is LB894...Senator Crawford. And don't take it personal that so many people left. [LB834 LB894]

SENATOR CRAWFORD: Oh. Okay, I'll try not to. Good afternoon, Chairman Riepe and members of the Health and Human Services Committee. For the record, my name is Sue Crawford, S-u-e C-r-a-w-f-o-r-d, and I represent the 45th Legislative District of Bellevue, Offutt, and eastern Sarpy County. I'm here today to open on LB894, the Recognition of EMS Personnel Licensure Interstate Compact, or REPLICA. I was asked to introduce REPLICA in Nebraska on behalf of NEMSA, the Nebraska Emergency Medical Services Association, to allow Nebraska EMS personnel to provide care across state lines, under authorized circumstances, and to provide standardized practices and accountability for licensed EMS personnel from other REPLICA states, to provide intermittent care in Nebraska. REPLICA has been passed in 12 other states, including our border states of Colorado, Kansas, and Wyoming. And ten states, including Nebraska, have pending legislation. Like other compacts, LB849 (sic--LB894) eliminates red tape and allows licensed and qualified EMS personnel to provide care in another state, under certain circumstances, without having to obtain additional licensures. REPLICA meets its designated purposes by granting licensed EMS personnel a privilege to practice within compact-member states, and establishes a national coordinated database, allowing for the rapid exchange of EMS personnel licensure history between member states. The authorized circumstances covered by the compact include: day-to-day responses, inter-facility transfers, mass-casualty incidents that do not reach a governor's declaration of disaster--for example, providing medical support to Wildland firefighting teams, as well as large-scale planned events when communities are in need of assistance--for example large concert events or sporting events. You can find those on page 20. In addition, REPLICA validates our commitment to veterans and their spouses by creating an expedited pathway to licensure member states. Furthermore, I've added language to the bill that would allow for temporary licensure in Nebraska, for an EMS provider relocating to Nebraska, if such provider is lawfully authorized to practice in another state that has adopted this EMS Personnel Licensure Interstate Compact. Under LB894, EMS personnel will function under their home state protocols, but are required to practice under a medical director's supervision, bringing both accountability to the process and safety to the practice. The bill defines a medical director as a physician licensed in a member state, who is accountable for the care delivered by EMS personnel. Further, to participate in the compact, member states must have passage of the National Registry of Emergency Medical Technicians examination as a requirement for their state licensure. This standard assures that individuals coming from member states have knowledge that is appropriate to perform these duties. The compact does not address all EMS

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

license types issued by the department. Specifically, emergency medical responders--EMRs--and the emergency medical technician intermediates are omitted from the compact and would not be eligible for compact privilege. EMRs are not included because the scope of practice for EMRs varies significantly among states. It should be noted that EMT-1 licenses are no longer issued by the department and LB924, also heard today, would sunset the EMT-I license type in 2025. An interstate commission for EMS personnel practice has been established to administer the compact. This joint public agency develops policies and performs rule making, specific only to the movement of EMS personnel under the compact in authorized circumstances and the coordinated database. All aspects of the commission's work is open to public participation and subject to public review. There are no fees for REPLICA. Sustainable funding through the National Registry of EMT is used to fund the compact. In addition, I've added language into the legislation, in Section 15 (sic--Article 15): "Construction and Severability," that Nebraska can and will monitor commission activities and, if an assessment should be necessary in the future, our state can decide whether or not to stay in the compact. In addition, once Nebraska joins the compact, our state will have a seat on the commission responsible for these decisions. In order for Nebraska's EMS personnel, patients, and veterans to realize the benefits of REPLICA, the Legislature must pass LB894. Without this legislation, the following challenges will continue to exist in Nebraska: Licensed personnel in Nebraska will continue to have to maintain multiple license to provide care across state lines. Conversely, out-of-state EMS personnel will be required to go through the Nebraska licensure process when carrying out assigned duties on an intermittent basis. Nebraska will not have access to the coordinated personnel database for rapid exchange of licensure history, and veterans will not have priority status for licensure. The Nebraska Association of Trial Attorneys recently reached out to my office with an amendment proposal that would clarify the immunity provisions found on page 28 of the compact. The immunity language that they have proposed, that was also used in Senator Blood's APRN compact, would clarify that representatives of the compact commission have the same level of immunity as afforded to state employees. Immunity language for commission members is a standard part of compact language, and with this amendment the parties...that the parties have agreed to, it adds clarity about the protections this clause provides. I'm happy to work with the committee as we review this amendment. Following my opening, you'll hear from REPLICA representative Sue Prentiss, who will also be able to answer technical questions about the compact, as well as representatives from NEMSA, who will speak to the importance of this legislation for Nebraska EMS personnel. I appreciate your attention to the bill, and I'm happy to try to answer any questions that you may have. [LB894]

SENATOR RIEPE: Thank you, Senator Crawford. Are there questions from the committee?
Senator Erdman. [LB894]

SENATOR ERDMAN: Thank you, Senator Riepe. Thank you, Senator Crawford. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: Thank you. [LB894]

SENATOR ERDMAN: On page 5...page 8 at the bottom, Section 5, it says the board shall review decisions. Who's the board? What are they referring to there in that covenant? [LB894]

SENATOR CRAWFORD: So the board will be--I'm not sure what page it is that says regarding that term. [LB894]

SENATOR ERDMAN: Is that the board comprised of the people who are in the compact now, that we're going to get a seat on, that you mentioned in your testimony? [LB894]

SENATOR CRAWFORD: Let's see, page 5 again. What page was that that the... [LB894]

SENATOR ERDMAN: That was page 8 on the bottom, Section 5. [LB894]

SENATOR HOWARD: Yeah. [LB894]

SENATOR CRAWFORD: Actually that is our...that is our board, so it would be...it's in a section where it's talking about our own EMS board. [LB894]

SENATOR ERDMAN: EMS board? [LB894]

SENATOR CRAWFORD: Yes, thank you. And upon approval by the commission, and that is actually telling our board--excuse me--that if there's anything that increases cost, that they can recommend to the Legislature that we withdraw from the compact. But it's...you can withdraw from the compact at any...states can withdraw from compacts. Put this language, really, to get our board, our EMS board, engaged in notifying us. [LB894]

SENATOR ERDMAN: Okay. [LB894]

SENATOR CRAWFORD: And that may happen, so that we would be attentive to that and determine whether or not to withdraw from the compact. [LB894]

SENATOR ERDMAN: Okay. Thank you. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Are there other questions from the committee members? Seeing none, we're confident you will stay around for closing. [LB894]

SENATOR CRAWFORD: All right, I will. Thank you. [LB894]

SENATOR RIEPE: Thank you very much. I'd like to now go to proponents. Welcome, and if you'd be kind enough to turn in your orange paper, and then we'll ask you to give us your name and spell it, please, and your organization. And then the time is yours. [LB894]

SUE PRENTISS: (Exhibit 1) Good afternoon, Chairperson Riepe and members of the Health and Human Services Committee. My name is Sue Prentiss, S-u-e P-r-e-n-t-i-s-s, and I am testifying today in support of LB894, and having Nebraska join the Recognition of EMS Personnel Licensure Interstate Compact, REPLICA. By way of background, I am a long-time EMT and paramedic, I've spent many years volunteering in rural settings in both Vermont and New Hampshire, settings not unlike those here in Nebraska, and understand the challenges that face our EMS professionals, career and volunteer, every day. I currently serve as the national advocate for REPLICA. I am passionate about REPLICA, as I have had firsthand experience in having to hold multiple state licenses in order to do my job in service to patients, to whom state borders did not matter to them when they had a medical need. What did matter is that the closest, properly trained, and credentialed professionals were available to assist. EMS professionals around our nation and in Nebraska want to enter into the compact in order to ease the burden currently felt in the course of carrying out their duties when those duties involve crossing state lines. By design, to solve this problem and lessen the burden, REPLICA extends a privilege for EMS personnel from member states to practice on a short-term, intermittent basis, under approved circumstances. Additionally, REPLICA enables the ready exchange of information, between member states through a coordinated database, regarding EMS personnel licensure history, adverse actions, and significant investigatory information. By doing so, REPLICA promotes the highest level of public protection to patients and to EMS personnel in your state's EMS system. REPLICA also provides a unique opportunity to support members of the military and their spouses with a clear pathway...with a clear and timely pathway by which to become licensed. In order to join REPLICA, states must utilize the National Registry of EMT exam for initial licensure only, at the EMT and paramedic levels, have a system to conduct criminal background checks for EMS personnel, compliant with the FBI criteria, based on the results of a fingerprint or other biometric data within five years of the compact enacted, have a mechanism in place for receiving and investigating complaints about individuals. Nebraska currently utilizes the NREMT exam for initial licensure and has a system in place for managing investigations. New to your state would be the implementation of the FBI-compliant background check with biometric data. This would only apply to new licensure applicants, once the system is in place. And if Nebraska joined the compact this year, you would have four years to put this program on-line. EMS personnel will function under their home state protocols and would be required to

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

have physician supervision, bringing both accountability to the process and safety to their practice by not requiring different protocols based on location. The compact contains language allowing for the appropriate authority in Nebraska to modify EMS personnel scope of practice if deemed necessary. It's important to note that Nebraska, along with its neighboring states, have built their scope of practice and protocols, based from the National EMS Scope of Practice Model. An Interstate Commission for EMS Personnel Practice has been established to administer the compact. This joint public agency's authority is limited specifically to compact activities. Nebraska maintains full control and authority over its EMS laws and rules in all other areas. REPLICIA does not apply to EMS agencies. Nebraska maintains full control. In the past two years, the Nebraska Legislature has voted in favor of adopting two healthcare licensing compacts, including the Enhanced Nurse Licensure Compact and the Interstate Medical Licensure Compact for physicians. Today there are 12 REPLICIA states, including your neighbors: Colorado, Wyoming, and Kansas. It is my hope that Nebraska will move forward and become number 13. A REPLICIA bill has been introduced in both the Missouri House and Senate. Chairperson, members of the committee, with that I ask for you to favorably consider this bill, and I'd be happy to stand for any questions. [LB894]

SENATOR RIEPE: Thank you very much. [LB894]

SUE PRENTISS: Thank you. [LB894]

SENATOR RIEPE: We'll see if there are some questions. Are there questions from the committee members? Senator Williams. [LB894]

SENATOR WILLIAMS: Thank you, Chairman Riepe. And thank you for being here today. I have a question. In your testimony, it states, "The compact contains language allowing for the appropriate authority in the state of Nebraska to modify EMS personnel scope of practice if deemed necessary." If deemed necessary by who? And how would you change that scope? And would it be required to be changed? [LB894]

SUE PRENTISS: It would be if the state of Nebraska deemed it necessary. So when considering surrounding states or other compact member states, and looking at their scopes of practice, if Nebraska became concerned about a particular skill, then the authority in the state of Nebraska that's identified could modify the scope of practice. So that was the first part of your question, but there was a second part. [LB894]

SENATOR WILLIAMS: And I want to build on that. It would seem to me the only time that they would need to change their scope of service is if we were lowering the scope of service. Am I misinterpreting something there? [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SUE PRENTISS: No, you're not. And... [LB894]

SENATOR WILLIAMS: So would we be required, in any way under this legislation, to lower that scope if that was not deemed in the best interest to the public? [LB894]

SUE PRENTISS: No. You may; you're not required. And... [LB894]

SENATOR WILLIAMS: So how do you deal, then, with an EMS crossing a state line, when you clearly have a difference in scope? [LB894]

SUE PRENTISS: The Nebraska authority would, in identifying that through the compact, would address that particular...it would be an entire state. You would talk to Kansas or you would talk to Wyoming or Colorado and say: we are fine with all of these things, but this one particular item is something that we don't do here in Nebraska and that we don't want to have done here in Nebraska. So they would put that in place and those eight...that personnel would have to abide by that. [LB894]

SENATOR WILLIAMS: So the board that governs the compact would have no authority to change the local scope of practice... [LB894]

SUE PRENTISS: Correct. [LB894]

SENATOR WILLIAMS: ...in a particular state that's involved in the compact. [LB894]

SUE PRENTISS: Correct. [LB894]

SENATOR WILLIAMS: Okay. Thank you. [LB894]

SUE PRENTISS: You're welcome. Thank you. [LB894]

SENATOR RIEPE: Okay. Are there additional questions from the committee members? Seeing none, thank you very much. [LB894]

SUE PRENTISS: Thank you. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Again, we are addressing proponents. If you'd be kind enough, sir, to state your name and spell it. [LB894]

DAVE HUEY: Sure. [LB894]

SENATOR RIEPE: And then proceed. [LB894]

DAVE HUEY: My name is Dave Huey, D-a-v-e H-u-e-y. I'd like to say good afternoon, Chairman Riepe, members of the Health and Human Services Committee. I'm the vice president for NEMSA, and representative of NEMSA on its behalf, the Nebraska Emergency Medical Services Association. As you know, we're an organization dedicated to providing the highest quality prehospital care that we can to the citizens, and trying to encompass all of the entities--the EMRs, the EMTs, advanced EMTs, and the paramedics--and then try to make sure that their practice, you know, falls with under the Emergency Medical Services Practice Act. I'd like to start out by saying thanks to Senator Crawford, you know, for introducing LB894, the Recognition of EMS Personnel Licensure Interstate Compact, okay, which you all know as REPLICA. I'm not going to repeat everything that we were talking about. However, I do know that REPLICA increases access to EMS for patients, reduces regulatory barriers for EMS personnel, and brings unprecedented accountability to the EMS profession. Currently our numbers are dwindling. Two years ago, we were about 7,200 EMS providers in the state of Nebraska. Last report I got we're roughly around 6,200 right now. I know four years ago we were at 8,500. So the trend is not increasing; it's decreasing. So as much help as we can get, you know, to help take care of our citizens is the goal, is the main intent. Our first...our organization first became interested in pursuing REPLICA because of its benefits for EMS personnel, namely: eliminating time, paperwork, cost associated with maintaining multiple license. I'm one of those individuals that I have to maintain two licenses in two different states, you know, in order to provide care. EMS personnel obtain and maintain these licenses in our home state, but then we receive the privilege to practice in other states that are REPLICA states, as well. They identified those states earlier. Our members would like to see this bill passed in order to allow our practice to extend across state lines. It would really be nice if you guys could maybe come up with an LB to draw a red line around the state so we know exactly where the state lines are. We've had several problems where we've had incidences, where we've had to respond because a community is close to the accident, but they've crossed the state line. And because of that, they've had to wait for an ambulance service, or another unit, to come, take the patient while they provide care, to be transported to that state's closest facility, rather than being transported right away by that facility. Those communities that are around the border run into these issues all the time. So you know, this includes that need to respond across the state lines, you know, on a daily basis, in special circumstances, for disasters. Okay, as you know, EMS providers are passionate about what they do and they're committed. So we want to be able to provide that patient care across those state lines, and move patients to the most appropriate treatment facility in a timely manner; that's our

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

goal. REPLICIA also creates an expedited pathway, as you heard, for military personnel. I also had that privilege of being a retired U.S. Army medic and, when I wanted to practice on the outside, I had to go back and repeat all of my training through a formal education in order to be licensed in Nebraska, you know. So I definitely have a dear spot in my heart there. The Nebraska Emergency Medical Services Association appreciates the committee's consideration and urges you to advance LB894. I'd like to thank you for your attention, and happy to answer any questions you might have. [LB894]

SENATOR RIEPE: Questions. Senator Kolterman. [LB894]

SENATOR KOLTERMAN: Thank you, Senator Riepe. Welcome. Can you tell...do you have any idea of why we're going in the wrong direction with people applying to be EMS providers? Is it because of the dollars? Is it because of the time commitment? Is it just...when we've gone from 8,000 to 6,000, that's a huge drop. [LB894]

DAVE HUEY: It is. One of the recent studies that came out was that the average age of the EMS responder is about 45 years old. So as you know, as you get older, it gets a little harder to do. It's hard to keep the young people in the smaller communities. They want to go to the big show; they want to go, you know, where the action is. They don't want to be in--what--Gothenburg, where they probably run 100-150 calls a year. You know, they want to do 100-150 calls a day. You know, they want where the action is, so it's hard to keep those young individuals there. Volunteerism is also a big concern. NSVFA has talked to you about that in the past. You know, I'm trying to get people to be engaged and volunteer. We're doing everything we can to help. It's just, you know, it's that volunteer problem nationwide actually. [LB894]

SENATOR RIEPE: Is your organization composed of both volunteers and salaried? [LB894]

DAVE HUEY: Yes, yes we are. [LB894]

SENATOR RIEPE: Senator Kolterman, I'm sorry. [LB894]

SENATOR KOLTERMAN: Just a follow-up. Can you tell me what the cost is, associated with the most entry-level license? [LB894]

DAVE HUEY: Gosh, I'm trying to remember, because it just, just changed recently. I'm trying to remember. I know the last time I looked at a basic EMT-level training, it was about...roughly around \$1,000. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR KOLTERMAN: And hours? [LB894]

DAVE HUEY: And hours is about 150-175, what most programs are running. [LB894]

SENATOR KOLTERMAN: Thank you. [LB894]

DAVE HUEY: Okay. [LB894]

SENATOR RIEPE: Senator Williams. [LB894]

SENATOR WILLIAMS: Thank you, Chairman Riepe. And thank you, Mr. Huey. And you said you have experience in crossing state lines now with this? [LB894]

DAVE HUEY: Yes. [LB894]

SENATOR WILLIAMS: Can you tell me what states those are? [LB894]

DAVE HUEY: I have a license in Nebraska and a license in Iowa. [LB894]

SENATOR WILLIAMS: Okay. And Iowa is not one of the ones that's already in REPLICIA. [LB894]

DAVE HUEY: Not yet. [LB894]

SENATOR WILLIAMS: Not yet. Tell me what happens to you now. You're licensed to do that, but how do you keep track of the potential scope issues when you cross the river? [LB894]

DAVE HUEY: I have to do a lot of remembering, which is getting harder, at my age, to do. But try to review those scopes on a regular basis because they change on both sides, and try to use a lot of common sense, as well, you know, with the...what the scope would be or the intent. [LB894]

SENATOR WILLIAMS: So clearly we have scope differences. [LB894]

DAVE HUEY: Minor. They're not major scope changes; they're just little, little things that, you know. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR WILLIAMS: Would you see...and again, the previous testimony was that Colorado, Wyoming, and Kansas already have... [LB894]

DAVE HUEY: Yes. [LB894]

SENATOR WILLIAMS: ...adopted this, and they...we neighbor them. With this, would it...you have the licensing issue that is helped. But does passing this help with the scope issue and understanding that...understanding the differences? [LB894]

DAVE HUEY: It would because then it would make the surrounding states, as well as our state, you know, become more meshed together. So in the event when we do cross lines, we can operate, you know, as close as we can to both states' intent of scope of practice. [LB894]

SENATOR WILLIAMS: Okay, thank you. [LB894]

DAVE HUEY: You bet. [LB894]

SENATOR RIEPE: Any other...I see no other questions, so thank you very much for being here with us today. [LB894]

DAVE HUEY: Thank you for your time. [LB894]

SENATOR RIEPE: Thank you. Additional proponents? If you'd be kind enough to state your name, spell it, and your organization, and proceed forward. [LB894]

ANN FIALA: Good afternoon. My name is Ann Fiala, A-n-n F-i-a-l-a, and thank you for letting me present testimony today. I've been authorized to testify on behalf of the Nebraska Board of Emergency Medical Services, in favor of LB894, REPLICA. And Recognition of EMS Personnel Licensure Interstate Compact was presented to the Nebraska EMS Board on April 24, 2017, by REPLICA advocate Sue Prentiss. This compact was thoroughly researched and vetted by the board, and unanimously approved for recommendation to the Nebraska Legislature, for adoption. In addition to this unanimous recommendation, REPLICA is also strongly supported by the Nebraska Emergency Medical Services Association, as you just heard, and the Nebraska State Volunteer Firefighters Association, the very stakeholders who would utilize the proposed compact. There are no fees to the state of Nebraska for adoption and administration of REPLICA, thanks to the National Registry of EMTs providing funding. Current EMS license holders would be grandfathered in, upon adoption, and not be required to provide fingerprint background checks, only new licensees will be, following the potential adoption of LB894.

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

Fingerprint background checks are becoming more prevalent in workplaces. Employing licensed healthcare providers--excuse me--it is quickly becoming the norm, so as to provide the highest personal protection to the patients that they serve. The Nebraska Board of EMS strongly recommends Nebraska adopt the REPLICA Interstate Compact, first and foremost, because it will improve patient care and safety, nationwide, by promoting and providing a far more efficient process and thus considerably higher level of care through the use of a nationally coordinated database. It also provides yet another strong incentive to our dwindling volunteer and professional EMS workforce to explore other avenues of employment with their licenses. I appreciate the opportunity to be able to address this committee on LB894, on behalf of the Nebraska Board of EMS, and we thank you for your sincere and serious consideration of advancing LB894. [LB894]

SENATOR RIEPE: Okay, and thank you very much. We'll see if we have any questions. Any questions from the committee? Seeing none, thank you very much; we appreciate it. [LB894]

ANN FIALA: Thank you. [LB894]

SENATOR RIEPE: That...proponents? [LB894]

JERRY STILMOCK: Thank you. Mr. Chair, members of the committee, my name is Jerry Stilmock, J-e-r-r-y Stilmock, S-t-i-l-m-o-c-k, testifying on behalf of my clients, the Nebraska state Volunteer Firefighters Association and the Nebraska Fire Chiefs Association, in support of LB894. Thank you to Senator Crawford for bringing the legislation, a very important piece of legislation that has been talked about for a couple years, and a time that, hopefully, that we move forward on this. Of course, that volunteer EMT, paramedic, or other level of EMT, has to be tethered to a service. They can't just be roaming across the state, important factor considered within the REPLICA legislation. It does allow, as you've heard perhaps, that it allows the Board of EMS, the reference by Senator Erdman earlier, the board, the Board of EMS appointed by the Governor, of which several members are volunteers on the EMS side, they can recommend back to you to withdraw if there should ever be any reason not to be a part of REPLICA. I think that's an important part. Probably the item that jumped out to me, most importantly, was the immediate legal recognition of EMS personnel to cross state lines. Think, if you will, back to 1989. There was a horrific airplane accident, United Airlines flight that crashed in Sioux City, Iowa. Undoubtedly there were several agencies, multistate agencies, that responded to that horrific plane wreck. The volunteers crossed those lines without recognition of: Oh my goodness, I'm in Iowa now. But this would allow that immediate legal access for crossing state lines. And you know, the...I referenced the United Airlines, the crash. Also think in terms of a few years ago, when we had the wildland fires skipping across, back and forth, South Dakota and Nebraska. Both states were engulfed; both states were active with volunteer fire, volunteer rescue as well,

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

crossing back and forth. That would be another area where that would happen. Probably the day-to-day things that happen most often though is, you know, if a collision or a heart failure would happen in a neighboring state that said, you know: We want the Syracuse Rescue Squad to go down to Hiawatha, Kansas, and pick up Stilmock and bring him back to Lincoln. Certainly those things happen now, but this would give that immediate legal recognition so that those volunteer EMTs and paramedics and other levels of EMTs would be able to cross safely. We think it's a good idea. Obviously the conversation up to this point, on this particular bill, is what's happening with the volunteers throughout the state? Obviously the two clients that I represent, they have members of both fire personnel and EMS, some of which do both jobs, and you've addressed one of those issues with prior legislation, in awarding a tax credit. We're seeing the first year completed of that legislation. In 2016, just over 2,000 volunteers qualified for that \$250 tax credit. As you recall, perhaps, you have to...and for our sophomore senators, they wouldn't have been here for that. But you have to qualify two years, not because...not back-to-back, but two years in order to qualify. And so those numbers for the second year in 2017 are just coming in. They have to be filed with the Department of Revenue by mid-February. So even though we know there are approximately 8,000 EMTs throughout the state, we need to continue to recognize we think this is...recognize the problem, and we think this is a way that would be one way to go about helping out those men and ladies that serve as volunteers throughout the state. Senators, it's our request that, senators, that you advance LB894 to General File. Thank you. [LB894]

SENATOR RIEPE: Okay, thank you very much. [LB894]

JERRY STILMOCK: Yes, sir. [LB894]

SENATOR RIEPE: Are there questions from the members of the committee? Seeing none, thank you very much for being with us. [LB894]

JERRY STILMOCK: Thank you, Senators. [LB894]

SENATOR RIEPE: We are still talking to proponents. If you'd be kind enough to state your name and spell it, and organization, and take it away. [LB894]

MIKE MILLER: You bet. Good afternoon, senators. My name is Mike Miller, spelling is M-i-k-e M-i-l-l-e-r. I am here, not representing any specific organization, but myself. I am a paramedic, EMS instructor, and registered nurse, working in emergency medicine for over 30 years. The last 15 years I have worked at Creighton University, where I currently serve as assistant professor and EMS education program director. Though I am a member of the Nebraska Board of EMS, my testimony today is my own opinion as a passionate Nebraska EMS stakeholder. I would like

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

to ask for your support for LB894, the Emergency Medical Services Personnel Licensure Compact, otherwise known as REPLICA. REPLICA is a national initiative that began in 2012, becoming a reality in May of 2017, when the tenth state enacted legislation to implement REPLICA. As you have heard, currently 12 states have enacted REPLICA, and the REPLICA Commission officially assembled three months ago for their very first meeting. Also, as you have heard, Colorado, Kansas, and Wyoming have enacted REPLICA, states bordering Missouri---bordering Nebraska, and Missouri is the fourth state that would border us that has implications for Nebraska joining this process. REPLICA represents an innovative and important policy solution to help EMS personnel manage the challenges presented in the practice of interstate emergency and lifesaving operations. There are many reasons to support REPLICA. REPLICA reduces regulatory burdens for EMS personnel and agencies by extending privilege to practice for licensed EMS personnel in other compact-member states. Perhaps the most important personal benefit is that EMS personnel will see a reduction in time, paperwork, and costs associated with maintaining multiple licenses. Finally, the Interstate Compact safeguards the public through enhanced disclosure of regulatory and disciplinary actions between states. And on a personal note, as a registered nurse, of which Nebraska participates in a nursing compact, I have the privilege and ability to be able to cross state lines, based on my Nebraska nursing license in my home state. That currently cannot be said from an EMS perspective. As a licensed paramedic, if I want to work in Iowa, Minnesota, or any other state in the country, currently I would have to hold a license in each and every one of those states and comply with their regulatory environment. Thank you and, with that, I am happy to accept any questions. [LB894]

SENATOR RIEPE: Are there questions? It's my understanding that currently you can cross state lines. Are you saying that's not the case? [LB894]

MIKE MILLER: So if a transport originates or terminates in the state of your license, then yes, you could. So for example, if I am picking up a patient, as an Iowa-licensed paramedic, that needs to get to Omaha to a tertiary care center, for example a trauma center that doesn't exist at the same level in Iowa, then yes, I would be able to do that. But if I were to get called into the state of Iowa, as a Nebraska provider without an Iowa license, at a call that originates in Iowa and terminates in Iowa, for example the United plane crash that happened at the Sioux Gateway Airport that then ultimately went to a hospital in Iowa, I am breaking the law by doing so. [LB894]

SENATOR RIEPE: Okay, thanks for that clarification. [LB894]

MIKE MILLER: You bet. [LB894]

SENATOR RIEPE: Added questions? seeing none, thank you very much. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

MIKE MILLER: Thank you. [LB894]

SENATOR RIEPE: Are there additional proponents? You know the game, the whole process. [LB894]

KIM ROBAK: I do know the game, thank you. Senator Riepe and members of the committee, my name is Kim Robak, K-i-m R-o-b-a-k. I'm here today in support of LB894, on behalf of Methodist Hospital. Methodist met this morning to talk about legislative bills and what positions they would take on these bills. And when this bill came up they said: We think you should support it. I said: Well, that's nice to know. The hearing on this bill is today, so I will certainly go let the committee know. There are a couple of reasons, Methodist being a hospital that is on the border between Nebraska and Iowa. While Iowa has not adopted this particular compact as of yet, if it should it would make, for situations that were described earlier, much easier for a hospital like Methodist, that has hospitals in both Nebraska and in Iowa. There are some protections in this compact that make it easy to support. Hospitals that...specifically on page 18, it provides that any member state may require an individual to obtain and retain a license to be authorized to practice in the member state under circumstances that are not authorized by the privilege to practice under the terms of the compact. So we read that to mean that a state can say if you want to come into our state, you have to have these particular credentials. So the state has that protection of setting their own standard of care. It goes on to state that, in order to get a license under the compact...on page 18 it lists five elements that everybody has to have, so you know that, going in, if you're going to be a part of this compact. And then finally, there is a provision, and it starts on page 23 and goes to page 28, and that's the description of what the commission can do. Under a previous compact that we had discussed, the commission can actually set the scope of practice. That's not the case with this particular piece of legislation. The commission is an administrative commission only. It deals with gathering information. It deals with ethics. It deals with other aspects, but not the setting of the scope of practice. So with those protections in place, Methodist supports the bill and we thank Senator Crawford for bringing it. [LB894]

SENATOR RIEPE: Thank you very much. Are there questions from the committee? Seeing none, we appreciate your being here. [LB894]

KIM ROBAK: Thanks. [LB894]

SENATOR RIEPE: Additional proponents? I know we have one coming over here. We know that you know the rules of engagement, so we'll let you go. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

NICOLE FOX: (Exhibit 2) Yep, I know the rules, and I'll be brief. Nicole Fox, N-i-c-o-l-e F-o-x, director of government relations with the Platte Institute. Thank you for the opportunity today to testify in support of LB894, and we thank Senator Crawford for introducing this bill. LB894 would allow Nebraska to participate in the EMS Personnel Licensure Interstate Compact, also known as REPLICA, a compact that recognizes the need for EMS personnel to respond across state lines in their day-to-day responsibilities. Currently 12 states are participating in REPLICA, as previously mentioned, including our neighbors Kansas, Colorado, and Wyoming. And Missouri also has REPLICA bills that have been introduced in both the House and Senate this year. Participation in REPLICA would benefit Nebraska in the following ways: First, state EMS officials will have the ability to rapidly share licensure history of personnel through access to a national EMS personnel database, reducing time and paperwork for...to obtain licensure; underserved areas in Nebraska will have access to services provided by EMS personnel from other states who have licenses in good standing; and third, an expedited pathway to licensure, for military personnel and spouses separating from active duty, will be established for those wanting to stay and work in Nebraska. The Platte Institute feels that LB894 will both grow Nebraska's economy and improve the safety of the public. This also brings us up to speed with our neighboring states, and I ask that LB894 be advanced out of committee. [LB894]

SENATOR RIEPE: Questions of the committee members? Seeing none, thank you very much. Any additional proponents, those speaking in favor? If not, we go...we're going to opponents. Any opponents in the audience? Seeing none, are there any there that want to testify in a neutral capacity? Okay. Seeing none, Tyler, give us any letters or e-mails that we've received, and then we will ask for Senator Crawford to close, if she chooses. [LB894]

TYLER MAHOOD: (Exhibits 3, 4, and 5) Yes, I have a letter, signed by Andy Hale and David Slattery of the Nebraska Hospital Association, in support; I have a letter, signed by Dr. Eric Ernest, representing himself, in support; and a letter, signed by Darren Garrean and Thomas Breyer of the International Association of Fire Fighters and the Nebraska Professional Fire Fighters Association, in opposition. [LB894]

SENATOR RIEPE: In opposition? Okay. Okay, Senator Crawford, would you like to close? [LB894]

SENATOR CRAWFORD: Thank you, committee members, for your attention and questions. And I appreciate all the testifiers who came to support the bill and to answer questions and clarify what the compact would mean for them. I did want to follow up on Senator Williams' question about does it help clarify if you're practicing in another state. So if you see, on page 19 of the bill, it does indicate that when you're practicing in a remote state, you function within your own scope of practice, but it does provide that opportunity, as we discussed, for Nebraska to say:

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

No, this is something you can't do here. And so I think what that does is it makes a more intentional conversation about making sure it's very clear if there are differences in scope of practice that we are intentional about which ones are...that we care about and which...and if there is not any difference between Kansas and Nebraska that we think is substantial, then somebody from Kansas doesn't have to be asking that question to themselves with every action that they take. We've said okay. We've already agreed there's no difference there that we're concerned about, but hey, you know, those folks who are coming from Colorado: Here's one thing that's different and we want you to remember that, and it's an important one that we're not going to have you do in our state. So I think that's an important protection, in addition to the material for the state laid out that's discussed on page 18, in terms of protecting the integrity of our own state licensure. So I wanted to point that out. Any other...I think it's a...again, it's...I think of a good balance of trying to make sure there's ability to practice intermittently across state lines and with some attention to what's important in protecting of the state integrity, as well. And it, again, has...I think it's an important way to try to make sure that we can improve care and allow cross-state, intermittent care in a more effective way in our state. [LB894]

SENATOR RIEPE: Okay. I'm going to just... [LB894]

SENATOR CRAWFORD: Can I answer any other questions? [LB894]

SENATOR RIEPE: ...go to Senator Kolterman. [LB894]

SENATOR CRAWFORD: Yes. [LB894]

SENATOR KOLTERMAN: Thank you, Senator Riepe. Senator Crawford, correct me if I'm wrong, but isn't it...is it accurate to say that if you take a...if you apply for a license and take the test in Kansas, it's virtually the same test that you would take in Nebraska? Isn't it a national test that you take? [LB894]

SENATOR CRAWFORD: Right. This profession, the EMTs have a national test. [LB894]

SENATOR KOLTERMAN: Right. [LB894]

SENATOR CRAWFORD: And actually it says that, in order to be a member of the compact, your state has to use that same national test. [LB894]

SENATOR KOLTERMAN: Right. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: So they're trying to make sure that there's that same qualification across the board. [LB894]

SENATOR KOLTERMAN: And you know what I'm getting at is even if our state licenses might differ in scope a little bit, we still have the understanding of what an EMT could do, or EMS provider could do, from one state to the next. Would that be an accurate statement? [LB894]

SENATOR CRAWFORD: I think that making sure that everyone passes that national test is an important part of making sure there is that intentional qualification across the board, and I think the assumption is that there aren't...that there is not that much difference in the licensure of this profession. But again, there are those protections in place... [LB894]

SENATOR KOLTERMAN: Yeah. [LB894]

SENATOR CRAWFORD: ...just in case a state has something that's of particular importance to them, that they want to make sure that they identify, because it's important, in terms of clarifying what can go on in their state... [LB894]

SENATOR KOLTERMAN: Okay. [LB894]

SENATOR CRAWFORD: ...or clarifying what conditions, what's...criteria they want to make sure those who have license in their state meet. [LB894]

SENATOR KOLTERMAN: Okay, thank you. [LB894]

SENATOR RIEPE: This seems to be the...Senator, please go ahead. [LB894]

SENATOR ERDMAN: Thank you. Thank you, Senator. Senator Crawford, this language...some of your language in your bill is similar to what was in one of the compacts we seen last week. On page 25, line 19 talks about, "The commission shall, by a majority vote of the delegates, prescribe bylaws or rules to govern its conduct as may be necessary or appropriate," so we go and talked about that like we're setting up a separate commission. I thought this REPLICA committee was already set up and we were just joining it. But according to this language, it looks like we're just establishing it. Can you explain why we have that language if it's already set up and we're just joining them? Because it goes on and talks about setting up a... [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: Well, this is the same language that is in every commission state's bill. And so we're laying out, in our own statute, the kinds of things that that commission can do. And so the fact that they're allowed to prescribe bylaws or rules, govern its contact...I mean, that's still true, even though they're already up and running. But we're indicating that that is...as a member, these are the things that we expect the commission can--shall--shall align to. [LB894]

SENATOR ERDMAN: Okay. Okay, so if we...if we proceed over to page 27, it talks about they maintain insurance and bonds and borrow and accept contracts of personnel, have employees, all those things...borrow money and all those things. So at some point in time, this compact could cost us something? [LB894]

SENATOR CRAWFORD: So at some point they can determine if there is a payment, and that's why we put in the special flag to our board, the language we just looked at a minute ago... [LB894]

SENATOR ERDMAN: Yeah. [LB894]

SENATOR CRAWFORD: ...for our board, if it does become the case that they see there are fees or increases...if there are fees or they think there's an increase in costs, that they can notify the Legislature to tell us: We think that we should pull out of this compact because of the fees. [LB894]

SENATOR ERDMAN: That would be the decision of the board to notify? [LB894]

SENATOR CRAWFORD: Well, the board can notify us. [LB894]

SENATOR ERDMAN: Okay. [LB894]

SENATOR CRAWFORD: But also it's the case in these compacts that we, as the Legislature, might decide that we don't want to belong. [LB894]

SENATOR ERDMAN: Would they be required to notify us of a cost? [LB894]

SENATOR CRAWFORD: The board is...it is permissive language in the bill currently. [LB894]

SENATOR ERDMAN: That we'd get notification. [LB894]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: That they may notify us that...it doesn't tell them to notify us in any case of a cost. It tells them to notify us if they think the cost is such that we should pull out of the compact. [LB894]

SENATOR ERDMAN: So they can make the decision to pay whatever the fees are, without contacting us. [LB894]

SENATOR CRAWFORD: Right, as a board. [LB894]

SENATOR ERDMAN: Yeah, yeah. Thank you. [LB894]

SENATOR RIEPE: Okay. Any additional questions? Given the fact this is the year of the session of the fiscal notes, there's a minor one in there that's out of the cash fund. [LB894]

SENATOR CRAWFORD: Cash fund, right. [LB894]

SENATOR RIEPE: Do you know that the Appropriations Committee hasn't raided that and emptied that out (laughter)? [LB894]

SENATOR CRAWFORD: I would not expect that they would have cleaned out the...this cash fund, so I don't think that will be a...the Emergency Medical Operations Fund. I expect there would be \$2,000 there. [LB894]

SENATOR RIEPE: Okay. That's fine. Are there other questions? If not, I declare LB894 has received a full and fair hearing and is concluded. Thank you very much, Senator Crawford. [LB894]

SENATOR CRAWFORD: Thank you. [LB894]

SENATOR RIEPE: The next bill that we're going to hear is LB924. That happens to be my bill, so I will be going to the center table, and Senator Erdman will chair the hearing from this point on. [LB924]

SENATOR ERDMAN: Thank you, Senator Riepe. If you would, when you're ready, open on LB924. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Mr. Chairman and members of the Health and Human Services Committee, my name is Merv Riepe--excuse me--I brought my water in case I need it. My name is Merv Riepe. It's M-e-r-v; last name is Riepe, R-i-e-p-e. I am the legislative representative for Legislative District 12, which is Omaha, Millard, and Ralston. I am introducing LB924 on behalf of the Department of Health and Human Services. LB924 makes changes to the Uniform Credentialing Act, the Occupational Therapy Practice Act, and the Emergency Medical Services Practice Act. LB924 amends the Emergency Medicaid (sic--Medical) Services Practice Act to eliminate outdated language and provide flexibility in practice. The bill amends the Occupational Therapy Practice Act to allow internationally educated individuals to obtain licensure in the state of Nebraska. LB924 eliminates the requirement for signatures on license documents and modifies language contained in the Uniform Credentialing Act regarding the authority of the state to require criminal background checks to be in compliance with requirements of the Enhanced Nursing (sic--Nurse) Licensure Compact. Dr. Thomas Williams, director of the Division of Public Health and chief medical officer, will be following me and testifying in support of this bill. I would defer any specific questions to Dr. Williams. Thank you. [LB924]

SENATOR ERDMAN: Thank you, Senator Riepe. Any questions? You must have done a fine job. Thank you very much. Will you be around to close? [LB924]

SENATOR RIEPE: Yes, sir. [LB924]

SENATOR ERDMAN: Not going anywhere? [LB924]

SENATOR RIEPE: No, sir. [LB924]

SENATOR ERDMAN: Okay, thank you. Any proponents? Good afternoon, Doctor. [LB924]

DR. THOMAS WILLIAMS: Good afternoon. [LB924]

SENATOR ERDMAN: Please state and spell your name, if you would, and... [LB924]

DR. THOMAS WILLIAMS: (Exhibit 1) I will, (inaudible). Good afternoon, Senators and members of the Health and Human Services Committee. My name is Dr. Thomas Williams, T-h-o-m-a-s W-i-l-l-i-a-m-s. I'm the chief medical officer and director of the Division of Public Health in the Department of Health and Human Services, DHHS. I am here to testify in support of LB924, which provides for updates in the Emergency Medical Services Practice Act, the Occupational Therapy Practice Act, and the Uniform Credentialing Act, all in the Division of Public Health in the Department of Health and Human Services. LB924 will change the

Emergency Medical Services Practice Act to allow more flexibility for emergency care providers and services. In the interest of saving time, I will only list the bill changes. There is a more detailed description of the change and benefit in my written testimony. First is: Sunset emergency medical technician intermediate, EMT-I, licenses. This change would align statute with current national educational programs and supports available emergency care providers. Currently there is no method for EMT-Is to reinstate their Nebraska licenses because there are no refresher courses or educational programs available. These technicians are currently titled and trained as advanced emergency medical technicians. Next is: Add emergency medical responder, EMR; emergency medical technician, EMT; advanced emergency medical technician, AEMT; and paramedic definitions to the statutes. Currently these license levels are not individually defined in statute but have a list of skills promulgated in regulation. This change would be consistent with other professions, such as nursing, physical therapy, and occupational therapy, who have the skills they can perform defined by scope of practice and allowed by the training and education they receive in statute. Next is: Eliminate reference to first responders and EMT-paramedic throughout the act because they are no longer a license category. These license types have not been issued or supported since the laws were passed, effective September 1, 2010. Any language that mentions these obsolete license types need to be removed to avoid any confusion and to clarify current licenses issued and supported by the department. Next is: Eliminate funeral coaches and hearses from the definition of ambulance. Updating the language would align statutes with current practice and provide for patient safety. This update is needed because funeral coaches and hearses no longer meet the national standards for ambulance safety and are not equipped to provide safe patient care. Next is: Add that one of the three physicians on the board shall specialize in pediatrics. Patient care for an adult patient and pediatric patient is different. There are medication dosing differences, equipment use differences, and procedure differences. A pediatrician will be able to offer the expert insight and guidance when the EMS Board is developing model protocols and guidance documents for use by EMS personnel, that affect children. Next is: Eliminate board duty to review and comment on state agency proposals and applications that seek funding for emergency medical care. There are several funding proposals that have had short deadlines for application, and the EMS Board only meets quarterly. Current statute makes application for funding difficult, as deadlines are hard to meet. This could result in a loss of grant funds. Next is: Eliminate the requirement to establish criteria for deployment and use of automated external defibrillators, because there is a statute covering these devices. The reference to automated external defibrillators, within the EMS Practice Act, should be removed because a separate statute, 71-51,102, already provides for oversight of the devices. Eliminate language which requires the state to provide curricula concerning automatic defibrillators. This change will align statute with current practice. DHHS contracts with organizations for curricula. This change will eliminate 38-1219(2) and provide for curricula which allow for out-of-hospital emergency care providers and users of emergency external defibrillators, as defined in Section 71-51,102, to be trained in the delivery of practices and procedures in units of limited subject matter which will encourage continued production and

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

development of abilities and use of abilities throughout additional authorization procedures. LB924 also changes language in the Occupational Therapy Practice Act to allow for internationally-educated individuals to obtain licensure in the state of Nebraska. Currently there is no pathway for such individuals to obtain licensure in Nebraska, even if licensed in another state. This change in language will eliminate barriers for individuals who received their education outside of the United States and who are seeking licensure here. Finally, LB924 proposes two changes in the Uniform Credentialing Act. As an operational efficiency, the bill is proposing to eliminate the requirement for signatures of board members, the director of the Division of Public Health, and the Governor on license documents, because obtaining updated signatures for license documents has resulted in delays issuing credentials. Elimination of this requirement will streamline the issuance process. Current statutory authority for fingerprint criminal background checks for the Nurse Licensure Compact is limited to initial licensure. Due to new requirements, this authority must be expanded to include reinstatements and following completion of disciplinary probation so Nebraska will be in compliance with the compact. And one last thing in closing, I was advised today of opposition to this bill and subsequently have had preliminary cordial discussion with some in opposition. I apologize to Senator Riepe, the committee, and stakeholders because the intent was to have a bill worked out. I'm happy to work on amendments to address concerns. Next time I, and we, will work harder to assure that we are reaching out to all stakeholders. I'd be happy to answer any questions. [LB924]

SENATOR ERDMAN: Thank you, Doctor. Are there questions? Senator Crawford. [LB924]

SENATOR CRAWFORD: Thank you, Senator Erdman. And thank you, Dr. Williams, for being here. So the...as I understand it then, one of the key components is moving the scope-of-practice language from regulation into the bill on some of these professions. [LB924]

DR. THOMAS WILLIAMS: Yes, the intent is to have the scope of practice be more in the providence of the board, such that as practices evolve, they can make the necessary changes. There was a long list of things that were otherwise not changeable, that many of which were obsolete. There's been an enormous amount of work put into this bill by, not only the board who volunteer their time to do it, but also people collaborating in DHHS and our regulatory side. It has been a tremendous team effort, and it's been quite a major cleanup. [LB924]

SENATOR CRAWFORD: So are the...is the language that's now in statute identical to the scope that was in regulations prior? [LB924]

DR. THOMAS WILLIAMS: The language that is now is what is intended. [LB924]

SENATOR CRAWFORD: Um-hum. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

DR. THOMAS WILLIAMS: There have been, obviously, some revisions. [LB924]

SENATOR CRAWFORD: What do you mean? Some revisions for... [LB924]

DR. THOMAS WILLIAMS: The idea is to, again, move the ability of specifics relating to how the practice of the various licenses that are promulgated for emergency medical services more into the providence of the board so it can be changeable, not in statute or regulation. [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DR. THOMAS WILLIAMS: Instead of being in a position where it becomes difficult, they have to be reopened and re-examined and all those things that are legislatively more challenging. [LB924]

SENATOR CRAWFORD: But the key...I just want to clarify. So the board has a role, but the key scope of practice components are here in the statute now. [LB924]

DR. THOMAS WILLIAMS: Correct. [LB924]

SENATOR CRAWFORD: And the board has the ability to make what kinds of changes? [LB924]

DR. THOMAS WILLIAMS: Well, the changes would involve things that are more of a specific, as I understand it, hands-on nature, what sort of procedures specifically can be done. [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DR. THOMAS WILLIAMS: What can be done with administering epinephrine. [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DR. THOMAS WILLIAMS: Who can do this procedure or that procedure. [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DR. THOMAS WILLIAMS: More like a hands-on level. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR CRAWFORD: Okay. [LB924]

DR. THOMAS WILLIAMS: As I understand it, in the emergency service of a patient that needs those services, rather than more specifying a general scope of practice, there's a general, overarching scope of practice. [LB924]

SENATOR CRAWFORD: Right. [LB924]

DR. THOMAS WILLIAMS: And for example, if you look at how some of these practices are defined--sorry. In general for example, emergency medical responders are supervised and they do simple, noninvasive care. They can do comfort care, they can do transport with a crew. An emergency medical technician has basic skills and acute management, transport from the scene in between facilities, and formal training in examination and noninvasive sorts of things. Those are the general things that we want to, I think, define as scope of practice. And then the board itself can, as I understand it, regulate more specifically the more precise kinds of things that a particular practitioner is permitted to perform. [LB924]

SENATOR CRAWFORD: Thank you. [LB924]

SENATOR ERDMAN: Any other questions? Doctor, on the one bullet note--bullet point on page 2--you talked about the board must be made up of one out of three pediatricians. How many people are on the board? [LB924]

DR. THOMAS WILLIAMS: I'm thinking nine. I'm sorry. [LB924]

VOICE FROM CROWD: 17. [LB924]

DR. THOMAS WILLIAMS: I'm sorry, 17? [LB924]

VOICE FROM CROWD: 17. [LB924]

DR. THOMAS WILLIAMS: Okay. I've visited the board. I should know. [LB924]

SENATOR ERDMAN: Okay. I just was curious. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

DR. THOMAS WILLIAMS: But pediatrics is...yes, there is a pediatrician on there now. We think that's important to make permanent because, as Senator Riepe would assuredly support, kids are not little adults. [LB924]

SENATOR ERDMAN: Right. [LB924]

DR. THOMAS WILLIAMS: And the...caring for them is a very different challenge. [LB924]

SENATOR ERDMAN: Well, if that, in fact, is the case, there's 17 of you; you should have five of those people there...at least five, one out of every three, it says. So is that...you said the board members should be made up...at least one out of three physicians on the board shall specialize in pediatrics. [LB924]

DR. THOMAS WILLIAMS: Not everyone on the board is a physician. [LB924]

SENATOR ERDMAN: Okay. Oh, okay. I got it. Okay. [LB924]

DR. THOMAS WILLIAMS: There are several physicians on the board, but many of them are emergency providers and so forth, Senator. [LB924]

SENATOR ERDMAN: Okay, all right. Thank you. [LB924]

DR. THOMAS WILLIAMS: Yeah. [LB924]

SENATOR ERDMAN: That's thoughtful; thank you. Any other questions? Seeing none, thank you for your testimony. [LB924]

DR. THOMAS WILLIAMS: Okay, thank you. [LB924]

SENATOR ERDMAN: Any other proponents? Thank you for moving forward; that speeds it up. Thank you very much. [LB924]

ANN FIALA: Hello again. My name is Ann Fiala, A-n-n F-i-a-l-a, and I have been, again, authorized to testify today, on behalf of the Nebraska Board of Emergency Medical Services, in favor of LB924. This bill encompasses the last three years of research, collaboration, and development of the proposed, refined EMS statutes that we believe will provide Nebraska EMS the progressive latitude it needs to ensure the best possible care to the patients it serves

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

statewide. This bill provides the best possible care by enabling the EMS regulations and scopes of practice to move with the ever-advancing field of emergency medicine. It also allows the EMS workforce to explore other avenues of employment with their licenses, thus providing strong incentive for the EMS providers to obtain and maintain EMS licenses, a great boost to our dwindling volunteer numbers across the state which, according to the Bureau of Labor and Statistics data, saved the taxpayers of Nebraska an estimated \$113 million in 2015 alone. The proposals in this bill are borne out of an intense strategic planning session, the first ever held, nearly three years ago, which brought together a dedicated group of vested stakeholders who drafted a number of strategic goals, of which most have been met or are in the process of being met, including, hopefully, the contents of this bill. Board members, intent on transparency, travelled throughout the state this past year and presented these proposals to the boots-on-the-ground stakeholders, the EMS workforce statewide as well as other potential stakeholders, at advertised public forums spread statewide, including a Web-based forum for those who couldn't attend in person. And for quite possibly the first time in well over a dozen years, this bill is universally supported especially, and perhaps most importantly, by the people it regulates. A determined resolve to collaborate, rather than unilaterally impose, has enabled this proposed revision of statute to provide the best possible patient care, while enhancing and encouraging Nebraska EMS workforce. I appreciate the opportunity to be able to address this committee on LB924, on behalf of the Nebraska Board of EMS, and we thank you for your sincere and serious consideration in the advancement of LB924. I'd be happy to answer any questions. [LB924]

SENATOR ERDMAN: Thank you. Are there any questions? Senator Crawford. [LB924]

SENATOR CRAWFORD: Thank you, Senator Erdman. And thank you for being here and sharing your testimony. I just wanted to...I wondered if you could let us know about some of the additional occupations that you believe that the language opens up. [LB924]

ANN FIALA: By mainly taking out-of-hospital provider, it is a forward-thinking process that, as healthcare moves forward, namely in EMS of course, this is allowing a little bit easier transition for EMS providers to work in environments other than out-of-hospital environments. Currently we have paramedics working statewide in many of the hospital settings, and being of great service to those hospitals, in various manners with their skill sets that they offer to those. And just in the effort of looking forward into the direction that healthcare is advancing, it is...the world is just wide open out there if we change this language so that we can keep EMS providers interested in EMS by providing workplaces for them, perhaps in clinic and hospital settings. And you know, as healthcare changes, we just can't quite know exactly what other settings besides emergent, out-of-hospital settings that this might provide work opportunities for them. As we all know, we've been talking about it for the last few years, this dwindling workforce, volunteers specifically across the state of Nebraska, as we talked about earlier today in her testimony on...we have to come up with ways and efforts to maintain and, hopefully build, the volunteer

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

workforce, specifically, in order to keep us in place. And it's near and dear to my heart, living in Ainsworth, Nebraska, three, three and a half hours from the nearest trauma center, possibly four and a half from serious ones. And we see people dropping away all the time. So I do believe that this is key in helping keep the volunteers across Nebraska. [LB924]

SENATOR ERDMAN: Any other questions? Seeing none, thank you for your testimony. [LB924]

ANN FIALA: Thank you. [LB924]

JERRY STILMOCK: Thank you. Thanks, Ann. [LB924]

SENATOR ERDMAN: Welcome back. [LB924]

JERRY STILMOCK: Mr. Vice Chair, members of the committee, my name is Jerry Stilmock, J-e-r-r-y S-t-i-l-m-o-c-k, testifying on behalf of my clients: the Nebraska State Volunteer Firefighters Association and the Nebraska Fire Chiefs Association, in support of LB924. Thanks to Senator Riepe for bringing the legislation. The collaboration that took place, that Mrs. Fiala just described for you, is so welcomed by the volunteers. From Dr. Williams to Dr. Jim Smith in North Platte, who's the head of the Board of EMS. He heads up the emergency room at North Platte, as president of the EMS Board. And then also Tim Wilson, within the department, that heads up the department of...that's in charge of EMTs, volunteer and paid alike. With the collaboration that we've seen, it's just such a breath of fresh air. It's like we've never seen before, and that's truly meant as a compliment, and not as a dig, as to the predecessors to those other individuals. They have reached out. They have used their own funds to travel throughout the state. They've presented LB924 to us, as the volunteers, before today in a way that we've never experienced before. We believe that the language and the steps taken in LB924 are a step toward what they've presented through their statewide tour, when they presented this concept of making it easier to flow, changing with the times, as you heard from Mrs. Fiala. In one of the particular items it does in there, it puts...places a limitation on how long a temporary license would last, and it puts a cap on that of not more than one year. And then there's a...there's a earlier item that would, depending on when a test is held and when the results of that test are known, it's possible that that temporary license would terminate earlier. There's been a lot of discussion, you know, in the last hour and a half, about a lot of things with EMTs. We have an issue with EMTs throughout the state, with the numbers, with the requirements...earlier question about the number of hours. This legislation is not going to change the number of training hours that it takes, that somewhere between 140-180 hours. And what that translates back to, and you just heard it before, what that translates back to is about six months, two nights a week, 6:00-9:00 p.m.--you get into Mountain Time, it gets even more crazy with leaving work and getting home later and

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

being on the clock at 7:00 the next morning--and probably one Saturday a week, maybe two Saturdays a month, to go through this training. It's a horrendous amount of training. This isn't going to change that, but it's going to, hopefully, allow the board and the department to be more flexible in how they administer, on behalf of you all, as you lay down the statutes and they take it forward with the implementation. Senators, for those reasons, we ask you to move LB924 to General File. Thank you. [LB924]

SENATOR ERDMAN: Thank you. Any questions? I was amused by your comment about Mountain Time. You have 6:00-9:00; we have 24 hours, too. Did you know that? [LB924]

JERRY STILMOCK: I heard that. You wouldn't believe some of the things that we've heard, in terms of getting off work, trying to get to the training in time, getting back home. It's amazing, Senator, as you well know; you live it every day. [LB924]

SENATOR ERDMAN: Thank you. [LB924]

JERRY STILMOCK: Yes, yes. Thank you, Senators. [LB924]

SENATOR ERDMAN: Any other proponents? Welcome back. [LB924]

MIKE MILLER: Round two. [LB924]

SENATOR ERDMAN: Round two. [LB924]

MIKE MILLER: Thank you very much for your patience. Again, the name is Mike Miller; spelling is M-i-k-e M-i-l-l-e-r. I am here representing myself and my personal interest as a passionate Nebraska EMS provider myself. So EMS practice has and continues to evolve rapidly, as does the world of healthcare in general. I would like to ask for your support of LB924, as drafted, in its entirety. Several important changes are necessary in the EMS Practice Act to support promulgation of rules and regulations that provide optimal care to the citizens of Nebraska. It is challenging for all health professions to keep pace with prescriptive regulatory oversight when evidence-based medical practice changes quickly. LB924 has been developed collaboratively, with stakeholder input, to provide a nimble framework, allowing subject matter experts to adapt EMS practice. A strategic planning process, followed by two years of listening sessions held throughout the entire state of Nebraska, have informed the development process of the EMS Practice Act in subsequent changes in rules and regulations. The bottom line is patients in Nebraska are at risk without your support of LB924. A potentially controversial aspect of LB924 is the elimination of the term "out-of-hospital." It is not possible to deny the fact that

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

paramedics have been working in a multitude of healthcare settings for many years in Nebraska and beyond. When I first arrived in Nebraska over 15 years ago, with over 30 years of experience now in emergency medical services and emergency healthcare, paramedics were being used alongside physicians, nurses, and other health professionals in Nebraska emergency departments. This continues today. This is true in many areas of the country. Paramedics are healthcare professionals, licensed in Nebraska with a defined scope of practice. The proposed language change recognizes the reality that already exists in Nebraska. We need paramedics and EMS personnel in a multitude of healthcare settings to best serve patients. Nationally, this has been recognized with draft changes to the national EMS scope-of-practice document, which states, "Paramedics work in a variety of specialty care settings including, but not limited to, ground and air ambulances, occupational, in-hospital, and community settings." Thank you for the honor of sharing my views with you today. I am happy to answer any questions you may have for me. [LB924]

SENATOR ERDMAN: Any questions this afternoon? Hearing none, thank you. [LB924]

MIKE MILLER: Thank you. [LB924]

SENATOR ERDMAN: Appreciate it. Any other proponents? [LB924]

DAVE HUEY: Hello again. [LB924]

SENATOR ERDMAN: Hi. [LB924]

DAVE HUEY: Good afternoon, Chairman and members. Again, my name is Dave Huey, D-a-v-e H-u-e-y, the vice president of NEMSA. I'm also the vice president of NIS, the Nebraska Instructors Society, as well. We want to go on record as supporting this bill. We feel that this bill is needed to reflect the modern practices of emergency care providers. The EMS Board sought public input on these changes through EMS Board meetings and through several open forum sessions and conferences. The EMS Board deliberated and provided direction on these changes, and NEMSA supports them; we go along with their idea. You just heard Mr. Miller talk about the out-of-hospital, you know, the removal of that. It doesn't change the scope of practice. In fact, it kind of enhances the ability for the EMS providers, you know, to help in the community, as well. We have a lot of individuals that are on volunteer departments but also they work in the local hospital or clinic, but not as an EMT or paramedic. They work as another health-related profession, because they're not allowed to use their level of training or their certification as an EMT or a paramedic because of that out-of-hospital designation. My wife is one of those. She's a paramedic and works for a program for the elderly. They're short nurses and they fall short of nurses, especially this time of year, in their clinic. And she's unable to go in and help them

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

because, as a paramedic, she's under that out-of-hospital scope of practice. And so she's unable to help even do blood pressures or, you know, go in and assist with patient processing for them. The bill eliminates the need for emergency care provider to be under a service, which means that, you know, we may employ and keep more people locally, which then eventually will, hopefully, span out to get them interested in joining departments, as well. It allows the hospital or healthcare facility to appropriately direct that person, you know. It ensures that the facility has the policies and protocols in place and allows the emergency care provider to function under their current scope of practice. And we're not asking them, you know, to be able to do more, just do what they've been trained to do which, as was discussed earlier, the National Registry, you know, sets that basis of information. The licensure of EMS personnel, like that of other healthcare licensure systems, is part of an integrated and comprehensive system to improve patient care and safety, and to protect the public and the patient, as well. Again, the Nebraska Emergency Medical Services Association appreciates the committee's consideration and urges you to advance LB924. I'd like to thank you for your time and be open for any questions. [LB924]

SENATOR ERDMAN: Thank you for your testimony. Are there any questions? Seeing none, thank you. [LB924]

DAVE HUEY: Thank you. [LB924]

SENATOR ERDMAN: Any other proponents, those in favor of the bill? Any opponents? Thank you for coming. [LB924]

DR. LINDA LAZURE: Thank you. [LB924]

SENATOR ERDMAN: Please state your name and spell it, if you would. [LB924]

DR. LINDA LAZURE: (Exhibit 2) My name is Dr. Linda Lazure, L-a-z-u-r-e. I am a Ph.D. in nursing. I'm also a fellow in the American Academy of Nursing. [LB924]

SENATOR ERDMAN: Okay. [LB924]

DR. LINDA LAZURE: Some of you may remember me. My professional career has been spent involved in legislation in concert with professional service to the Nebraska Nurses Association, the Nebraska Action Coalition. I was chair and a member of the Board of Health for Nebraska. I was also a member of the Nebraska Nurses...Board of Nursing. NNA recently put me in the hall of fame and now they've brought me back. They've taken me out of retirement and I'm speaking

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

in opposition to LB924 on behalf of the Nebraska Nurses Association. Some of you may remember that I am quite passionate about policy and scope of practice, in particular. I taught classes in my 40 years--almost 40 years--at Creighton University. The legislative process should involve all...bringing all stakeholders together and collaboratively discussing the impact of any statutory change that may influence the safety of Nebraska residents. I feel badly for you committee members when collaborative discussion with all stakeholders and thoughtful attention to statutes and regulations is not done before introducing legislation. Nebraska has processes to discern the impact of scope of practice expansion. Public safety should not be traded for entrepreneurial gain. Policy should not be made without considering the logistical regulatory processes and the impact on other providers. I do respect the long, arduous task of looking at rules and regulations. When I was on the Board of Health, we revamped the whole, entire UCA, and I...and the staff was up to here; I recognize that. Before I begin, there are several sections of LB924 that don't pertain to emergency workers, and I do suggest that they be removed and advanced in some other way. And those are Sections 11 and Sections 12, which deal with initial licensure of RNs. Interestingly enough, I helped craft the criminal background check language when I was on the Board of Nursing. Sections 43 and 45 deal with occupational therapy. Some of my concerns with LB924...I know what I have provided you is a long list, and I will try to do my best to get through them, but I will basically hit the highlights. I see this, and the Nebraska Nurses Association sees this, as an expansion of scope of practice, with only the removal of the words "out-of-hospital." In each of the cited revised--Nebraska revised--statutes...and I always like to look at statutes and going back to the actual chapters that are going to be changed in the law, and I go back and read what's in, and what's not in, those chapters. So I'm pretty detailed. Basically, these emergency care providers would be allowed to function in any setting, despite the lack of education and training necessary to deliver safe care in those settings. Emergency providers are important members of the healthcare team, with unique skill sets developed only for out-of-hospital settings. I used to help educate paramedics and EMTs. My first job at Creighton was doing that all around the country and all around Nebraska. My other concern is trying to fit a square peg into a round hole. This bill provides multiple and different definitions, for example, patient, physical--physician medical director, and protocols. How will hospitals and clinics be able to comply procedurally when, quote: Protocol means a set of written policies, procedures, and directions from a physician medical director to the emergency care provider concerning medical procedures to be performed in specific situations? Will the physician's--physician medical director's--protocols and standing orders supercede those of the hospital or clinic? And to whom does the emergency care provider answer? Who will decide about which medical procedures and what specific situations? Another concern: New statutory categories with multiple descriptors are created for healthcare professionals. There are numerous references to qualified physician surrogate, defined as the qualified trained medical person designed by...you can read through that. And then it has to do with renewal of licensure, as well. It is confusing. I do appreciate Dr. Williams' clarification, however, of the next concern that I have, and you can read through that, with the multiple and confusing tiered levels of licensure. The

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

thing I want to get to is I'm very concerned that suddenly, on Section 30, line 7, appears a brand new criteria for a provider, and it's critical care paramedics. Nowhere is it explained what these...what this new level is. I think it's an obvious increase in scope of practice. So I think a credentialing review--a 407 process--is warranted, and supervision of the emergency services, according to the medical model and medical oversight. I've identified for you the nursing regulations. Nurses, according to the...I know I have a red light. Is...can I keep going on? [LB924]

SENATOR ERDMAN: Continue, if you will. [LB924]

DR. LINDA LAZURE: Continue? Okay. According to the RN and LPN regulations, supervision, in the nursing law, is defined as the "provision of oversight and includes maintaining the accountability to determine whether or not nursing care is adequate and delivered appropriately." The implication of lawful nursing practice is that an RN does not have the licensure authority to provide oversight--AKA supervision--for the proposed "emergency medical care by emergency care providers." And that's in Section 1, line 9. Liability is a big concern, as well. Now you know that Section 38 is the UCA, the...and they're dealing with individual liability here. And they state that: no emergency care provider, physician assistant, registered nurse, or licensed practical nurse who provides public emergency care shall be liable in any civil action to respond in damages as a result of his or her acts or commission or omission arising out of, or in the course of, his or her rendering, in good faith, any such care. Well, this section excludes nurse practitioners, certified nurse midwives, CRNA providers, which are put into this law, this LB924, as supervisors of EMS care. It's not clear if public emergency care is intended to encompass the proposed expansion of practice for emergency providers into other healthcare or hospital and clinic settings. It also does not identify the liability assumed by those names as having the authority to supervise emergency care providers in hospitals and in health clinics. I guess I would hate to be a hospital or clinical administrator tasked to negotiate the facility's insurance carrier. [LB924]

SENATOR ERDMAN: Yeah. [LB924]

DR. LINDA LAZURE: Besides liability, I don't think this looks like a very efficient use of money. And... [LB924]

SENATOR ERDMAN: I think...I think the doctor said that he acknowledged the fact that they didn't visit with everyone. [LB924]

DR. LINDA LAZURE: Yeah. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR ERDMAN: And he also acknowledged the fact that he'd be willing to work with anybody to make it better. [LB924]

DR. LINDA LAZURE: Absolutely. He... [LB924]

SENATOR ERDMAN: And I think would...that's a very willingness on his part. I appreciate that. [LB924]

DR. LINDA LAZURE: Yes. [LB924]

SENATOR ERDMAN: I appreciate your testimony. I believe you've made a very good point that we need to understand that safety is what we're all about here. We need to make sure people are treated correctly. So I appreciate your ability to understand the concepts and the statutes. And so I would recommend that you get together with the department and we come to a conclusion how to make this bill better. And I do appreciate your testimony but, in sake of time, are there any questions? Senator Williams. [LB924]

SENATOR WILLIAMS: Thank you, Senator Erdman. Ms. Lazure, thank you... [LB924]

DR. LINDA LAZURE: Um-hum. [LB924]

SENATOR WILLIAMS: ...for being here and pointing out these things. Are there any highlights that you would like to finish up on your last page? [LB924]

DR. LINDA LAZURE: I would. My concern is...is having providers go into settings that they're not educationally prepared or certified to provide care. I do appreciate the very careful look at strategic planning and looking at the rules and regulations that the EMS Board has done. But truly, merely deleting a word or phrase in a current statute is not an appropriate mechanism for expanding scope of practice. Words really do matter and safety matters, as well. I think the credentialing process--407--is absolutely warranted and that the policy needs to be...policy should be made with consulting, not only what the policy would look like, but what the processes would look like. How would this flow? So I ask... [LB924]

SENATOR WILLIAMS: As Senator Erdman mentioned, you heard Dr. Williams reaching out. [LB924]

DR. LINDA LAZURE: Yes, and...um-hum. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR WILLIAMS: And I'm assuming that you and your organization would be willing to sit down and discuss those items and try to arrive at some agreement upon...

DR. LINDA LAZURE: Dr. Williams and I had a very...and he was referring to a cordial conversation. We had a very cordial conversation prior to the hearing, and we do agree with that. [LB924]

SENATOR WILLIAMS: Thank you. [LB924]

DR. LINDA LAZURE: And I told him one of my huge concerns was that critical care paramedic which, all of a sudden, came into being. [LB924]

SENATOR WILLIAMS: Sure. Thank you for your input. [LB924]

SENATOR ERDMAN: We appreciate that; thank you. Senator Linehan. [LB924]

SENATOR LINEHAN: Thank you, Vice Chairman. I think one of the...I have great empathy for what people are trying to do here. Do you know how many nurses we're short in Nebraska? [LB924]

DR. LINDA LAZURE: I don't know the actual number. There is a good resource that you can...that we can go to, to get you that information and the Department of Health and Human Services, the nursing division can provide that. They also have a Web site that talks about the latest research and the latest studies that are done when licenses get renewed. And that is available to you. [LB924]

SENATOR LINEHAN: Chancellor Gold told me it was about 6,000 for the state. Does that sound about right? [LB924]

DR. LINDA LAZURE: You know, I've been retired for a couple years, so I don't know the very latest numbers. But we can certainly get that to you, but there is a shortage. But again, it's not a matter of putting in a body for where a nurse is needed. [LB924]

SENATOR LINEHAN: Right, but... [LB924]

DR. LINDA LAZURE: Yeah. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR LINEHAN: Okay. But we do have a problem here. [LB924]

DR. LINDA LAZURE: We do, we do. [LB924]

SENATOR LINEHAN: Okay. [LB924]

DR. LINDA LAZURE: And I appreciate the problem. I heard the speakers talk about the number of paramedics, the number of volunteer folks. And so I thought I was hearing a couple of different looks at it. I don't know if employing emergency care workers inside a hospital or a clinic would actually decrease the numbers. I guess I would like to see some data regarding why do people leave. One speaker mentioned age. I can relate to that. [LB924]

SENATOR LINEHAN: Okay, thank you very much. [LB924]

DR. LINDA LAZURE: Um-hum. You're welcome. [LB924]

SENATOR ERDMAN: Thank you very much. Any other questions? Thank you for your testimony. [LB924]

DR. LINDA LAZURE: Thank you. [LB924]

SENATOR ERDMAN: Look forward to seeing the changes. Thanks for coming. [LB924]

DON WESELY: Mr. Chairman, members of the Health and Human Services Committee, for the record, my name is Don Wesely, D-o-n W-e-s-e-l-y, here actually representing NATA, the trial attorneys. That's the hat I'm wearing at this moment, and we are here objecting--or concerned, I should say--to the language in Sections 39, 40, and 41, where "out-of-hospital" is deleted. And our concerns are there's a union provision, and now are these individuals that were out-of-hospital, now they're in-hospital. And what liability protections do they have, and what immunity do they have? And it's more of a concern than we can come in...we haven't really had enough time to review in detail to tell you exactly what we'd suggest. But it is of concern, and we felt we needed to come here and tell you about it. [LB924]

SENATOR ERDMAN: Okay, and we appreciate that. Any questions? [LB924]

DON WESELY: Yes. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR ERDMAN: Senator Crawford. [LB924]

SENATOR CRAWFORD: Are you...when you're talking about your concern, your concern is the striking of "out-of-hospital" or... [LB924]

DON WESELY: Yeah. [LB924]

SENATOR CRAWFORD: ...is your concern the specific section that talks about liability, the...Section 39? [LB924]

DON WESELY: Yes, it's...we are here for those specific sections, 39... [LB924]

SENATOR CRAWFORD: Also 39, okay. [LB924]

DON WESELY: Yeah. 39, 40, and 41 were the three... [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DON WESELY: ...that have immunity provisions and strike "out-of-hospital." [LB924]

SENATOR CRAWFORD: Okay. [LB924]

DON WESELY: And our question regards now that they might be in-hospital, there might be a different standard of immunity we need to take a look at. [LB924]

SENATOR CRAWFORD: Thank you. [LB924]

SENATOR ERDMAN: Stay tuned. I think it may be changing. [LB924]

DON WESELY: Yeah. [LB924]

SENATOR ERDMAN: Any other questions? Hearing none, thank you. [LB924]

DON WESELY: Thank you. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR ERDMAN: Any other opponents? Any neutral? Thank you for coming. [LB924]

DAWN STRAUB: (Exhibit 3) Hi. My name is Dawn Straub, D-a-w-n S-t-r-a-u-b, and I am testifying today, as president of the Nebraska Board of Nursing. The Board of Nursing is taking a neutral position on this bill for two reasons: 1) is we are in support of Sections 11 and 12, which are necessary for background checks on reinstatement applications for all nursing licenses, a compliance requirement for the enhanced Nurse Licensure Compact and 2) to oppose the language in all sections which propose changes to the Emergency Medical Services Practice Act, which would allow medical emergency services workers--EMT, EMT-Is, As, and paramedics--to work in clinic and hospital settings with no additional education, training, or certification. The dichotomy presented by this bill puts the Board of Nursing in a difficult position, requiring neutral testimony to communicate our needs and concerns. Sections 43-45 of this bill address changes for the Occupational Therapy Practice Act, for which the Board of Nursing has no opinion. I will speak first to the sections of the bill that are supported and needed by the Board of Nursing. Last year's passage of LB88 enabled nursing to join the enhanced Nurse Licensure Compact, which is now fully operational in Nebraska and 27 other states. We thank you for passing that legislation on our behalf. The Uniform Credentialing Act currently limits criminal background checks to new license applications. This does not account for an RN or LPN who might have once been licensed in Nebraska, moved to a noncompact state, and allowed their license in Nebraska to expire and have subsequently returned to seek licensure. This is called reinstatement of a license. Without Sections 11 and 12 of this bill, Nebraska does not have the statutory authority to require a criminal background check for license reinstatements. The Nebraska State Patrol, the agency that performs background checks via the Federal Bureau of Investigation, requires this statutory change to direct background checks by license type. A key feature of the Enhanced Nurse Licensure Compact is the enhanced electronic access by member states to disciplinary and criminal background information for licensees. This ultimately protects the consumer from unqualified nursing licensees. Our opposition to this bill is in response to Sections 1-10, 13-42, and 46-53, which propose changes to the Emergency Medical Services Practice Act. As written, LB924 expands the settings in which they can practice from prehospital or out-of-hospital emergency services to hospital and clinic settings, with no additional education, training, or certification. This expansion of practice setting is essentially an expansion of the scope of practice for all EMS providers, with no changes in education, competency testing, and certification. These are essential licensure components for healthcare providers when providing clinical services to patients. The Nebraska Board of Nursing recognizes the vital and critical role of our EMS healthcare colleagues when they perform emergency care in assisting Nebraskans when health and lives are in immediate jeopardy. Simply expanding the role of EMS providers and paramedics into clinical services that are in no way related to emergency care without standardizing the educational curriculum or standardized competence examination does not serve to protect the health and safety of our citizens. In addition, LB924 identifies registered nurses as supervisors of these various levels of

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

EMS providers, even though they function under medical direction and protocols in the Emergency Medical Services Act. This presents a significant level of conflict for the RN. 172 NAC 99 defines supervision defines supervision in nursing as: the provision in oversight and includes maintaining accountability to determine whether or not nursing care is adequate and delivered appropriately. Emergency medical service providers are not nurses, and they are not providing nursing care. LB924 puts EMS providers in uncharted territory for both the EMS provider and RNs who care for the patients in hospitals and clinics. The question becomes, who is really in charge of ensuring patient outcomes when nursing care is provided? Registered nurses and advanced practice registered nurses are also named as supervisors of EMS providers, but are not listed as exempt from liability in this role. In closing, the Board of Nursing has concerns regarding the conflicting dynamic of including necessary changes for the Enhanced Nurse Licensure Compact and language to expand the EMS scope of practice without a credentialing review, requisite changes in education, training, and certification, and resolution of the conflict posed by naming the RN as the supervisor of a provider of medical services. Please consider Sections 11 and 12 as the only parts of this bill sponsored as necessity. Thank you. [LB924]

SENATOR ERDMAN: Any questions? Senator Linehan. [LB924]

SENATOR LINEHAN: Thank you very much for being here. This was very helpful. What do you think we can do about...I mean clearly, as the chairman of this committee has told me many times, nurses are very special people. [LB924]

DAWN STRAUB: Hmm. [LB924]

SENATOR LINEHAN: So how do you think we should proceed with the fact...my mom worked as a nurse's aide for almost her whole life, and I have a daughter who's a nurse. So how do we help in these areas where they are so short of help? It's not like we have a registered nurse to be there. It's...so... [LB924]

DAWN STRAUB: Right. And I don't think that we're opposing that we don't need help in hospital and health clinic settings, because the nursing shortage is real. It's just we need clarity... [LB924]

SENATOR LINEHAN: Okay. [LB924]

DAWN STRAUB: ...because I cannot, by statutory authority, oversee medical practice. And so I...we need clarity related to who we're going to be working with, what's their accountability,

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

what's the RN and other nursing accountability, related to that so that we get it right and provide the best care we can for these patients. [LB924]

SENATOR LINEHAN: Thank you very much. [LB924]

SENATOR ERDMAN: Any other questions? I have a statement, a comment to make. I appreciate you coming. It's your...I have a question. [LB924]

DAWN STRAUB: Oh, I'm sorry; I'm glad you do. [LB924]

SENATOR ERDMAN: So is this your first time testifying here? [LB924]

DAWN STRAUB: Second. [LB924]

SENATOR ERDMAN: Second, okay. Your testimony was valuable; I appreciate what you said. You brought a perspective to it that we probably wouldn't have seen. Going forward as you prepare testimony, it appeared to me your testimony is basically in opposition, and that's fine. I don't have any problem with that. But when you come in neutral, I think it should be neutral. But your testimony was valuable, and we appreciate you coming. [LB924]

DAWN STRAUB: Thank you. [LB924]

SENATOR ERDMAN: So just take that into consideration. Thank you very much. [LB924]

DAWN STRAUB: Thank you. [LB924]

SENATOR ERDMAN: Any other neutrals? Hearing none, any letters, Tyler? [LB924]

TYLER MAHOOD: (Exhibits 4, 5, and 6) Yes. I have a letter, signed by Dr. Eric Ernest, representing himself, in support; a letter, signed by Marcus Doughty of the Nebraska Board of Occupational Therapy, in opposition; and a letter, signed by Joni Cover of the Nebraska Pharmacists Association, in neutral. [LB924]

SENATOR ERDMAN: Neutral. Okay, thank you. Senator Riepe, you're welcome to close. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Thank you, Mr. Chairman. I elected to close because I think there was enough serious conversation. As an administrator of a hospital for a number of years, we always told our staff, at times of orientation, that if you take care and look out for the best interest of the patient, you'll always be legally in a good position. And so things happen fast. Focus on the patient and do the right thing, and you'll be okay. We need to look at safety, we need to look at availability of staff to take care of our many people that are aging, we have to ensure that we have quality of care, and we have to make sure that everything is affordable. I appreciate many of the comments because there was a lot of work done and a lot of...particularly some of the specific documentation that can be helpful in going forward. And as Dr. Williams said, he's open and receptive, representing the department, to take a look at this, to try to build something that can be, you know, a very positive bill for the state of Nebraska. I just wanted to commend those people, and I wanted to commend, also, the people that spoke on behalf of the bill, because it showed the importance of addressing this particular issue, in my opinion. [LB924]

SENATOR ERDMAN: Right. [LB924]

SENATOR RIEPE: That's all that I have, Mr. Chairman. I also appreciate the fact that you were very kind and tolerant with your light management, that you allowed people to go on and not to abruptly cut them off; that was good, too. [LB924]

SENATOR ERDMAN: Yep. Any questions? Senator Riepe, I'll say this: I would expect you would be a facilitator of helping culminate whatever needs to happen between the department and the nurses' people, so that this comes back a better bill? [LB924]

SENATOR RIEPE: Absolutely. [LB924]

SENATOR ERDMAN: Okay. [LB924]

SENATOR RIEPE: We have an interest in coming up with something. [LB924]

SENATOR ERDMAN: I appreciate that. [LB924]

SENATOR RIEPE: We're not into...interested into ramrodding anything; that never gets you anyplace, so... [LB924]

SENATOR ERDMAN: Let the record so state; thank you. [LB924]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Health and Human Services Committee
January 24, 2018

SENATOR RIEPE: Thank you. [LB924]

SENATOR CRAWFORD: Thank you. [LB924]

SENATOR ERDMAN: That will end the hearing today. Thank you for coming; we appreciate your attention. [LB924]