

Transcript Prepared by Clerk of the Legislature Transcribers Office
Appropriations Committee February 23, 2022
Rough Draft

STINNER: Welcome to the Appropriations Committee hearing. My name is John Stinner, and I am from Gering and represent the 48th Legislative District. I serve as Chair of this committee. I'd like to start off by having members do self-introductions, starting with Senator Erdman.

ERDMAN: I'm Steve Erdman. I represent-- represent District 47. That's nine counties in the Panhandle.

CLEMENTS: Rob Clements, District 2, Cass County and eastern Lancaster.

HILKEMANN: Robert Hilkemann, District 4, west Omaha.

STINNER: John Stinner, District 48, all of Scotts Bluff, Banner and Kimball County.

VARGAS: Tony Vargas, District 7, downtown and south Omaha.

DORN: Myron Dorn, District 30, Gage County and part of Lancaster.

STINNER: Assisting the committee today is Tamara Hunt and to my left is our fiscal analyst, Liz Hruska. Our page today is Jason Wendling. At each entrance, you'll find green testifiers sheets. If you are planning to testify today, please fill out the sign-in sheet, hand them to the committee clerk when you come up to testify. If you will not be testifying at the microphone but would want to go on record as having a position on the bill being heard today, there is a white sign-in sheet at each entrance where you may leave your name and other pertinent information. These sign-in sheets will become exhibits in the permanent record at the end of today's hearings. To better facilitate today's proceeding, I ask that you abide by the following procedures. Please silence or turn off your cell phones. Order of testimony will be introducer, proponents, opponents, neutral, and closing. We ask that when you come up to testify that you spell your first and last name for the record before you testify. Be concise. It is my request that you limit your testimony to five minutes. Written materials may be distributed to the committee members as exhibits only while testimony is being offered. Hand them to the page for distribution to the committee and staff when you come up to testify. We need 12 copies. If you have written testimony but do not have 12 copies, please raise your hand now so the page can make copies for you. With that, we will begin today's hearing with LB1267.

VARGAS: You don't have to look too far.

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STINNER: Good afternoon.

VARGAS: OK. Good afternoon, Chairman Stinner, fellow members of the Appropriations Committee. My name is Tony Vargas, T-o-n-y V-a-r-g-a-s. I represent the communities of downtown and south Omaha in the Nebraska Legislature. During my time here, it has been a priority of mine to advocate for addressing racial disparities, which can manifest in various systems such as corrections, education, but it also in the health care system. Now, according to the Pratt-- Nebraska's Department of Health and Human Services, there are moderate to significant disparities between white residents and those identifying as African-American, American-Indian and Hispanic in terms of perceived health status, health coverage and ability to see a physician. They also find that Nebraskans with disabilities face health inequities. The National Council on Disability found that the coronavirus exacted a steep toll on certain populations of people with disabilities, and the events that unfolded during the pandemic posed a unique problem and barriers to people with disabilities. They also found that the pandemic exposed disability bias. Failures in modifying policies to accommodate the needs of people with disabilities and gaps in disability data collection and anti-discrimination laws. Now, according to the CDC, long-standing systemic health and social inequities have put many people from racial and ethnic minority groups at increased risk of getting sick and dying from COVID-19. Inequities in the social determinants of health have historically prevented these groups from having the same opportunities for economic, physical and emotional health. Now, unfortunately, the pandemic only amplified these health disparities, resulting in primary objective of the American Rescue Plan to, quote unquote, address systemic public health and economic challenges that have contributed to the unequal impact of the pandemic. LB1267 isn't punitive, and it isn't and doesn't mean to or does not blame anyone for any system for disparities faced by so many Nebraskans. Instead, it provides funding to our state commissions to empower them to serve their constituencies and to develop recommendations for how we can truly address the unique health challenges that have disproportionately impacted certain populations. LB1267 would appropriate 2.5 million from the federal coronavirus state fiscal recovery fund by appropriating 500,000 to each of the following state commissions: The Commission for the Blind and Vision Impaired, the Commission for the Deaf and Hard of Hearing, the Commission of-- for Latino, all Latino Americans, the Commission on Indian Affairs and the Commission on African-American Affairs. Now, under the bill, each commission would hire a health equity liaison,

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whether an employee or contractor working on behalf of the commission to serve as a liaison between patients, constituents, hospitals, DHHS and other stakeholders to help identify and address the health disparities that are unique to each of their populations they serve. Each commission will also work with DHHS, higher education and other organizations to collect data and submit a report back to the Legislature no later than October 1, 2024 outlining recommendations to address health inequities for their constituencies. By providing this funding to the commissions, the goal is to have tangible recommendations for addressing health disparities that are specific to each constituency because the barriers and challenges they all face are very different. Some may be similar, but I really want to make sure that these entities who have been appointed by the Governor are empowered to then meet the needs of the constituencies they serve. LB1267 was also intended to give the commissions a lot of discretion for how to do this work, given that various commissions have very different staffing levels, capacity and resources. The bill also includes that each commission shall notify the Appropriations Committee by October 1, 2023 if they do not anticipate spending all of the federal funds appropriated pursuant to this Act, so that it would ensure that if any funds aren't spent, they could be reappropriated. You will hear from testifiers behind me about why this funding is important and how these health inequities play out in the daily lives of so many people here in Nebraska. 2.5 million represents just .2 percent of the state's share of the state and local fiscal recovery funds and couldn't be more important to the health of so many Nebraskans. I hope you'll join me in supporting LB1267 as part of the committee's ARPA package, and I'd be happy to answer any questions. One addition here, we've served, we know these commissions, many of which are either new or have existing executive directors that have been with us for a long time. These are appointed by the Governor. I thought I saw fit that we work with entities and talking with constituencies that brought this amazing idea that we work with the commissions that exist because they are appointed by the Governor, they have voices on the ground to meet their constituencies. And in the end, they're the best empowered to do this type of analysis and create a plan so that we can actually move forward in the long term for addressing these health disparities that they serve for their specific constituencies. With that, I'm happy to answer any questions.

STINNER: Any questions? Senator Erdman.

ERDMAN: Thank you, Senator Stinner.. Thank you, Senator Vargas, for being here today. Maybe you could help me a bit with the fiscal note.

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It says the Commission on the Blind is going to get 500,000 once, the Commission of the Indian Affairs get 500,000 and then the Deaf and Hard of Hearing is going to get 250 for two years, two different years, and then also the Latin American Commission will get 250 for two years. What's the difference there? Why does-- why does two of them get 500 all at once and the other two separated?

VARGAS: So my understanding is, just like most of our agencies, they were requested to provide information for the fiscal note. It seems like some of them requested and said they would use the 500,000 in the first year, and then others decided that they were going to split the 250,000 into two separate years. And it was just a choice of what they reported and how they were going to utilize those funds.

ERDMAN: OK. Then you seen on the-- on the last page where it says breakdown of-- of the expenditures, they have the quarter of a million for one position and then the operating and travels 112,000-- or operating is 112,000, \$250,000 for one person to distribute this money? Does that seem a significant amount for that? It's on the very last page. Do you see it?

VARGAS: Yep, I see it. I mean, I would say this. These are projections a lot different from when we were working with another entity like DHHS and they tell us, what is the cost of doing that work? This is meant to be broad so that those commissions will work with their Governor-appointed commissioners to try to figure out how these funds can be used. So some of them have put some more detail into what they anticipate it's going to be because I think they already have the inherent idea in their head and some are already thinking about it, but didn't put pen to paper. So it's generalized, but this is what they put together as a reaction to the bill.

ERDMAN: Maybe one more question, then. Will this be an ongoing funding going forward?

VARGAS: One time. This is to create the plan to do the analysis. It is not ongoing. As you know, our commissions and I say this very candidly, our commissions are lean. These are not and we've been-- our first year we cut many of them. They work with very few resources and they do really great work for our state, for these constituencies. This is not intended to be beyond-- beyond the purview of ARPA funds and will just be a one-time federal funds.

ERDMAN: Do you envision this going on and being funded going forward?

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VARGAS: I don't intend to do that and that is not-- that's not my goal.

STINNER: Additional questions? Seeing none, thank you, Senator.

VARGAS: Thank you.

KIM DAVIS: Hello, everybody. My name is Kim Davis, K-i-m D-a-v-i-s. I'm an advocacy specialist for the Nebraska Commission for the Deaf and Hard of Hearing. And on behalf of NCDHH and the Governor-appointed board members, we are in full support of LB1267. Most of you are aware, our agency serves one of the largest disability population here in Nebraska, people who are deaf, deafblind, hard of hearing and what we call deafplus. And those are people ranging in all ages. With COVID and the pandemic that has really impacted our population, especially within medical settings and that includes any kind of medical services. It has really, truly impacted us. The challenges we face are with effective communication and the use of technology. Many medical professionals are unaware of the accommodations that we need, and the pandemic has increased those barriers. I want you to take a moment and just imagine that you are deaf and you need access to communication, but you're not able to communicate with a doctor at a hospital or with the nurse. And they do not know sign language to communicate in your language, either. So you are at a well-known hospital here in Nebraska. The hospital and medical professionals are not prepared to interact with you. COVID has changed everything for everyone. It limits the amount of people that are allowed in a room, and that includes the use of a sign language interpreter, social distancing and some of those are listed in my written testimony that is being shared with you. So you're laying in ICU in a hospital where you have a tracheotomy tube in your throat. You're starting to feel like you can't breathe because you have fluid building up in your throat. You push the call nurse button and somebody there is talking to you, but you can't hear them. They're calling to say, what is it you need, but you can't hear, and you can't speak because you're relying on sign language and you have a tracheotomy. So you're struggling, what do you do? And then suddenly the fluid is growing and suddenly you just decide to pull that tracheotomy out of your throat because you can't breathe and you can't let anybody know that you need them. It's been a struggle for us. So from that, the nurses come into the room and then suddenly they decide to restrain you to the bed because they don't want you to pull that trach out again. And it all boils down to the lack of communication. So these types of things are what we face in medical settings. You're not able to communicate using writing or a

dry erase board because they have restrained you or they don't have a communication kit available for you. They don't have one ready. Doctors and nurses will make assumptions about how you feel and what your condition is, what your diagnosis might be because you're unable to express that, you have no way of communicating. The use of video remote interpreting, which is in the interpreter on a video screen, I'm restrained and now they can't see me signing because I'm not within a signing space for that technology. So, again, a communication barrier. But that is exactly what's happening to deaf patients here in Nebraska. Not only that, but on the bullet points of the-- the handout that you have received, many of those things are being experienced. People who are deaf, hard of hearing, deafblind and deafplus have many similar experiences. This disparity in health care and equity needs to stop. People who are deaf, deafblind, hard of hearing and deafplus, they need your help. We want to prevent this from happening again, so please pass LB1267 and get it out of this committee. This bill will provide funding for that health equity liaison to educate medical service providers to break down these communication barriers, enhance the quality and access to health care services, and improve the health and well-being of many Nebraskans who are deaf, deafblind, hard of hearing and deafplus. Thank you so much.

STINNER: Thank you. Questions? Seeing none, thank you very much.

KIM DAVIS: Thank you.

STINNER: Afternoon.

ANGEL GELLER: Hi, good afternoon. My name is Angel Geller, A-n-g-e-l, last name G-e-l-l-e-r. I am from the Omaha Tribe of Nebraska and I work for Santee Sioux Nation Society of Care, but I'm here for an issue that is very personal to me and those that I serve. I work with predominantly the Native-American community here in Lincoln, in Lancaster County. I tend to work more with teens and their families, but on a personal note, something that I've really stepped outside my comfort zone of working with teenagers typically to really focus on this work here is just due to experiencing a health care system that has completely broken down during COVID. And I know that, you know, it's-- it's not anyone's fault. However, when my brother was hit by a car and taken to the emergency room and then they're treated there, that was something where the treatment that he received was horrendous. It was so terrible. And there is these little pieces along the way that I had experienced on a micro level before, but I had never seen it take place in the way that it did with his treatment

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there. Everything from EMTs and-- and police and then the doctors telling my parents that he was intoxicated when later we found out that he wasn't intoxicated, that he was just at a stop sign and a car hit him. There was language constantly talking about how like he was in a car accident, that was his fault. And we just continually found out more information that he wasn't doing anything at all. And, you know, they were doing things like drug testing him and wanting to make sure that he was not intoxicated. And it was just very much this thing where, you know, is it because he's native? Is it because he-- there's just so many things that it was really frustrating and that he was treated as if it was his fault that he was there. My parents are retired and think we could be there with him daily, and it got to the point where by the time that I was able to visit him, they had brought in baby photos and put them in frames and put them around the room in hopes that the hospital staff would see him not as this six-foot tall man, that they were treating him like they were scared of him, but rather as how our family sees him as the baby of our family. When he was released, he was released without aftercare program and we had to fight to get him into Madonna to be treated for a TBI, traumatic brain injury. He was-- even though he had spent several years trying to get sober, they were drugging him at the hospital without any type of acknowledgement or asking permission. And so any time that he was awake, you know, he has a traumatic brain injury, he doesn't remember what happened to him. He's strapped down to a bed. The nurses are afraid of him just because he's a large guy. And of course he wants-- he wants to know exactly what's going on. And being so confused of even who he was, it got to the point where nurses and other staff would come in and just say, you know, we hate to keep you here, we hate to hold you hostage here. We hate to keep you here longer than you want to be here and eventually released him in the middle of the night with an I.V. still in his arm. It's one of those things where we were terrified for our relatives and in hearing similar stories from those that in the community that I serve of being terrified to go to the hospital, to go to a doctor who have heard horror stories of like just assumptions about them and thinking that they're not going to be heard. I love what the lady said before, just like not anticipating serving native peoples when like, these are our ancestral lands and we were here first. Like, how is the system not anticipating serving us. So I see that my time is up, but thank you so much for listening and I hope that you pass this out of committee.

STINNER: Any questions? Seeing none, thank you.

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LAZARO SPINDOLA: Well, good afternoon, Chairman Stinner, and members of the committee. Thank you for receiving me today. Nice to see you all again. For the record, my name is Lazaro Spindola. That would be L-a-z-a-r-o S-p-i-n-d-o-l-a. I am the former executive director of the Commission on Latino Americans. But I am testifying today as a private citizen at the request of the Chair of the Commission. I am here in support of LB1267. Even before the pandemic, Latinos have traditionally suffered from high levels of poverty, limited access to well-paying jobs, over required housing and limited access to health care. This longstanding structural inequalities are how these parties can be traced back to the social determinants of health, such as comorbidities, access to health care, immigration status, language barriers, work conditions and economic burden. The COVID-19 pandemic has magnified the impact of those inequalities. Nebraska has a large percentage of Hispanic Latinos employing the so-called essential services, most notably the meatpacking industry, which was initially the industry most affected by the COVID-19 pandemic. Nationally, studies show that the Latino population may experience more severe cases of COVID-19 and have a higher mortality rate. The pandemic has also had serious side effects on everyday life. All life aspects, including employment situations, finances, mental health and others have been affected. Twenty-seven percent of the Latinos have a zero or negative net worth and are struggling to pay bills or for rent. These, according to the Pew Research Center in 2020. A February 2021 Mortality and Morbidity Weekly Report from the CDC reported that Hispanics were 59 percent more likely to report depressive symptoms than whites. These are all national numbers. Nebraska, with a Latino population of almost 12 percent, has no hard state data available to compare. This (INAUDIBLE) getting information regarding the impact of COVID-19 on such a large segment of the population is unacceptable. Without this information, it becomes virtually impossible to create programs that will overcome the inequality. For this reason, I urge you to advance LB1267, and I'll be happy to try to answer any questions that you might have.

STINNER: Very good. Questions? Seeing none, it's good to see you again.

LAZARO SPINDOLA: Oh, absolutely.

STINNER: (INAUDIBLE) and better to see you again. Afternoon.

SIOBHAN WESCOTT: Hello, I'm Siobhan Wescott, MD, MPH, spelled S-i-o-b-h-a-n W-e-s-c-o-t-t. I know, it's a tough one. I'm associate

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professor at UNMC, speaking as an individual and not on behalf of the University of Nebraska. As an Alaska Native physician, I am in strong support of LB1267. As one of 10 physicians who helped craft the definition of health equity for the American Medical Association, we came up with this simple phrase: Health equity is optimal health for all. Even with this broad inclusive definition, it is clear that American Indians and Alaska Natives are among the farthest from finding their optimal health in the U.S.. This bill provides a chance for Nebraska to lead a nation in addressing health inequities by partnering with tribes and key stakeholders to apply the strengths of existing systems to health problems that remain stubbornly unequal. Thank you for this opportunity to speak on behalf of LB1267, and I'm happy to take any questions.

STINNER: Very good. Questions? Seeing none, thank you.

SIOBHAN WESCOTT: Thank you.

JUDI GAIASHKIBOS: Hello again.

STINNER: Good to see you again.

JUDI GAIASHKIBOS: Usually I see you once a year, but something's happened here with ARPA. I am Judi gaiashkibos. That is spelled J-u-d-i g-a-i-a-s-h-k-i-b-o-s. I'm the executive director of the Nebraska Commission on Indian Affairs. I am a member of the Ponca Tribe and I'm Santee Sioux. I don't know if any other directors of the agencies that are impacted by LB1267 are testifying, but I thought that it was important that I would testify. And our agency, the Indian Commission, was-- came into existence through an executive order in 1971 under Governor Norbert Tiemann, and then it became an officially full-fledged state agency. So I would like to thank Senator Vargas for taking this opportunity to enhance the commission's listed in LB1267 so that we can better address the health disparities for our people. And you have heard the former director of the Latino Commission express those and I think, you know, through my various testimonies that, and as what you just heard from the previous testifier, that we as the First Peoples are suffering with many health disparities. The previous testifier is a very modest person, and I want to say that as the director of the Indian Commission, we have decided to utilize these funds by working with UNMC. Dr Siobhan Wescott, who just testified, is the first ever, endowed Chair of the Dr. Susan and Susette LaFlesche Tibbles, public health specialists at UNMC. So her job is to work with our tribal communities and tribal nations to

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improve public health outcomes in our state. So as a small agency with a small staff and a small budget, we feel that it would better serve our work to work with UNMC and develop pilot projects and have her be that liaison person. And that is what her work is to do in her Chairmanship, to raise funds to help decrease those health disparities. And I also like to say that yesterday or today, she was the only Native-American person on the status list 2022. That's a big thing that I've just become aware of in America, and there are a lot of famous people on that list. One is Dr. Fauci, and so I'm really proud of Dr. Siobhan Wescott, who I worked hard to have her come to Nebraska and our donor for the endowed chair, Dr. Carol Swarts. We specifically wanted that endowed chair named in honor of America's first Native doctor, who herself worked so hard and built a hospital to address the fact that Native people were dying because no one wanted to treat them. And she became our first doctor, and now today we're working to restore her hospital. And I do believe that by having that endowed chair being named in honor of her, that will help. Dr. Wescott and UNMC reduce those very horrible health outcomes for our people. So for those reasons, I hope that you will support this bill that will also help the African community. The testifiers before the deaf and blind commissions that we've always worked together on and we always have our hearings at the same day, we all face many-- sometimes invisible barriers that people don't know about. And so I'm here to support all of those other advocacy agencies and let you know that we will be good stewards of the money for those two years and utilize it in a way that we hope then will help us going forward. With that, I would say thank you and be happy to answer any questions.

STINNER: Any question? Senator Erdman.

ERDMAN: Thank you, Senator. Thank you for coming. So what is your annual budget with the NE Commission?

JUDI GAIASHKIBOS: Liz-- I can't tell you for the dollar. I have two other staff. It's around-- Scott? \$250,000.

ERDMAN: So this would be double what your annual budget is?

JUDI GAIASHKIBOS: The 500,000 would be over two years.

ERDMAN: You're getting 250 a year for two years.

JUDI GAIASHKIBOS: Uh-huh, 250 each year.

ERDMAN: Yeah, but they double your budget now.

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JUDI GAIASHKIBOS: Yes.

ERDMAN: Okay. Thank you.

JUDI GAIASHKIBOS: And can I add that years ago before-- I've been the director for 26 years. Back in the day, there was an office in Scottsbluff, and a staff of three in Scottsbluff. There was a deputy director in your area and then there were about eight people that were housed over at the state office building. So our budget as our numbers grew and time went on and the issues didn't decrease, we were cut back and our agency was defunded under Governor Bob Kerrey. And when we came back, we were reduced to three. So I'd like to ask all of you here to fund this back to what we once were. I would like to have an office in Scottsbluff and a deputy director and a staff of 11. And I don't think a lot of people know that history and I have the report I can share with you that shows pictures of the people that worked for the Indian Commission at that time. And Liz, you've been here a long time and you probably remember that, so. Historic knowledge. It's good to get older and be an elder.

STINNER: Thank you. Additional questions? Seeing none, thank you. I'd like to see you have a place in Scottsbluff too, so.

JUDI GAIASHKIBOS: Yes, let's work on that.

STINNER: Any additional proponents?

You're almost there, Carlos, keep going straight. The chair is right there, yes.

CARLOS SERVAN: Well, I guess at least somebody knows my name.

STINNER: That's right.

CARLOS SERVAN: This is Carlos Servan, the executive director of the Nebraska Commission for the Blind. My name is spelled C-a-r-l-o-s, Servan, S-e-r-v-a-n. I have copies of my testimony here. My bill not just typed so I can read it, but I-- because I wrote it, I will try to do my best. State of Nebraska Commission for the Blind and Visually Impaired is the rehabilitation agency and also the independent leading agency for the blind and visually impaired for all ages. We provide training on blindness of skills for blind people can be independent at home, but also work and therefore develop a benefit and pay taxes and consequently being contributing members of society. We are in support of LB1267. We make a commitment to work with our stakeholders to find

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the (INAUDIBLE) so we can identify the disparities or prevent having more disparities. If we know many blind and visually impaired people in Nebraska (INAUDIBLE) a pandemic, lost wages. Those who have small businesses also lost some business and therefore lost some funds. And they have plenty or a lot of medical bills and they are paying the rent. So I will propose if there is any money left out of those \$500, we will be assigned that we don't use, if we could use it now to help those individuals who for now they need rent and medical bills. A-- I understand some intent of ARPA has a section, I think I quoted in my testimony, but goes like a-- to support those who (INAUDIBLE) economic harms, a-- for individuals, a-- employers, small businesses, industries and public entities, and my request in this section fits in that category. That's all on my testimony besides the fact that we agree with the rest of the testifiers. I would be glad to answer any questions now.

STINNER: Any questions? Seeing none, thank you, Carlos.

CARLOS SERVAN: Thank you.

STINNER: Jason, why don't you help. Afternoon.

TIMOREE KLINGLER: Good afternoon, Senator Stinner, and members of the committee. My name is Timoree Klingler, K-l-i-n-g-l-e-r, and I'm here today as the registered lobbyist for CynHealth, the state designated health information exchange, and I'm here to speak in support of LB1267. I'm just here to explain a little bit about our social determinants of health program. I want to make it very clear-- clear that we are not asking to be the designated contractor. I'm really here in an information sharing capacity. So as the state HIE, we have a very unique 10,000 foot view of the health care system in the state and have long observed different communities have an equal access to health care and other resources. And this was really exacerbated during the pandemic. At CynHealth, one of our priorities outside of a complete longitudinal health record is to address the whole health of a person to lead to a better outcome. We currently partner with Unite Nebraska in a community data exchange or what is known as an SDOH for social determinants of health program. It's a shared platform that connects partners and enables them to send and receive electronic referrals and engage community members and care that extends beyond the traditional health care space. We can actively identify gaps in services to proactively address barriers to health care and increase equity in the community. We believe that you can improve client health and well-being through strengthened collaboration with partners who

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offer a very wide array of services. Through our platform, you can track outcomes of all referrals and the services that were delivered to your patients or clients, and you can improve organizational capacity through accurate referrals and access to local service delivery. We often get asked what kind of services we can access through SDOH. They include food assistance programs, medical assistance, affordable housing, transportation, mental health support, state benefits and employment services. I also want to know that we are an ADA compliant program, so any program that wants to onboard with our platform, we are able to work with them. One of the things that we are doing proactively that we hope will be helpful is creating a research database that will help inform providers on the post-pandemic health of communities across the state. We intend to take combined health and social data to capture a picture of the response and the inequities that we see. We hope to use this data to inform policymakers, public entities and others for-- about response and planning for different populations, as well as individual citizens. This includes addressing factors that contributed to these "inequal" impacts of the pandemic on different populations. We truly believe that social care is one of several ways to address public health responses and the whole health of a person. And again, I'm here today to serve as an advocate for social health and welfare. We wholeheartedly approve of the goals and the mission of LB1267, what it works to accomplish, and please ask you to support this. Thank you.

STINNER: Thank you. Any questions?

TIMOREE KLINGLER: Any questions?

STINNER: Senator Dorn.

DORN: Thank you for being here. Do you currently work with those four entities that this is going to be appropriate to?

TIMOREE KLINGLER: Well, the way it works is we work with the providers that participate with CynHealth. So for example, we-- because of the-- the legislation that passed last year, we participate with most of the providers in the state. So if I go to the doctor and I say, you know, I'm really having a hard time, I don't feel well, they say, OK, well, we can help you physically this way. But what-- what else is going on? And you say, Well, I don't have a job anymore. So OK, well, let's get you hooked up with, you know, maybe some meal assistance, some rental assistance and things like that to try to improve your situation in all ways.

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DORN: So, so at some time, you probably have worked with them.

TIMOREE KLINGLER: Yes.

DORN: Yes. OK. Thank you.

STINNER: Any additional questions? Seeing none, thank you.

TIMOREE KLINGLER: Thank you.

STINNER: Good to see you again.

TIMOREE KLINGLER: Yeah, always.

STINNER: Afternoon.

KAMERON NEEMAN: Good afternoon. Hello, my name is Kameron Neeman, and that is spelled K-a-m-e-r-o-n, last name Neeman, N-e-e-m-a-n, prefer to go by Kam, and that is just K-a-m. I was coming here to speak today about a personal testimony, but after listening to all of the individuals that went before me, I feel like I should kind of venture away from my written testimony. I'm a social worker and that's what a good social worker does, put their work in front of them sometimes. So, you know, I observed a visually impaired man walking up here a little bit before me, and he was bumping into things. Nobody offered to help him. Our interpreter here was the only one that helped him by speaking and letting him know where he was going. There are several people in this room. I see several people in the helping field, law enforcement and a first responder, several first responders in the room. And nothing against them, at one time, I was a first responder in my life as well. I didn't jump up to help this individual, either. So being here today, supporting LB1267 is-- goes along the lines of a lot of the work I've done over the years. I'm also here as an African-American male. You know, I've heard a lot of words throughout this testimony. Intensified, and culture, cycle, trauma, pandemic. All of that plays a huge factor into my personal testimony. I grew up in a family and a life where you didn't get help. You didn't go to the doctor. And now that I'm a 29-year-old adult, I'm working to remove those layers of trauma that I've had in my childhood due to not having access to health care and appropriate funding for my family and myself. Senator Vargas stated facts and those-- a lot of those facts are my personal story that he shared today. So I said in my testimony I wasn't going to speak long. I'm going to leave it at that because that's the kind of person that I am, and I hope that you will really think about this all and open up your heart and continue to listen.

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That's a very hard for thing-- hard thing for me to do, but I have learned the most from not thinking about myself, but listening to others and what others have to say. Thank you.

STINNER: Thank you. Questions? Seeing none, thank you very much. Any additional proponents? Any opponents? Anyone in the neutral capacity? Seeing none, would you like to close, Senator?

VARGAS: Thank you very much, Chairman Stinner, and members of the committee. I want to thank those that testified. The addition I just want to make here is just as a summary. I do want to thank the constituent that brought this bill and brought this to our attention. And I think part of the reason why even hearing testimony and thinking about this even more, this pandemic has just hit so many communities. And in so many different ways, and we, as the committee, have been listening to these stories from a lot of different lenses, we've been thinking about housing, economic development, we've been thinking about small businesses to large businesses, we've been thinking about infrastructure and how do we bounce back? These are all very important and nobody is saying that it's not. When we look at the slices of the pie that are actually focusing inherently on health care or health and human services, and then we look at that and we look even further as how much of that is looking at the inequities by race and ethnicity and those that have disabilities. I haven't seen it yet. And I think that's the reason why this is important. There's a benefit-- not the benefit. We have a responsibility to utilize federal dollars for the purposes of COVID-19 recovery and to address health inequities, because that is inherently what just happened this last few years. I saw the health inequities exist in my own family with the loss of my father, and it realized-- I realized through many stories of people that came and just testified and others I've talked to is that this doesn't just exist in the Latino community. So my hope is, we work within what works and what we know does work for commissions have lifelines to our communities. They're appointed by the Governor, which means it's a diverse group of voices that want to make sure that government works and is more efficient and is responsible. And by making sure it's truly one time and that we're investing these resources now early, a liaison can do a lot of good in the long run, and this is really a fraction of what we're really considering as result of all the other asks. So I think when we think about strategic planning, addressing these health inequities and powering things that we know work, especially agencies in our government and leaders that we know do this well, we have a responsibility to do something in this

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arena and that's why I appreciate you taking the time to listen to this and hope we can advance this. Thank you.

STINNER: Good. Thank you. Questions? Seeing none, thank you, senator. We have seven letters of support for LB1267, one in opposition, no neutral. And that concludes our hearing on LB1267. We will now open on LB760.

DORN: Good afternoon--

STINNER: Afternoon.

DORN: --Chairman Stinner, and members of Appropriations Committee. My name is Myron Dorn, M-y-r-o-n D-o-r-n, and I represent the 30th Legislative District. I'm here today to introduce LB760 for the committee's consideration, LB760 would direct 5 million into the federal ARPA funds to DHHS to be used as a grant program for licensed Emergency Medical Services programs for the one-time purchase of equipment including, but not limited to ambulances, power caustic defibrillators and similar life-saving equipment. This committee has heard briefly from EMS providers already this year on the Governor's recommendation for 35 million in funding for aging ambulances. This money would pair perfectly with that proposal as this grant money could be used for other smaller purchase, such as power caustic defibrillators, jaws of life and others. Tell a little bit about a story here. Most of you know I've been a member, an EMT and a member of the Adams Rescue Squad for years. About 10 years ago, we had a hand cot that you had to physically lift by hand. We were debating about buying a power cot, which at that time was \$30,000, now they're about \$40,000. There were several of the women on our squad that a month before we had a rather large individual that they couldn't lift. And at the meeting that night, we had a lot of discussion about whether to vote for it or not. They finally told the men in the room that if you don't vote for this, we're leaving the squad. That kind of made our decision on how we voted or whatever. (LAUGHTER) We still had to do some fundraising and things, but that just-- wanted to talk as much about some of the cost of some of this stuff, some of the-- what some of the squads are facing if they want something like that. This funding will help keep our volunteer squads prepared and in turn, our community safe. Thank you for your consideration. I'm happy to answer any questions, but because the Governor had in his proposal that 35 million or whatever, we put down some things here, some questions and such, and I'll read a couple of those off and some of the answers. And how will the department decide who gets the grants? Priority--

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prioritize-- priority-- priority in awarding grants is to be given to the Emergency Medical Services Program that our volunteer base located in a community with less than 100,000 people and has high needs as determined by the department in consultation with a statewide organization dedicated to support in providers of pre-hospital emergency medical care in Nebraska. Do the departments in our state have need for this? Yes, there's a huge need. Many of these departments fundraise to pay for their type of equipment and during COVID they were not able to do that. In addition, there will be testifiers coming behind me from the statewide EMS organization, and they've done a poll of their members to determine the need. If the Governor already gave 35 million for ambulances, do you still need this money? Yes. The Governor's proposal was specifically for ambulances, which, as you've heard and tested-- testimony for that bill is greatly needed. But there are other needs as well and as I mentioned with the power cots, these needs can be just as lifesaving and volunteer service-- for the volunteer service as the ambulances themselves. Where in DHS-- HS would this money go? The money would go to the Department of Health and Human Services Officers of Emergency Health Systems, a department that works closely with and has familiarity with EMS squads across our state. And we are definitely open to and seeing how this maybe fits with the Governor, maybe part of his proposal or not, and where all of that would fit into one package or whatever. So we're not saying this proposal-- did not know the Governor was going to have his proposal out. These EMS people came to me with this proposal and agreed to introduce this stuff-- or this this proposal, so. Answer any questions. Otherwise, we'll be around later.

STINNER: Questions? Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Thank you, Senator Dorn. Senator Dorn, in your frequently asked questions, you talked about communities less than 100,000. That includes every community in the state except Lincoln and Omaha.

DORN: That would be good.

ERDMAN: Is that a significant number? Should that be less-- should that number be smaller?

DORN: At that time, we talked about putting something in here or whatever so that we wanted this for rural areas. But I guess it's how

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you classify rural areas, so I'm open to more discussion on it or whatever, but that's what we put in the proposal for now.

ERDMAN: That seems a pretty high number.

DORN: I think pretty high number that--

ERDMAN: You're talking rural?

DORN: If you're talking rural, then it would be Grand Island and all of those, yeah. We would be open to visiting about that, yes.

STINNER: Additional questions?

DORN: I'll just make one comment, and I think, you know, as well as I do many of the-- I'd call the rural true warriors out there are really in towns of probably less than 10,000, and many of those squads are really-- COVID has impacted them greatly because we don't have a lot of the equipment, a lot of the other things that some of the bigger squads or the bigger cities that are funded more well that they have to help fund through the COVID and things like that. So thank you for the question.

ERDMAN: In my district, it's less than a thousand.

DORN: Less than a thousand, yes.

STINNER: Do you see a limitation on-- on the grant? Is it 5,000 or is it going to be 10,000 or 30,000?

DORN: We did not put this in there. This is asking for 5 million or whatever.

STINNER: That's the total amount that you want.

DORN: The total amount. But this-- is we wanted to get this to as-- and there's some of the later testifiers may have more comments on that, but we wanted to get this in to help as many of those squads as we could. So we sure don't want somebody to take half of it or a fourth of it or whatever, so it's-- it's to help more. As I think we talked and when the Governor's proposal was here, though, if you wanted to buy an ambulance today, a rural squad, our squad just contracted to buy one, it was \$315,000. So that's what many of these ambulances nowadays are costing. Our ambulance was greater than eight years old, so we did not get any value for a trade-in on that

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ambulance. That's per state statute. Once it's over eight years old, they cannot take it in and resell it for an ambulance.

STINNER: Senator Erdman.

ERDMAN: Senator Stinner, thank you. So what kind of mileage would be on a vehicle that's eight years old?

DORN: I know we had less than 50,000, but that is something that this Legislature or this state of Nebraska has passed and implemented that once an ambulance is eight years old, they cannot-- you cannot trade it in and they cannot resell it back out to a squad as an ambulance. Now, we could maybe look at allocating it out or are selling it, but because we have room in our facility that we house these, we are going to keep it and keep it as a backup ambulance because there are times that-- not very often, but every now and then there's times where we need that second ambulance.

ERDMAN: Are you still able to use that ambulance?

DORN: Yes, we are. Now it's starting to have a lot of issues that an 8-year-old vehicle would have. And that's the why we-- we knew we could get several more years out of it, but we knew we couldn't get another 8, 10 years out of it. That we were having issues with the motor. We were having issues with the transmission. We were having other issues with that vehicle and that's why we decided to go ahead and purchase an ambulance. A new ambulance, yes.

STINNER: Well, just for the record, I drive a 12-year-old car.

DORN: I know, and it's fine, gets you up and down the Interstate. If you get stopped halfway between here and Scottsbluff, well you can call somebody. When we're going to a scene of a-- somebody call and need 9-1-1, we cannot risk that. At certain times we cannot risk that.

STINNER: I just-- the eight years is not very old--

DORN: I agree with you.

STINNER: --if you properly maintained it, however.

DORN: No, I agree with you.

STINNER: Thank you.

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DORN: Yes.

STINNER: Afternoon.

SANDY LEWIS: Good afternoon. Sorry, I'm just getting my papers out here.

STINNER: OK.

SANDY LEWIS: So good afternoon, my name is Sandy Lewis, S-a-n-d-y L-e-w-i-s. I am the president of Nebraska Emergency Medical Services Association. I am an EMT and firefighter for Murray Fire and Rescue, and I have been an EMT for now over 21 years. I am also an EMS instructor for about eight or nine years. The Nebraska Emergency Medical Services Association, which is also called NEMSA, is a statewide association of emergency services providers. NEMSA is very grateful to Senator Dorn for being such a champion for EMS and for introducing LB760 to allocate five million ARPA funds for grants funding Emergency Medical Services program for the one-time purchase of equipment including ambulances, power cots, defibrillators and other similar life-saving equipment. And as-- as Senator Dorn did mention, when we were talking to this, this was prior to knowing of the 35 million for our Governor. So that's pretty exciting for us as well. As NEMSA testified to this committee in October, using the historical infusion of dollars to support emergency medical services, which traditionally do not receive state funds, with help to create a foundation for more effective response to future public health emergencies. EMS professionals provide essential frontline health care services in local communities. The ongoing pandemic poses a serious threat to health and safety of EMS professionals. This is on top of the well-known problem where less and less individuals are willing to serve in these crucial EMS roles. Modern ambulances, especially those equipped with power cots that can save the backs of EMTs and paramedics, are actually an important tool in retaining volunteers. Ambulances and EMS equipment is very costly but crucial to carrying out lifesaving work. A new ambulance costs approximately \$300,000. With more than 400 emergency services departments across the state, many of them in rural areas served by volunteers and receiving little to no public support, this one-time infusion of support is critical to bolstering the state's public health infrastructure. NEMSA did send out a survey to all of the members of hiring EMS departments in the state of Nebraska and to gauge the level of needs for services across our state. We found that there are millions in need statewide. Some of the top responses were requested to purchase new jaws of life, a

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hydraulic extrication rescue tool used in a number of difficult emergency situations, particularly car crashes. These rescue tools cost about 35 to 40 thousand dollars for a set of tools. That is a considerable expense, but if you can imagine your loved one being trapped in a vehicle, I know you can recognize the importance of rescue squads across the state having the right equipment for life saving jobs. Other equipment that was surveyed was our 12 leads, which helps detect of cardiac rhythms, cardiac issues, takes blood pressures, pulses, oxygen levels, those standard things for every call that we use. It also helps us detect strokes. If a patient is having any cardiac issues, such as a heart attack, we can relay that information to the hospitals to possibly decrease that time of getting that care. These run also around 40,000. These are just some of the major equipment needs. This doesn't include the other supplies and equipment, such as oxygen supplies, glucometer, bandages and many more. These departments need our help to ensure they can help their communities, these funds would be used to impact many lives throughout the state of Nebraska. Thank you for your consideration and I'll take any questions.

STINNER: Thank you. Questions? Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Thank you for coming.

SANDY LEWIS: Yes.

ERDMAN: So the bill says these-- these funds will go to volunteer-based EMTs or for first responders. So in these communities of 100,000, how many of those have volunteers?

SANDY LEWIS: And actually, when I'm thinking of rural and that is a number that I think we need to look at, because when I am thinking a number, being from Murray, we're-- we're talking about a community. The service is 430 people in Murray and then mutual aided because communities can't do it by themselves. So we're looking at possibly 5,000 or under looking at Beaver Lake and surrounding communities. Most of our rural communities are very small. Because of mutual aid then they do help other-- the number does grow around that. But I guess my-- my goal and what we have discussed is looking at those communities and through a grant process having them fill out the grant-- grant process and showing us their need for these small communities. Some of them have 30 miles to go before they can get to a hospital. And so this equipment will help them take care of that patient to ensure that we make-- that we take them there and that we

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can give the best care that we can to make sure that they-- they receive the care after we go to the hospital.

ERDMAN: Well, my thought is those communities that have significant population probably overpaid people doing that.

SANDY LEWIS: Yes, but these-- these small communities don't.

ERDMAN: Understand. Thank you.

STINNER: Additional questions? Seeing none, thank you.

SANDY LEWIS: All right, thank you so much.

STINNER: Good afternoon.

TOM HAMERNIK: Good afternoon, Senator Stinner. My name is Tom Hamernik, T-o-m H-a-m-e-r-n-i-k, and I'm a member of the Clarkson Volunteer Fire and Rescue Department, currently serving as a firefighter EMT. In March, I will have served as an active EMT for 43 years, and I'm also a member of the Nebraska State Volunteer Firemen's Association Legislation Committee, and I serve as its Chair and I'm testifying in support of LB760 on behalf of my local squad and the Nebraska State Volunteer Firemen's Association. We appreciate Senator Dorn introducing the legislation. It would-- could potentially help our department and volunteer departments across the state. It would be tremendous for the volunteer departments allowing some of them to catch back up on some of the needed-- much needed equipment, particularly small services have been cost-- caught between the increased demands that COVID has created, as well as emergency equipment costs that are rising much faster than our budgets allow. And I mentioned the cost of ambulances, which has been talked about today. Before I-- before I go on, I want to mention Senator Dorn mentioned power cots and being an old salt on the fire department, I was pretty skeptical when-- when we first looked at a power cot because it's \$40,000. But when I started, there was one lady on the rescue squad and now we have eight, and if I don't want to get up in the middle of the night, guess what? We've got to find a way for them to be able to handle patients and patients are getting larger. And so with-- with the use of a power cot, smaller, older responders as well as ladies can handle it, and it's been a worthwhile investment. I can say that. And we actually are going through the process to purchase a second one for our backup unit. And one of the previous when-- when Senator Dorn was talking and we're talking about a life of an

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ambulance. In Clarkson, we have two ambulances and we're on a 10-year rotation. So that means the oldest ambulance is 20 years old when we sell it. So, and I would assume that a lot of other departments are like us. So we have a 20-year-old ambulance and we use it when we have to, so. Additionally, our volunteer first responders in Clarkson, as well as across Nebraska and the United States, historically have engaged in making time in our schedules for fundraising in order to volunteer EMS and fire departments. Volunteer EMS services are included in Nebraska's law as a primary and essential health care service recognizing that the presence of an adequately equipped ambulance and training of emergency care providers may be the difference between life and death. However, as-- as those of you on the committee that come from rural or even suburban settings know, a great deal of fundraising occurs by volunteer first responders in order to equip their emergency vehicles. In Clarkson, we hold a minimum of two fundraising events annually. That's in support of our fire and rescue services. We use them-- that funding directly for the purchase of equipment, as well as to support our training events that we hold throughout the year, and training events are required for our continuing education of our EMTs and first responders. As a note, street and utilities departments in villages and cities in Nebraska do not conduct fundraisers to supply the equipment needed to perform their jobs. It just doesn't happen. Volunteer first responders routinely raise funds to purchase equipment and when-- and we will continue to fundraise. But the approach-- appropriations proposed in this bill will go a long, long way in assisting with the supply of emergency medical equipment for our volunteers. Please bear in mind that the equipment which would be acquired through this funding would help the people residing in our hometown communities, but also benefit those who travel through our state visiting our attractions like Lake McConaughy, Scotts Bluff National Monument, Platte River State Park, Mahoney and Lewis and Clark Lake. One of the other proposals to use the ARPA money is to increase the marina at Lewis-- at Weigand state recreation area on Lewis and Clark Lake. Part of my summertime spent up boating on Lewis and Clark Lake, and the state of South Dakota has 500 slips in their marina, and there's a tremendous amount of money that gets spent there over the course of that season, which starts in May and runs through October. And Weigand, I believe, has less than 100. I think they're shooting for 100 slips now. They may have around 50. So there's a lot of tourism that takes place at Lewis and Clark. And as a side note, that's covered by Crofton volunteer fire and rescue, as are most of our attractions in Nebraska. With that, I'll

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close. Thank you for your service to the citizens of Nebraska, and I'll try and answer any questions.

STINNER: Thank you. Questions? Senator Hilkemann.

HILKEMANN: I just-- I'm curious. You receive in-- in-- like your Clarkson, if-- if a person has health insurance or something of that sort, you received some--

TOM HAMERNIK: We bill. We-- we receive money through their insurance or through the Medicaid-Medicare program. We do not go after people to pay the balance. We take what we get through insurance or Medicare.

HILKEMANN: What percentage of the budget does that-- what would you say--

TOM HAMERNIK: I'm not sure I can answer that. I'd be-- I'd be surprised if that covers half of the cost, possibly a third of the cost by the time you figure your capital expenditures of the vehicles and the facility. I know it covers our supplies, our people who actually make the calls, get a small stipend for making the calls, and we don't get paid for any training or anything like that. We receive support from our city and our rural fire district. They share the expense of providing our vehicles and facility and insurance, things like that.

HILKEMANN: OK, thank you.

STINNER: Additional questions? Seeing none, thank you.

TOM HAMERNIK: Thank you.

TIM NORRIS: Hello, Tim Norris, T-i-m N-o-r-r-i-s. I am the Bennet fire chief in Bennet, Nebraska, so I support this bill 100 percent. And there are several things that you probably know or should know is DHHS changed the ambulance standard about a year and a half ago. Almost all the ambulances in Nebraska worked for the KKK standard. So all of your rural departments that have that ambulance can no longer sell that ambulance to another service. OK. And you can't buy one if you want to buy an ambulance. Now the Governor has for 90 days, made it available for people to do that now, about a year and a half later, but the problem is-- is it has lots of stipulations and it's only for a very short window, which means if you want to get an ambulance like when we wanted to get one, Springfield had a great ambulance because they bought a new one and we were looking to maybe purchase that one. And

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then this ruling came down, that ambulance became worth nothing as an ambulance because they couldn't sell it to anybody and we couldn't buy it to start a service in our department. So currently we do not transport anybody. Lincoln comes out and transports for us. The problem with that is-- is over time, Lincoln is growing and has more population, and their service to us is becoming greater. So when you have someone in a home or sitting on the side of the road for 30-40 minutes waiting for somebody to be transported, that's not good for Nebraska. And that's what we find ourselves with. You know, when you're just there saying, hang in there, they're coming, hang in there, they're coming, that really is hard for us as providers of first response to just be waiting and without being able to change anything. So we're in the process of purchasing ambulance and equipment, but we had to buy new because we couldn't buy used. About \$325,000 that we're having to take out of our fire budget. Guess what that does? That means that we can't buy some of the fire equipment that we need and want. We wanted to get a new tanker. I don't know when that's going to happen. We need new SABAs. Don't know when that's going to happen because a lot of our calls are medical. And the bottom line is, you know, we had to say, what's going to best serve our community? And we said if we can start getting people to the hospital faster and sooner, that's going to best serve our community. So again, I think this is an important bill. I think the Governor's bill is an important bill that can be combined some way, that would be great. But you know, we are very limited in our resources that we can use to spend that kind of money. That's what I had to say. Thank you.

STINNER: Any questions? Senator Kolterman.

KOLTERMAN: I have a question. Thank you, Senator Stinner. Thanks for coming, thanks for your service. Do you know or is there somebody coming behind you that could tell us whether or not the idea that you can't purchase used or eight years old or older, is that in statute, or is that a rule that DHHS has put into place, or has that been dictated by the federal government? If you can't answer it--

TIM NORRIS: Well, I can answer to some degree. So the-- the KKK standard is going away on a federal level, I believe, is my understanding. It's-- it's kind of like a ISO rating type thing. I believe my understanding is they're no longer doing it. Is that the case-- isn't that correct? They're no longer doing ISO rating like they-- KKK is no longer going to certify ambulance, is that correct? Anybody know that for sure? I'm pretty sure that's true. Anyway, that's possibly, but no matter what, without any kind of grandfather

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clause or any time to make any changes, the ruling came down, you can no longer purchase a KKK ambulance. Now, recently, I think it was in December, the Governor said yes for 90 days you can do that.

KOLTERMAN: Well, we'll find that out. Thank you.

TIM NORRIS: But the standard changed, and that really made a big difference in a lot of ambulances being switched around within the state.

KOLTERMAN: Thank you.

STINNER: I'm like Senator Kolterman, I'd like to know the logic behind that. Anyhow, is there additional questions? Seeing none, thank you.

TIM NORRIS: OK. You bet.

MATTHEW GILLESPIE: Mr. Chairman, committee members, my name is Matt Gillespie, M-a-t-t-h-e-w G-i-l-l-e-s-p-i-e. I'm the fire chief for Dalton Volunteer Fire Department in western Nebraska. I've been involved in firefighting since 1988. I joined the military between my junior and senior year of high school and did six years during the first Gulf War in Somalia in law enforcement operations. In 1993, as a volunteer at Poudre Valley Hospital after getting my EMT license in-- and later, as an EMT-B rescue captain at Dalton Volunteer Fire Department. As the fire chief and representative from Dalton Volunteer Fire Department, I would like to thank the Nebraska state Legislature and this committee for my opportunity to address this bill. Dalton Volunteer Fire Department currently serves approximately 650 square miles and then we mutual aid with a neighboring fire department due to their numbers dropping, so we cover over a 1,000 square miles. I'm going to cut this a little bit short here. I provided a few charts. The reason I found out about this bill is we were trying to get some funding through the ARPA program for the money that's gone out through county commissioners and municipalities. There is an extreme amount of confusion with the rules on "disbursement" of these funds. So they're sitting in bank accounts to where nobody is spending any of this until they can get clarification from this body and from above. I've provided a few charts. Pages 3 to 5 on here demonstrate the rising cost of some of the equipment involved with ambulance services here. My data sources for the ambulances is north central emergency vehicles through Minnesota. This ambulance price is on this is a smaller class that's used for transport from urgent care to hospital systems. These are not the ambulances we can use, but I got this for a trend because

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there is a company in Minnesota that orders 30 to 40 of these ambulances every year, and we can get a trend of where this is going. As you can see, from 2017 to 2022, I think it's a 43-- 42 or 43 percent increase in price. Some of the equipment that goes on here is the life pack. You see them if you've ever been on any ambulance blood pressure machine, you're 4 to 12-lead, EKG. Some of your AD equipment, your carbon monoxide, carbon dioxide and other gases that you need to test for. This shows how pricing has gone up on that. Power cot and power load. You've heard a lot of people talking about that. I would love to have one because I've got the same situation. I've got four EMTs. We have one out of commission right now. Two of them, or one of them is a female. But people are getting bigger-- patients are. And it's usually have to call for more help for lift assist to get them into the ambulance. But as you can see these two, the power cot and the power load go together. One is the attachment that sits in the ambulance, the other one is the cot itself. CPR, Lucas, this is a piece of equipment that we use that will do compressions during CPR. That shows that increase. The AEDs, you see them in schools and government buildings. Price increase on this and then the page 6, I showed how this price, if you put all that equipment on one of these smaller ambulances where we would end up. LB760 allots \$5 million, .5 percent, the available ARPA funds. Of these funds, fire departments to replace ambulances and vital EMS equipment. Fire departments that are eligible to apply for these funds are volunteer fire departments, communities, the population under 100,000 in the community. There are currently 478 fire departments in the state of Nebraska. There are six paid agencies, 342 of these are volunteer and provide full fire and rescue. My time has expired.

STINNER: That's all right. You're from western Nebraska, you got--
(LAUGHTER).

MATTHEW GILLESPIE: I can't tell time, so. But what we have, if I can make one comment. We have a smaller population with a higher distance to cover. Most of our roads are dirt and rough. We travel to three different hospitals over many miles. Our numbers are down. The wear and tear on the equipment is higher, and it seems like I don't want to insult anybody, the checkbook seems to run out at North Platte when it goes to the west, so. Any questions?

STINNER: Any questions? Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Thank you, for him allowing you more time, Mr. Gillespie.

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MATTHEW GILLESPIE: Yes, thank you.

ERDMAN: How are your parents?

MATTHEW GILLESPIE: Doing good, doing good-- better.

ERDMAN: Tell them "Hi" for me.

MATTHEW GILLESPIE: I will.

ERDMAN: So I appreciate you coming all this way. So when we would-- if we would pass this bill, what things would you apply for? What is your most urgent need?

MATTHEW GILLESPIE: The most urgent need I have right now is a new life pack. The one I have I took into a residence the other day. Their blood pressure machine at the residence was newer and nicer than the one I had on my ambulance. Now what kind of an appearance does it look like when your equipment is worse than your patients? You want to get these people to settle down, relax and feel comfortable. That's how you save them when you're driving 45 minutes to an hour is to make them relax, talk to them, get it down. But it's the situation. I've been in that, caught several times too. Fact with our new ambulance, I was the first one that rode in it. So you want to get them to settle down and if their equipment looks professional, it looks good, it's up to date, they do better, we do better.

ERDMAN: So on your chart, you talk a new life pack is about 32,000?

MATTHEW GILLESPIE: That's low end. All-- we'd like to have a 4-lead EKG. We don't have that capability at all. Just so that we can have that information at the hospital when we get to the emergency room to hand to the doctor. I've reviewed EKGs before when I worked at PVH in Fort Collins. Most of our EMS system, they don't evaluate these, EMTBs, but that's the main thing that we would want to do. If you got the full 12-lead EKG with the modem system that can connect to your-- your local doctor and he can read it over the computer as you're coming in, you're talking 42 to \$45,000.

ERDMAN: You also made a comment that you do mutual aid with other fire departments. Which ones do you work with?

MATTHEW GILLESPIE: We work with Gurley Volunteer Fire Department, their numbers with active members, right now are down to about eight. We're at 27. Potter Fire District had a recall on their ambulance, so

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we've mutual aided to the north end of Potter Fire District. And then if they run into situations where it's mass cash-- casualty or they need more assistance or in some like these fires over the last summer where we have to have EMS because we've got 45 or 47 fire departments at these, we can assist around the Panhandle and elsewhere.

ERDMAN: Did you respond to the fires in Banner County last summer?

MATTHEW GILLESPIE: I spent 87 hours on a fire truck in August. It's hard to pay the electric bills when you're a volunteer working that many hours. But that's one thing about the state of Nebraska in this area. We have people from everywhere, Colorado, Wyoming, South Dakota, Rapid City, all the way over Broken Bow, York, you know. And that is one good thing that we see. The cost is a little bit of a headache with communications, but we're working on that too.

ERDMAN: Well, we appreciate your service. Thank you.

MATTHEW GILLESPIE: Thank you.

STINNER: Additional questions? Senator Kolterman.

KOLTERMAN: Yeah, thank you. Appreciate you coming. So talk a little bit-- you have 27 in your department.

MATTHEW GILLESPIE: Yes.

KOLTERMAN: How big is your community?

MATTHEW GILLESPIE: We have a community or our municipality is-- is 350 people. Gurley, I think it's 247.

KOLTERMAN: So how difficult is it to recruit?

MATTHEW GILLESPIE: It's impossible. When I grew up, like I said, I came from a family of volunteers. All of us served in the military. It was a rite of passage-- passage when you moved back to this community that you joined. And we failed the next generation in not-- in pushing for that mentality. And it makes it tough to get people to join up and get people to come to meetings and calls.

KOLTERMAN: And you're-- and you're a volunteer.

MATTHEW GILLESPIE: Yes.

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KOLTERMAN: You don't have the equipment, you need to really make it easier on the people who are volunteers.

MATTHEW GILLESPIE: Oh, definitely.

KOLTERMAN: Is that an accurate statement?

MATTHEW GILLESPIE: That is accurate statement. We've got two pieces of new equipment. We've got a new rural pumper that we got a FEMA grant for, and we've got a refurbished ambulance that we picked up four years ago in Iowa. The other vehicles, most of our grass rigs, most of our fire trucks, our forest service trucks that we buy the chassis and we build the truck ourselves. Last year we took-- got a troop hauler, six by-- troop hauler and made it into a 3,800 gallon tender that we took up to the post fire in Crawford. I took up to the post fire in Crawford itself.

KOLTERMAN: Well, I was just trying to point out the issue that really is at hand. It's harder and harder to recruit and we're not given the type of equipment we need to supply, and thank you for your service.

MATTHEW GILLESPIE: Thank you.

STINNER: Any additional questions? Seeing none, drive very careful.

MATTHEW GILLESPIE: Thank you, Mr. Chairman, members of the committee.

ANDY HALE: Good afternoon.

STINNER: Good afternoon. Good to see you again.

ANDY HALE: Good to see you again. Chairman Stinner, members of the Appropriations Committee, my name is Andy Hale, A-n-d-y H-a-l-e, and I am vice president of advocacy for the Nebraska Hospital Association, and I'm here to testify in support of LB760. Hospitals work closely with our friends and partners with EMS. When a patient comes into one of our facilities, it is important that an EMS vehicle is properly equipped. To benefit everyone, it's extremely important when these individuals walk into our facility, or transported in our facility, as we know, when you dial 9-1-1 and EMS, every second counts and we need to make sure that these vehicles are the best they have and really, more importantly, the equipment they have. It does no good when these individuals come into our facilities with outdated equipment. Every second counts and so it's extremely important that these wonderful individuals who do this job, and I say job probably in quotations,

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because as we've heard from today's testimony, almost all of them are volunteers, especially in our rural communities. And so we really appreciate all the work that Senator Dorn and his staff has done and would like to get this bill advanced. What I'd also like to talk about today is the need for simulation training. As we've gone through the pandemic, it was really all hands on deck when you look at it. No one's practicing outside of their scope of practice. I want to emphasize that for those in this room and listening, but everyone has been at the highest level of their license and there's a learning curve that comes with that. Whether it's our hospital employees, whether it's our partners with EMS. How do we get those individuals trained so they're doing the right job? They need the latest equipment, they need the newest equipment and technology. The individual who testified before me gave a perfect example. You walk into somebody's home and their equipment that they have is better than yours isn't what we need right now. So what we would like to do is ask for additional funding. The number that we've looked at right now is \$5 million, whether it comes out of the government's budget or it's also appropriated in when you're discussing your ARPA money. But simulation training has really risen to the top. It's one of our top issues when you look at workforce, wage increases, all down the line. We've spent probably the last two or three months working with SIM-NE, Doug Dekker, who is behind me, who's going to-- he was invited here by a member of the committee to testify. He can tell you all the great things that we did, but we kind of put out a survey to our critical access hospitals, all 64 of them and said, what training do you need and the SIM training came back. And so Doug does a great job at UNMC with the truck. There's also other programs at other facilities that have for simulation training. But again, as we get these individuals that are doing things that they never thought they'd do or comprehend to do, we need training and the best training that we can do is hands-on training. So with that, I want to thank Senator Dorn, and we know the senator has introduced funding specifically for SIM truck. We all know that it's been different-- different budget times and different times with that. But with this ARPA money now is probably the right time to do that, so. I thank you, for Senator Dorn and his staff for introducing this, and I ask that everyone advance this and support LB760.

STINNER: Thank you. Questions? Senator Hilkemann.

HILKEMANN: Where do we-- at one point, the Helmsley Foundation provided a lot of some training. Where does that stand right now?

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ANDY HALE: Doug Dekker will-- behind me, testifying, but I think some of that money is, I won't say, running out, but has been greatly depleted. So right now, we're looking at any ways to increase funding not only for simulation training, but for those to attend the simulation training.

HILKEMANN: And am I correct at one time that your group or some group tried to get like a-- a dollar added to driver's license that would have taken care of this, is that correct?

ANDY HALE: That is correct. Yep, yep. We saw the benefits even before the pandemic or really during the pandemic, and we tried to get that in and it did not pass.

HILKEMANN: And I understand it. That never made it out of committee.

ANDY HALE: Correct.

HILKEMANN: OK, thank you.

ANDY HALE: Thank you, Senator.

STINNER: Additional questions? Seeing none, thank you.

ANDY HALE: Thank you.

STINNER: Good afternoon.

DOUG DEKKER: Good afternoon. Good afternoon, Chairman Stinner, and members of the committee. My name is Doug Dekker, D-o-u-g D-e-k-k-e-r. I live in Papillion, Nebraska. I'm the program manager for Simulation in Motion-Nebraska, or SIM-NE. Thousands can enter professional Experiential Center for Enduring Learning, or iEXCEL, at the University of Nebraska Medical Center. I appreciate Senator Kolterman's invitation to testify before you today. I'm here testifying as a private citizen, not as an employee of the University of Nebraska system. I'm testifying in favor of LB760 with the additional ask for the SIM-NE training. I want to echo what Mr. Hale just said is that, you know, new equipment is fantastic, but with new equipment comes needs for new training, and that is what we do. So Nebraska has been delivering training for the last four and a half years across the state of Nebraska. A pause in training occurred for over a year of that time due to COVID-19 pandemic. That time aside, the 40 months that SIM-NE has delivered on-site training has been impactful with 517 training events conducted, 85 educational contacts

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provided. When SIM-NE arrives, the parking lot of the volunteer ambulance service, fire department or critical access hospital, we're bringing approximately \$1 million worth of equipment, truck and supplies right to the volunteers of critical access hospital staff. The unit patient simulators we use have pulses. Their eyes blink and react to light and their chest rise and fall as if they were breathing. You can hear the heartbeat, listen to their lung sounds, and even take their blood pressure. Our most sophisticated simulator, the SIM-NE, could even deliver a baby. Of Nebraska's 63 critical access hospitals, only 31 schedule babies to be delivered, with some of them only delivering nine children a year. Emergent and complicated childbirth scenarios are some of the most requested scenarios by the volunteer ambulance services and critical access hospitals. This is an example of the low frequency, high acuity types of scenarios that are regularly requested of SIM-NE trucks. Please see your packet for information about how SIM-NE training recently provided this training in a very timely fashion. Additionally SIM-NE receives many trauma and cardiac related volunteer or-- excuse me, training requests. Volunteer providers and critical access hospital staff want to make sure that they are current on best practices when it comes to trauma and cardiac cases due to the high volume of patients they see in those two areas. SIM-NE programs has more recently started to receive requests to deliver training to other medical providers. One program delivers training to school emergency response teams. Since returning to delivery of onsite training last June, SIM-NE has already delivered five school emergency response team training events, training 162 members of the emergency response teams. The school training events cover Rule 59 as it relates to the care of students, staff and visitors of school that are suffering from asthma attacks or anaphylactic reactions and the care of cardiac arrest victims, and it works. In September of 2019, approximately 30 days after conducting a training at a school, their response team was called into action when a staff member suffered a cardiac arrest. Response team members that cared for the victim had taken the SIM-- SIM-NE training. Due to the efforts of the response team, ambulance crew and hospital workers, that man survived the event. In April of 2021, the Nebraska Department of Health and Human Services Emergency Health Service Systems Program received a grant to place ADs in law enforcement vehicles across the state. As part of that grant, SIM-NE will be conducting 180-plus training events across the state over the next two years, with hands-on simulation training to law enforcement officers related to the AD and patient care. Offering this AD training will allow SIM-NE Nebraska to investigate the possibility of creating additional

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simulation training opportunities for law enforcement officers serving in the streets of our communities in our correctional facilities. The numbers of emergency medical providers impacted by SIM-NE, combined with the upcoming training opportunities, are a testament to the high-- to the demand for high fidelity training across the state. SIM-NE can help meet the demand and help emergency medical providers and volunteers keep the citizens of the state safe. Finally, I'd like to take a moment to acknowledge the frontline health care workers and critical access hospitals and volunteer ambulance services and fire departments across the state, many of whom are in this room today, and some of whom I call friends. I know the entire staff of SIM-NE is proud of your dedication to your family, your friends and your community. They are also honored to serve you with your educational needs. Thank you for considering this critical addition to the support of LB760 and I'm happy to answer any questions.

STINNER: Any questions? Senator Kolterman.

KOLTERMAN: Mr. Dekker, thank you for coming. I invited you to come because I thought it was important for the people to hear what goes on. I've had the pleasure of working-- or being in your equipment, and I know that the critical access hospital in Seward and York and all those volunteers have utilized your services.

DOUG DEKKER: Yes.

KOLTERMAN: You weren't asked to come as a member of the Nebraska Medical Association-- or the Nebraska Medicine.

DOUG DEKKER: Right.

KOLTERMAN: But I thought it was important. One question for you. Would you be open to the idea-- are you the only simulation educator in the state?

DOUG DEKKER: We're the only mobile simulation education in the state. There are other simulation facilities within community colleges and other areas of the state, but as far as being able to go out to the rural areas of the state, we're the only one.

KOLTERMAN: If we-- if we included this in the-- in the grant proposal, would that meet your needs so you could apply for the grant along with other simulators? Would you be open to that?

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DOUG DEKKER: We'd be open to whatever funding mechanism that this body feels is the most appropriate.

KOLTERMAN: And where do you stand in the funding right now? You were started by the Helmsley Foundation?

DOUG DEKKER: Sure. The Helmsley Charitable Trust funded us initially and got us through about a little over three, three and a half years right in there. That money has since lapsed. They did give us another smaller grant for some sustainability or ongoing funding as we move towards sustainability. And then we also have some philanthropic money within the Nebraska Foundation of University of Nebraska Foundation that we're using. So those funds are, you know, a lot like the-- the volunteer said, you know, we're out begging for our supper when it comes to those types of things. We don't have the-- the long-term sustainability. But we are working towards that on multiple different areas, it's just that it takes time.

KOLTERMAN: All right. Again, thank you for coming.

DOUG DEKKER: You bet.

STINNER: Senator Hilkemann.

HILKEMANN: Following up on that, those Helmsley SIM units are still here in the state are they not?

DOUG DEKKER: That's correct. Yes. And that's what I'm speaking about. We still have those four. They're in Kearney, Norfolk and Scottsbluff is where they live. And then we have one that actually lives in Omaha. And when I say they live there, that's where they live. They don't go to work. Unfortunately, the cold got to us this week, but had it not been for the cold, we'd been in Hickman and Big Springs and Cedar Rapids, I think, just this week. But like anything else, you know, the cold doesn't treat us well sometimes, so we had to change.

HILKEMANN: So we still have the units, we just don't have the funding to keep those going.

DOUG DEKKER: We just need to have the sustainability funding. We've had enough funding to get us through for a period of time yet, but at some point there needs to be the full-time sustainability funding. Like I said, we're working on multiple thoughts. It's just-- I think you mentioned the 50 cents for life that we-- we came for the transportation committee a couple of years ago. Everyone there was

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very much in favor of it. They just weren't so much in favor of the stream that we were picking, so.

KOLTERMAN: And-- and ideally, you would probably have additional units here across the state.

DOUG DEKKER: I think we're good with four. That-- that's enough as far as the big trucks are concerned. They are able to serve their-- their regions very well. More-- more trucks would not necessarily be a need at all.

KOLTERMAN: OK.

STINNER: Senator Clements.

CLEMENTS: Thank you, Mr. Chairman, and thank you, Mr. Dekker. Who owns the SIM Nebraska trucks?

DOUG DEKKER: The SIM Nebraska trucks are part of the University of Nebraska Medical Center. That's who owns them and that would be the way to put it.

CLEMENTS: They were-- that they were provided by the Helmsley Trust?

DOUG DEKKER: Correct. They were purchased initially with the Helmsley Trust money, and then they were deeded or granted, or however you want to say it, to the University of Nebraska Medical Center.

CLEMENTS: OK. Thank you.

STINNER: Additional questions? Seeing none, thank you.

DOUG DEKKER: Thank you for your time.

STINNER: You bet. Any additional proponents? Any opponents? Anyone in the neutral capacity? Seeing none, Senator, would you like to close?

DORN: Want to make just a few comments, I guess. I think everybody just passed out this handout or whatever. It's amazing. Sometimes I call it what can be brought forward whenever you see the effective date. When we bought or were purchasing our ambulance in approximately August/September timeframe, that was before this. We were told by the salesman specifically that our ambulance was over eight years old at that time, it could not be resold and we wouldn't have no value for a trade-in. I was not part of the committee, so I'm not sure of it. Met

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some of these other qualifications or exemptions or not, that I don't know. So we did not at that time, but you can see now that effective 12/9, '21, as long as it is 15 years of age or younger, you can resell it and stuff. The other thing Senator Erdman brought up the volunteer and thank you for that part. I don't know all of the data, for sure. I know at one time Kearney was a volunteer service. I don't know if they still are. I can't verify that. I will speak, though, for like Beatrice. Beatrice has paid EMTs on their city squad, but they also have a rural squad, what they call. I don't know if they have any EMTs or not, but they are part and they're all volunteer. So when some of this under 100,000 and volunteers, that eliminates a bunch of those and the one guy talked about, I thought 300 and some squads yet though. So there's still a lot of squads out there. So thank you much for some of the questions.

STINNER: Any questions? Seeing none, thank you. We have five letters of support, none in opposition and none in the neutral. That concludes our hearing on LB760. We have a jumper right now. Senator Bostar, LB1257, will be heard next. You must be important, you jumped in front of everybody.

BOSTAR: I think it's the opposite.

STINNER: Go ahead.

BOSTAR: Good afternoon, Chairman Stinner and members of the Appropriations Committee. I am Eliot, Bostar, E-l-i-o-t B-o-s-t-a-r, representing Legislative District. 29. I'm here today to introduce LB1257, appropriating \$10 million from the Federal Coronavirus State Fiscal Recovery Fund pursuant to the Federal American Rescue Plan Act, or ARPA, to create a comprehensive network of electric vehicle charging stations throughout Nebraska. LB1257 would task the Department of Transportation with the creation of a competitive matching grant program for the installation of a network of universal fast charging stations throughout the entire state, not solely focused on the I-80 corridor. The number one obstacle to widespread adoption of electric vehicles is range anxiety, the fear of being stranded nowhere near a charging station after depleting your vehicle's charge. Installing charging stations throughout the state in rural areas, as well as high traffic corridors, will provide Nebraskans living in any corner of the state with the freedom to purchase an electric vehicle. Auto manufacturers are spending billions of dollars on the manufacturing of electric vehicles as the new vehicle market is changing and adapting to consumer demands. By 2025, General Motors

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will offer 30 new models of EVs, and by 2035 they will completely discontinue the manufacturing of internal combustion engine vehicles. Ford, for example, has an all electric F-150, and Chevy has released their electric Silverado. During the pandemic, we've seen supply chain issues and our travel and tourism industry struggle. By using ARPA funding for EV charging station infrastructure, we are signaling to auto manufacturers that we are ready to accept needed inventory for our dealers, as well as encouraging EV owners from other states to come and visit or traverse Nebraska in their electric vehicles. While it is true that Nebraska is poised to receive nearly \$30 million from the Infrastructure Investment and Jobs Act for EV charging stations, those dollars have significant restrictions preventing statewide infrastructure development. The \$10 million appropriation in LB1257 is a one-time infusion of funds to allow the Department of Transportation to focus on EV infrastructure that serves our entire state, not just the interstate corridor. With that, I thank you and happy to answer any questions that you may have. There will also be some individuals behind me that will have some more technical information they can provide.

STINNER: Thank you. Any questions? Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Thank you, Senator Bostar, for bringing this up. So as we continue to have more electrical vehicles, they pay less gas tax. So when we get all electrical in '35 or whenever it is, we've got to figure out another way to pay for our roads.

BOSTAR: Yeah.

ERDMAN: And the other question I have is why is it the state's obligation to build these charging stations? Shouldn't those people who want to use those charging stations pay for them?

BOSTAR: So I'll take those in order. You're absolutely correct that we will need to seriously examine how we are doing our infrastructure and roads funding. Even just with the efficiency standards, as cars become more efficient and use less fuel, we're seeing the impacts on a depleted reserve of funds that we can use for road construction. We absolutely have to do that. As far as should the people who want to drive electric vehicles be the ones to pay for this, I would say that we're going to-- we're going to approach a point where actually purchasing a new internal combustion engine vehicle is going to become more challenging and it will come with a premium cost if you're able

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to do it. So considering that that's where the market's going, I have no doubt that Lincoln, Omaha, the I-80 corridor that's going to get covered. We're going to have EV charging stations. What I don't want to see is folks in rural Nebraska get left behind where they basically have to buy electric vehicle and they've got nowhere to charge it. And so that's what I think that this is trying to address. I hope that answered your question.

ERDMAN: Well, we don't currently, if I don't have a service station in my-- in my location, the state doesn't provide a service station so I can get gas. So why should the state provide a place to charge a car?

BOSTAR: Well, because I think that's where the market is going, and I think we're trying to provide a public benefit.

ERDMAN: Well, maybe I'm old-fashioned, but I think less government is better. So if electric cars catch on and they're of need, people will pay for a charging station. I don't see this as one of the government's challenges or obligations to build a charging station for somebody who wants to buy an electric car.

BOSTAR: Yeah, and I totally understand that, Senator, and I appreciate that perspective. I would say that, you know, we don't require folks to-- well, we didn't require folks to pave the roads at their own expense in rural Nebraska. You know, the state steps in, the government steps in for a public good to ensure that commerce can take place, that people can get from A to B.. I sort of see it in that light. You see it differently. And I understand that.

STINNER: Senator Dorn.

DORN: Thank you, Chairman Stinner. Thank you, Senator Bostar, for being here. And maybe-- I don't know if you can answer this or maybe somebody afterwards is coming somewhere here in the last since the-- the-- the federal government has passed the last transportation bill to help with broadband and a lot of other things, my understanding the article I read, that for most of the states there was funding in there for this type of situation with charging stations. And I don't know if I read that correct or not or understood that right, but does that, what you're proposing here, does that able to fund all of that?

BOSTAR: Yeah, that's an excellent question. You read that correctly. I touched on it briefly in my opening, but I'll be a little bit more

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clear. There is money in the, I'm trying to remember the name of it exactly, Infrastructure Investment and Jobs Act--

DORN: Yep.

BOSTAR: --probably at \$30 million. However, there are restrictions within that about where the charging stations can be. And so essentially they can be on an interstate corridor. So that will provide resources to have charging stations in Omaha and Lincoln throughout I-80. But we're not going to-- that can't be used to put them in greater Nebraska and to make sure that, you know, folks out in rural areas have access to this kind of infrastructure. So that's what-- that's what really the focus here is. And in this bill, there's some language talking about ensuring that underserved and utilized areas are the priority. That's the function.

STINNER: Any additional questions? Senator Hilkemann.

HILKEMANN: When I looked at this bill, Senator, I-- how does this-- how do you think it qualifies under ARPA?

BOSTAR: So I think you qualify under ARPA because it will enhance the ability for people to traverse the state who utilize a technology that currently isn't supported. So allows them to come to the state because we saw a reduction obviously in in-state tourism travel throughout the state. So I believe that this will help offset some of that and ensure that we can maximize, to the extent possible, who's able to come through the state. Because if you have an electric vehicle right now, there's a lot of places you just can't go.

HILKEMANN: OK. Well, my concern was I really-- I could not see from what my understanding of ARPA dollars, I could not see where this even fell within that. But that's just me. Maybe other people on the committee feel differently.

BOSTAR: Absolutely. Happy to talk about it more too, Senator.

STINNER: Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Maybe one more question. How many charging stations will \$10 million build?

BOSTAR: So it's designed to be a matching grant program. So, you know, we're going to leverage ARPA dollars to actually have a greater effect. So I'll start there. And the answer is going to be a little

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disappointing. It depends. It depends on the kind of charging stations and there will be actually someone behind me that I think will have more specific detailed information about the costing of-- of units and stations in general. And-- and if that information isn't provided, I'll make sure that you get it.

ERDMAN: So then we're doing these electric vehicles to lower the carbon footprint. Is that what we're trying to do?

BOSTAR: Well, I think for the purposes of this bill, we're doing this, we're trying to develop this supporting infrastructure for transportation because fundamentally the market is going this direction. Whether that's because you want to lower carbon emissions and that's why you bought an EV or because they're lower maintenance cost or what have you, I think that there's a number of reasons why people would choose to procure an electric vehicle. And so I think we're just trying to be supportive on the infrastructure side.

STINNER: Additional questions? Is this-- I'm trying to think of an analogy for this, and I come up with broadband and the support the state has for broadband and putting broadband out into the rural Nebraska.

BOSTAR: Yeah.

STINNER: It needs to have some subsidy and help. And I think that's what you're trying to say. Is that--

BOSTAR: I think that is what I'm trying to say.

STINNER: --fairly close?

BOSTAR: When, you know, we have a lower density areas of our state, rural Nebraska, it probably doesn't make sense for a company to choose to invest in this kind of infrastructure development in those places without some support from the state, like road construction, like power lines, like broadband. It's a similar sort of idea.

STINNER: You know, I want to thank you for ranging anxiety. That's a wonderful term because I drive a long way and I always have anxiety [INAUDIBLE] add four hours to the drive. So thank you for that. Any additional questions? Seeing none, thank you.

BOSTAR: Thank you.

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RANDI SOTT: Good afternoon.

STINNER: Good afternoon. Good to see you.

RANDI SOTT: Chairman Stinner, you too, it's my first time in this committee, so thank you. Members of the Appropriations Committee, my name is Randi Scott, R-a-n-d-i S-c-o-t-t, appearing before you today as a registered lobbyist on behalf of Francis Energy in support of LB1257. We would like to first thank Senator Bostar for introducing LB1257 and the Nebraska Chamber for including an electric vehicle charging station network in their ARPA request package, and for recognizing that the time is now to become a leader in the Midwest for transportation innovation. Francis Energy is a company based out of Tulsa, Oklahoma, in the business of owning and operating electric vehicle direct current fast charging or DCFC stations. These stations are in essence superchargers, and they can charge an EV, electric vehicle, anywhere from 7 minutes to 90 minutes. In 2019, Francis Energy built out a comprehensive statewide network of 225 of these superchargers and 109 sites throughout the state of Oklahoma. And so that ensured approximately every 25 to 50 miles there's a station which helps with that range anxiety that we just spoke about. The type of charging station installed in Oklahoma depended on the location of the site. For instance, the longer 60- to 90-minute stations were ideal for downtowns of the smaller communities to entice EV owners off the highways and into those small towns to help out as economic development as well. Francis is different from other EV charging stations that you'll see across the country because while other-- others focus on ensuring population centers have enough stations, we do like to focus in the rural areas. This type of accessibility, as Senator Bostar spoke, would give Nebraskans permission to purchase these electric vehicles as they come in the next few years. I give you a little bit of background on Francis Energy to illustrate how these ARPA dollars could be used to best serve Nebraskans when it comes to EV charging station infrastructure. The ARPA funding request is a one-time infusion to install EV charging infrastructure where it best serves all Nebraskans. The auto manufacturers are pouring in hundreds of billions of dollars into manufacturing electric vehicles in popular models that we like to drive now. Also, at every price point and over 100 EV models are expected to be available by 2025. Nebraska can signal to the manufacturers that the state is ready for the transition from internal combustion vehicles to EVs by installing this charging infrastructure. As adoption of EVs increases in surrounding states, those drivers also will be able to-- to come to Nebraska. Francis Energy respectfully requests the Appropriations Committee consider

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using-- utilizing these ARPA funds to jumpstart electric vehicle charging infrastructure in Nebraska. Thank you for your time, and I would be happy to answer any questions.

STINNER: Thank you. Questions? Seeing none, thank you.

RANDI SOTT: Thank you.

CHRIS DIBBERN: Good afternoon, Senator Stinner, members of the committee. My name is Chris Dibbern, C-h-r-i-s D-i-b-b-e-r-n, and I'm the general counsel to the Nebraska Municipal Power Pool. I'm a registered lobbyist and I was very excited because I thought I would be the very last speaker today. So thank you for line jumping. I'm [RECORDER MALFUNCTION] --the Nebraska Power Association. That is every member of the public power in the state, public power districts, municipalities, rural electric associations, and co-ops. We support the appropriation of federal funds to the Department of Transportation to coordinate and administer a competitive grant program to provide matching funds for a statewide network of electric vehicles. A lot of great terms in there. As, as, as our Senator Bostar mentioned, it is for those corridors off of the interstate that we're really interested in too. We would recommend one change. Strike the word "private entities" from the bill. Allow non-private entities also to apply for the grants. Remember, it's matching, it's statewide, it's underserved, it's rural. And other entities might be electric utilities like I represent today, municipalities, and they said they'd like to see these infrastructures in municipalities so I thought that made sense. Universities, colleges, public schools, churches, hospitals, state and national parks would be other areas that you would want to put a charging station in and, and apply-- and again, apply for the grant, see if it's matching. This would allow rural areas to get electric vehicle charging stations faster. We had a great question about why, why support this. Innovation often needs to be supported at the beginning. I rented an electric car in another state and I had that range anxiety and brought it back to the rental station very quickly. Didn't fill it up because I didn't know how to fill up the-- you know, how to recharge it. But it's, it's new technology. It was a great car. As, as you've heard, they're coming with the car manufacturers. So we are very supportive of electric vehicle charging stations, but we also think you might need to innovate-- might need to help it in the beginning. Any, any questions?

STINNER: Questions? Seeing none, thank you.

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CHRIS DIBBERN: Thank you.

STINNER: Good afternoon.

LOY TODD: Afternoon, Senator Stinner, members of the committee. My name is Loy Todd. That's L-o-y T-o-d-d. I'm the president of the Nebraska New Car and Truck Dealers Association. I've also been asked to speak on behalf of the Nebraska State Chamber. I will touch on a few of the State Chamber's issues first. Quite frankly, they're interested in this and promoting this legislation for economic development purposes and they see it as an opportunity to promote tourism, to, to be innovative and be a participant at this one-time expenditure jump starts this this process and the public-private partnership opportunity, especially as we've heard previous testimony. Also, public-public kinds of partnerships could really be beneficial for the state of Nebraska. So far as our concern on this, we're kind of middled. My dealers are expected to sell these cars and the public right now has about a 2 percent acceptance rate and so we are in a dilemma. And that dilemma is compounded by the fact that it appears that the federal government, many other agencies of government, are insisting upon this conversion to electric. The automobile industry, the manufacturers are-- I just picked this up this last week-- investing \$1 trillion with a "T" in conversion to electric. We are told that by 2030, 50-- over 50 percent of the vehicles will be electric. Now it is range anxiety. That's what's stopping it right now. The people are not unwilling to convert to electricity, but the range anxiety is, is, is a real concern, especially with a rural state like Nebraska. When you're talking about the size of our state and all that travel and also we have weather here. You know, when I go to a lot of national meetings, those kinds of things, the discussion is different if you're in the south or if you're in good, good weather climates because it isn't just cold. Also, heat affects the range of these vehicles. And so we're stuck in the middle and I get invited to countless meetings with people promoting this industry. I tell you something, I'm learning something. We used to say, "yes, but." Yes, but somebody's got to generate electricity. Yes, but is there enough grit? Yes, but-- and you don't get invited back to the meeting if you say "yes, but." I've learned to say "yes, and." So yes, and we've got to figure out where to get the electricity and we've got to figure out how to get all of the other necessary components. And so I'm here to say yes and we'll do what we can, but for right now, it's really important because, because it's coming. I'm going to tell you something, it's coming. We-- there is no other option. It might come slower than they think, other things-- as the science develops, as

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batteries are improved, as range is improved, it's coming and so we ought to get ready for it. And if I could, if I could be in charge of one thing, and I can't, but nationally, I preach all the time: we need a universal plug. This-- I-- don't want to be like the cell phone industry where every time you change, you've got to go buy six new plugs and none of them fit each other. If I were in charge of any part of government in this, in this field, I would say one thing: universal plug. The rest of it will, will follow so thank you.

STINNER: Any questions?

DORN: Yeah.

STINNER: Senator Dorn.

DORN: Thank you, Chairman Stinner. Thank you, Loy, for being here. I guess, I-- are you, are you aware of or do you know are there charging stations now? And everybody talks about charging stations going across, right? Do-- is there a fee or what kind of fee are we looking at or how is that-- what do you see there going forward?

LOY TODD: Well, we just had a hearing-- Senator Friesen's bill-- on how we're going to pay for this. And in Nebraska, uniquely, we can't resell electricity. And so what they try to do where there are meters is you either charge by the time or, or some other, some other formula, but you cannot in Nebraska have a charge based upon the reselling of, of the power. And so what we've been looking at some other way, including how to fund the Highway Trust Fund and the replacement revenues. I just saw a list of 17 states now that have EV surcharge. We have in Nebraska \$75. And certainly, certainly it's not comparable to what the average ICE engine generates for the Highway Trust Fund, but it's, it's a serious concern. Who's going to pay for the roads? And so they are looking at alternatives, mile taxes and different thing like that, and hopefully there'll be some conversion. But for right now, about the only thing that's available is charge by the-- I wish it wasn't hour-- by the minute, by the, by the whatever. So from that standpoint, that is a real dilemma right now. So the answer, yes, and we have to figure out how to fund it.

DORN: Yes, but-- and then I'll make one other question on the range-- comment on the range anxiety. I don't know why there is anxiety because it would be just like a gas car. When you run out of power, it stops.

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LOY TODD: Yeah, I guess you'll know, won't you?

DORN: Yeah.

STINNER: Yeah. Any additional questions? I just want to know what my odds are of getting another 13 years out of my car.

LOY TODD: I know GM is going out of business, so it's highway miles don't even exist. They don't, they don't count. We ignore those when, when they're reselling cars.

STINNER: Thank you.

LOY TODD: Thank you.

STINNER: It'll be 25 years old by the time I trade it. Additional proponents? Any opponents? Anyone in the neutral capacity? I'm going to say you're a lucky guy.

JON CANNON: He told me I was a lucky guy. Good afternoon, Chairman Stinner, members of the Appropriations Committee. My name is Jon Cannon, J-o-n C-a-n-n-o-n. I am the executive director of the Nebraska Association of County Officials, otherwise known as NACO, here to testify today in a neutral position on LB1257. First and foremost, would like to thank Senator Bostar. He is my senator, for what it's worth, and I do appreciate him bringing these sorts of innovative uses of government power and its authority. I am not here to make a brief for or against electric vehicles. That's not what NACO is about. But I will say, I think most of us here watch the Super Bowl and we saw a lot of car ads and most of those car ads were about electric vehicles so we know what's coming down the pike and you've already heard that from the previous testimony. Those electric vehicle owners have money and they are going to be spending them on not just on their expensive cars. Do we want them only spending that-- those dollars along the I-80 corridor? My brief is for 93 counties, not just the counties that exist along I-80. I'm always about the development of rural Nebraska and frankly, we've-- since the 2020 census has come out, we've seen the continuation of the worsened trend of the depopulation of rural Nebraska. And anything that we can do in order to spur development and spur economic activity in those rural counties is something that NACO is going to be in support of. And so while I'm neutral, you'll notice that my testimony has a more positive flavor. And frankly, that is because this is something that the NACO board did not take a position on because it just slipped past the radar. If you have a new NACO

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executive director next week, you'll understand that I guessed wrong. But the good news is, is one of my board members is actually going to be testifying on another bill today. So fingers crossed I'm still here next week. And with that, I'd be happy to take any questions that you might have

STINNER: Senator Clements.

CLEMENTS: Thank you. Thank you, Mr. Cannon. The power pool representative talked about amending this to nonprivate entities being able to purchase. Do you think the counties would be interested in being one of those entities?

JON CANNON: I would, I would have to get that some real serious thought before I'd answer that question, Senator. I, I apologize.

CLEMENTS: OK, You don't have a position?

JON CANNON: No, sir.

CLEMENTS: Thank you.

JON CANNON: Yes, sir.

STINNER: Additional questions? Seeing none, thank you.

JON CANNON: Thank you.

STINNER: Anyone else in the neutral position? Seeing none, would you like to close, Senator?

BOSTAR: Thank you, Chairman Stinner and members of the Appropriations Committee. I appreciate your time and attention to this issue, as well as your very thoughtful questions. And with that, I'm happy to answer any final questions.

STINNER: Any questions? Senator Hilkemann.

HILKEMANN: I'd just make a comment. If indeed you're, you're correct and this is truly where the market is going, we shouldn't have to worry about it. Private industry will take care of taking care of these charging stations. If you're one that believes like I am that this is the government trying to direct the market where it's going, then we're going to have to continue to have more-- if it weren't for the subsidies right now for what we're giving for electric vehicles,

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we wouldn't be where we are with this situation at this point. That's, that's a comment.

BOSTAR: Well, I'd like to respond to that comment. So I think I would-- I mean, I suppose we could look, but if, if you at some point voted to provide state money to expand broadband access into rural Nebraska, I would say you're doing the thing that you're referencing now. It doesn't-- it's not profitable for a company to build fiber-optic cables out into rural Nebraska. It's not going to make any money. Without incentives, without subsidies, without support, they won't do it, but we've decided that it makes sense to give that support. This is the same thing. Thank you very much, though.

STINNER: Senator Kolterman.

KOLTERMAN: Thank you, Senator Bostar, for bringing this legislation. Can you tell-- do you-- are you familiar with how many small municipalities-- or how many municipalities have put these charging stations in across the state?

BOSTAR: I, I don't know, but I would be happy to look into that and get you that answer.

KOLTERMAN: I, I know we've done it in our community as a municipality. I was just curious how many--

BOSTAR: I know many have.

KOLTERMAN: --others have.

BOSTAR: Yeah.

KOLTERMAN: If you could find that out, I'd appreciate it.

BOSTAR: Absolutely.

KOLTERMAN: Thank you.

STINNER: Additional questions? Seeing none, thank you very much.

BOSTAR: Thank you.

STINNER: That concludes our hearing on-- excuse me, we have six letters of support, one in opposition, two neutral on LB1257. That concludes our hearing on LB1257. We will now open on LB1194. I hope this is an electrifying experience.

McDONNELL: That you'll be happy that I let him jump ahead. Thank you, Senator Stinner and members of Appropriations Committee. My name is Mike McDonnell, M-i-k-e M-c-D-o-n-n-e-l-l. LB1194 appropriates \$55 million in federal funds to the Public Service Commission to provide \$50 million in aid, divided equally to each of Nebraska's 67 public safety answering points. Another provision in this legislation would provide the PSC \$2 million to deploy a market-ready, Next Generation 911 software technology that will provide at a minimum, the following capabilities: allow PS-- PSAPs to initiate video and text communication with citizens who call 911, enhance caller location, facilitate two-way file sharing between PSAP and 911 caller, provide real-time language translation in at least three different languages. A third provision would provide \$3 million to the University of Nebraska to work with the private sector to develop an artificial intelligence solution that can be used in PSAP to improve their capability to handle 911 calls that move quickly addressing emergencies. In 2019, I introduced LR165, which looked at response times for EMS and fire around the state. One of the things I found was that our ability to collect data is lacking and our public safety answering points are under a lot of stress. Fast forward to this last December, when this committee started receiving emails from the public safety answering points from around the state asking for help. I wanted to make sure that these workers who are on the frontline of our public safety had the ability to be heard and get a hearing. Our 911 system is the citizens' link to the emergency response service that they have paid for and rely upon. For too long, 911 has been underfunded and undersupported by the state government and we need to recognize that 911 call centers need our support. The existing 911 technology is based on a telephone system built in the 1970s. It is imperative that we provide the resources necessary for all of our 911 call centers to adopt Next Generation 911 technologies. LB1194 is an important step to bring Next Generation 911 to all of Nebraska. Since 2019, I've been looking at opportunities to use improved technology to improve data collection response times and affordable ways to use advanced Next Generation 911 technologies at a lower cost. I've also looked at the opportunities for Nebraska to be a leader in 911 technologies worldwide and how that can work well with the growth and expertise of the University of Nebraska. In addition to the funding needed to support the PSAPs, the bill will help Nebraska's 911 system catch up with the 21st century technology. If this legislation is passed and implemented correctly, we will greatly enhance our ability to save lives, protect property, and improve the safety of our communities. I am deeply and personally committed to making sure that

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all aspects of our emergency response in Nebraska have the tools they need to address emergencies of all kinds. I've always been a strong advocate of supporting our first responders. Funding our police, fire, and emergency medical service personnel needs to continue, but equally important is to ensure that our 911 system call-takers are adequately supported and have access to the latest and greatest communication technologies that citizens use in their daily lives. The people behind me that are going to testify are going to share stories with you that's going to bother you. It's going to bother you based on I believe we've come to believe that if we have a medical emergency, any kind of emergency for ourselves, for our family members, our friends, neighbors, we call 911, there's going to be someone there. And the idea of that technology and possibly delaying that, which we know at this moment, seconds count, that's what these people are here to share with you today that's saying, hey, we need to do something now with our, our PSAPs.

HILKEMANN: Are there any questions?

DORN: Yeah.

HILKEMANN: You caught me napping there. Senator Dorn.

DORN: Thank you, Senator Hilkemann. Thank you, Senator McDonnell, for bringing this bill. I guess I got a question is over the last several years, I've read different articles whereby some of these 911 centers now have the ability to do, I call it the text message and that type of things. Is that part of what this is looking at or is this--

McDONNELL: Yes, if you look at the--

DORN: A lot of squads that don't-- I mean, a lot of departments that don't even have that ability.

McDONNELL: Yeah, we want to try to make sure we take our 67 public safety answering points and we want to make sure we at least allow them to initiate the video communication with citizens who call 911, the enhanced caller location, facilitate that two-way file sharing, and also provide real-time language translation. Those are kind of four that we put in the bill that we need immediately.

DORN: It's to bring them all up to basically.

McDONNELL: All 67 equally and then include the university with their help too with the technology.

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DORN: Thank you.

HILKEMANN: Are there additional questions for Senator McDonnell?

McDONNELL: Thank you.

HILKEMANN: Thank you. Are there other proponents for LB1194?

DIANA HURLBURT: Sorry. Good afternoon. Thank you, Senator Stinner-- Chairman and the Appropriations Committee, for this opportunity to support LB1194. I would also like to thank Senator McDonnell for the support of this bill and the need that he sees for all 911 communication centers across the state of Nebraska. My name is Diana, D-i-a-n-a, Hurlburt, H-u-r-l-b-u-r-t, from Burwell, Nebraska. I serve as a Garfield County commissioner and was just elected to the Executive Board of NACO as secretary-treasurer and I started my term in January of 2022. And yes, Jon, you're still on the payroll. I serve on the Region 26 Communications Center Board and Region 26 has an eight-county area to serve. And if you would go to the last page, you will see the pictures of the eight counties, which are Garfield, Loup, Thomas, Blaine, Sherman, Wheeler, Greeley, and Valley Counties. Region 26 covers 4,859 square miles, 3,109,760 acres, with a population of 14,190 and eight trained staff members, with a new dispatcher just starting her training a week ago. Now I'm going to try to give you a vision of the Sandhills. The terrain, such as deep canyons, cedar-infested areas, are not marked with road signs. Rural county roads are defined as forested and rangeland settings that do serve residential, recreational, and resource management uses as low-maintenance roads. They may have been constructed to relatively low standards with a limited budget. Rural roads may be owned and/or managed by government or private landowners. These low-maintenance rural roads do have road markers to go into cow paths or driveways, but are not given street addresses. They are identified by landmarks. In rural areas, local roads serve primarily to provide access to adjacent land and driveways. Now, according to the Federal Highway Administration statistics, 2.9 million miles, or 71 percent of the 4.1 million miles a public access roads in the United States, are rural roads, a definite description of the Nebraska Sandhills. Even though there is less traffic in rural areas, those roads remain as dangerous as crowded highways. There are some potential hazards in rural areas that you should be aware of: unmarked field and farm and ranch driveways and entrances, livestock crossing areas for farm vehicles, local ATV vehicles, and rough-road conditions. In these areas, hunters and tourists love to explore. Difficult for our fire departments,

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emergency vehicles, and sheriff's department to get to when a 911 dispatcher gets that call for services needed in rural Nebraska. Region 26 counties are the rural Sandhills of Nebraska. With LB1194 appropriating \$50 million and distributing these funds of \$750,000 equally to 68 91-- PSAP, public safety answering points centers, will tremendously help 911 communication centers effectively make an impact where emergency services such as police, fire, and emergency medical technicians are dispatched to the requested service point. In Nebraska, there are 68 911 PSAP-serving boards and diverse spans of terrain and constituents that want a uniform system of call-receiving, processing, and getting the information of every citizen of Nebraska when services are needed. This process requires upgrades to current technology and acquisitions of new equipment, plus the hiring and standardized training of personnel to operate the system. Safety needs are for all citizens across the state and we need help in rural Nebraska. LB1194 would help strengthen and support vital public services for this one-time funding and the supporters here today of LB1194 who are testifying are thinking big. We, as local governing boards, know the vital needs of our rural and urban communities and these funds would impact the entire state and give all PSAP centers an opportunity to improve and inter--

HILKEMANN: Ms. Hurlburt, your, your red light is--

DIANA HURLBURT: Oh.

HILKEMANN: Is there any objection from anybody in the committee? Our Chairman has been very kind to folks from western Nebraska. So if there's no objection, let you finish your testimony.

DIANA HURLBURT: Oh, OK. I'm sorry, I wasn't even paying attention-- would improve an integrated link in the emergency communications in the state. Now, I am humbly requesting that now is the time to make sure that ARPA funds are going to proven needs and make sure the committee is truly meeting all needs of Nebraska citizens and LB1194 does just that. None of us know where we will be when we will need to make that desperate call for help in a county 911 communications center. We are thinking big and this one-time funding that we need now to upgrade the 68 PSAP centers to the best equipment we can get to serve our citizens of Nebraska is definitely-- is desperately needed. I thank you for your time and appreciate this consideration for the appropriations of funding for LB1194. Thank you.

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HILKEMANN: Are there questions? Seeing none, thank you for your testimony.

DIANA HURLBURT: Thank you.

HILKEMANN: Additional proponents?

ALMA BELAND: Good afternoon. My name is Alma, A-l-m-a, Beland, B-e-l-a-n-d. I am the director of Region 26 Communications Center located in Taylor. We do serve an eight-county region in central Nebraska. I am here today in support of LB1194 for the \$50 million from Nebraska ARPA Funds for PSAPs, public safety answering points, also referred to as 911 centers. I have attached in my handout a map that has all the PSAPs in Nebraska pinpointed. An additional map is attached with an overlay of the legislative districts showing where the PSAPs are located with each-- within each one of the districts. Our Region 26 PSAP is considered a rural PSAP, with three complete workstations for our dispatchers who are able to take 911 calls, then disseminate the call and send out the assistance that the caller is in need of, whether it is sheriff, police, ambulance, or fire. Our dispatchers are trained to know what department and where to send the help requested when we-- and we do get some assistance from the 911 equipment that we have. The dispatchers have to know how to get mutual aid for the departments and get them directed to the right location. Currently, we are short staffed due to employment shortages and not being able to compete with businesses to find and retain dispatchers for a stressful job that includes working nights and weekends. This shortage is putting us into a crisis mode when at times we only have one on duty who may be handling radio traffic with numerous departments at a time. Even though we have a smaller population than some PSAPs in Nebraska, we still require the same call-handling equipment, as well as radio and paging console equipment to communicate with our responding agencies and we also require the same quality dispatcher service. We serve 12 law enforcement agencies, 16 ambulance squads, and 21 fire departments. When these agencies are called out, we must be able to communicate with our first responders en route to the incident and while they're at the scene. Where you see a large distance between the dispatch centers in the rural areas, we still have to be able to communicate with somebody on the ground. We have additional communication towers and equipment to make that happen, while a more populated area would have more internal equipment within the dispatch center, including dispatchers. We currently have 22 sites that we either have a tower or maintain equipment on those towers. When PSAPs are listed as to what their call volume is, the

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actual amount of 911 calls is small compared to the overall amount of communications that happens following a 911 call. There are a lot of incidents that come through as radio transmissions from law enforcement that doesn't trigger an actual 911 call. There may be calls made to local sheriff or police departments that are call-forwarded to our dispatch center that does not trigger an actual 911 call or one 911 call itself may require hours of radio communications after receiving that call and then paging out the needed departments and maintaining contact until the incident is finished. Our funding for Region 26 comes from landline 911 surcharges at \$1 per line, which funding is declining due to increased cell phone usage. We do receive a wireless fund from the Public Service Commission that comes from cell phone surcharge, which is paid out to the PSAPs based on a funding model, which accounts for about 10 percent of our budget. The bulk of our revenue is from assessments to our member counties that come from tax dollars. The high cost of keeping equipment updated falls on these counties, which are still dealing with the aftermath of the 2019 flooding and the effects of the 2020 COVID, which has put a tremendous strain on their budgets. This one-time chance of receiving funding for our PSAPs that is equally shared across the state would help us replace aging equipment with upgrades and in turn, allow us to serve our Nebraska residents the best we can with the fastest service when they have an emergency, whether it's in Omaha or in the Sandhills of Nebraska. No matter what county a person resides in or passes through, if calling due to an injury, a fire, theft, or a loved one even trying to-- calling that a loved one is trying to commit suicide, this person expects the same level of service when calling 911. The funding request in LB1194 would give us that boost we so urgently need. Thank you so much.

STINNER: Thank you. Questions? Senator Dorn.

DORN: Thank you, Chairman Stinner. Thank you for being here. You, you mentioned you're director of the that area, but you didn't-- could you tell us or give us an idea how many 911 calls you maybe have in a year or do you have any idea or--

ALMA BELAND: We average about 300 calls a month, but when I'm saying we're short on dispatchers, having only one on duty, that keeps one dispatcher very busy and it's not serving our residents well when we can't answer those in, in a fast amount of time.

STINNER: Very good. Questions? Seeing none, thank you.

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ALMA BELAND: Thank you.

JACK VANSLYKE: Good day. Put these on. The older I get, the worse it gets, guys. Jack Vanslyke, supervisor-- J-a-c-k V-a-n-s-l-y-k-e, supervisor from Valley County and serve on the Region 26 board. I've been involved with these-- with this position for 15 years. I've seen many changes over the years with them being technology related mostly. As we all know, technology changes every day. It costs a lot to keep up with all the equipment updates. Most of the equipment that is needed is mandated by the state, but the cost is not covered by the state so then our taxpayers need to cover the costs. It seems that every five years or so, we have to come up with our new equipment of a cost of \$50,000 or more, it seems like all the time. As was stated with previous testimonies, Region 26 is partially funded by surcharges, which are landlines and cell phones, which is only 10 percent of our cost. The remaining costs have to come from the eight counties. Our smallest county has 435 for population. The largest county, which is Valley County, has around 4,600 population. When I got to the Region 26 board in 2007, Valley County's costs were at \$55,000. Today, it is \$152,000 per year. This is quite an increase and the taxpayers of these eight counties and-- of Valley County and these other eight counties, which increased the same, are responsible for covering these costs. These are the same people that volunteered to be EMTs, firemen, law enforcement that handle the 911 and emergency calls. As supervisors and commissioners, we all try to keep our taxes as low as possible. But every time our costs go up, it has to come out of taxes. Our problem is that at times, our population doubles and even triples by people coming from the cities to camp, boat, fish, hunt, drive our forests, or just see our beautiful country. When the population doubles, it seems our 911 calls also double. Therefore, we need more dispatchers, EMTs, and etcetera. The other problem is that none of these tourists pay landline or cell service fees in our area so we don't get that funding. The tourists, they still expect the service of Region 26 to handle their problems, as well they should. To get funding from the \$50 million, it would greatly help Region 26 purchase new and needed and mandated equipment and help better wages to keep our dispatchers and the office personnel so we will stay with Region 26. It also aid our taxpayers in our area. I'll make this short because the other lady just kept talking. Thank you. Any questions?

STINNER: Any questions? Seeing none, thank you.

ERDMAN: Senator Stinner.

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STINNER: Oh, excuse me, I'm sorry. Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Thank you for coming. So which county has formed 435 people?

JACK VANSLYKE: It would be Blaine.

ERDMAN: Blaine County? I thought that.

JACK VANSLYKE: And Taylor has only got 600.

ERDMAN: OK.

JACK VANSLYKE: And so Valley, where I'm from, we have 4,600.

ERDMAN: So you still have the township former government?

JACK VANSLYKE: Yes.

ERDMAN: Seven supervisors?

JACK VANSLYKE: Seven supervisors, yes.

ERDMAN: OK, thank you.

STINNER: Additional--

JACK VANSLYKE: Sometimes there's a lot of arguing going on.

ERDMAN: Thank you.

STINNER: Thank you.

JERRY STILMOCK: Thank you.

ERDMAN: I understand.

JERRY STILMOCK: Members of committee--

STINNER: Afternoon.

JERRY STILMOCK: --Mr. Chair, Jerry Stilmock, J-e-r-r-y S-t-i-l-m-o-c-k, testifying on behalf of my client, the Nebraska State Volunteer Firefighters, in support of LB1194. The volunteer, volunteer first responders have been a part of everything that you have requested the Public Service Commission do. Pre cellular telephones, we were involved there. Cell phones coming in, cell phones with

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texting, cell phones with video now. Industry is there. Industry is ready to accept the new challenge. Public Service Commission needs the help and we, we fully support the request through Senator McDonnell for bringing the legislation. Senators, thank you very much.

STINNER: Thank you. Questions? Seeing none, thank you very much.

JERRY STILMOCK: Thank you, gentlemen.

STINNER: Afternoon.

JAY MEYER: Good afternoon. How are you guys doing?

STINNER: OK so far.

JAY MEYER: It's almost evening, so I better speed this up.

STINNER: Well, 5 o'clock is usually our cutoff.

JAY MEYER: Oh, OK.

STINNER: We got to do a speed round after.

JAY MEYER: OK, gotcha. I'll make her quick. My name is Jay, J-a-y, Meyer, M-e-y-e-r. I appreciate this opportunity to come before you and voice support for LB1194. I'm the Scotia Volunteer Fire Chief and currently hold the chairperson of the Region 26 council. I've worked with emergency managers and dispatchers for the last 24 years as fire chief. The year 2021 marked the 50th anniversary of the inception of Region 26 Communication Center in Taylor. Wow. How have times changed since the first call received some 50-plus years ago. That was even before I was born so it's been a long time. Back then, high tech was a one-line rotary telephone, low band radios to communicate with law enforcement/fire rescue, and a push button dispatch console to get the proper requested services out to those first responders. Today, what is up-to-date high tech? Just about the time we all think we are up to date with the latest in the greatest concerning 911 equipment, we soon find that there's something better with GPS trackers for locating 911 callers, text to 911, or bringing calls for service and vital information to law enforcement via in-vehicle computers. Boards that oversee finances for 911 centers deal with new mandates for equipment, additional training requirements for dispatchers, employees short-- excuse me, employee shortages as daily challenges with already bolstering tight budgets. Yes, all are needed to keep skills sharp and provide the, provide the same service seamlessly across the great

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state of Nebraska, but it comes with increasing cost. The common goal for 911 centers is to provide exceptional service with compassion and dedication to their fellow man and woman when emergency services are needed. These dedicated heroes don't receive pats on their back or "yatta boys" for a job well done. They are there to summon help when no help is available to those who in need, a lifeline to living you might say. Most 911 centers operate the same, but depending on the location, there are differences. Larger 911 centers operate with multiple personnel on duty during a shift and most shifts are 12 hours amongst most 911 centers, being able to take many calls at a time and get the help where needed. These centers may have call takers that their primary job is to take the initial call from, from the person that actually called 911 in need of services and pass that information on to a dispatcher that pages out the proper personnel to an incident. Others in the call center take care of law enforcement requests for warrants, vehicle information, status checks, just to name a few. Some of the rural 911 centers, as, as Region 26 is, may only have one dispatcher on duty at one time during times of local celebrations, severe weather. Rangeland fires are a big concern in the Sandhills where we're located. There may be a need to fill all available three stations at the center to accommodate all the duties to the-- dispatch all the events to the first responders. A slow shift can go from zero to 60 in a matter of seconds. There are times that the, that the duty dispatcher may get so busy they may not have enough time to call for help. And in that case, they're pretty much on their own until they can get a little bit of lull in the action to do that. If you're on call and-- excuse me, if you're on, on duty at that time, but you're on call as the dispatcher, dispatcher, you may get that call that says a one-word response: help. That, that on-call dispatcher knows that it's bad and they need to be on the way to give that dispatcher help. It's always mentioned that if you need to use the restroom between calls, you do it now because other way-- otherwise, you may have wished that you would have when things get really hectic. Challenges are all part of life and being an emergency dispatcher is no different. Low wages, long shifts, stressful working conditions, being, being human and dealing with life-and-death situations can cause personnel to second-guess their decision to be a dispatcher. We all can help change this by supporting LB1194. It would provide opportunity to enhance our 911 equipment to better serve the users, support our emergency dispatchers with higher wages and benefits, and continue to provide exceptional service to the public. Also, by giving the sense of security those that use the 911 centers, there will be a voice at the end of the line that will help, regardless if it's law

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enforcement, fire rescue, or whatever it may be. Please help us help you. Remember we're only a phone call away. Please support LB1194. Thank you.

STINNER: Thank you. Questions? Senator Clements.

CLEMENTS: Thank you. Thank you, Mr. Meyer. Have they told you what the equipment would cost you to upgrade?

JAY MEYER: Just, just, for instance, among our three stations that we dispatch that are all computerized, you're looking at a half a million dollars to upgrade those. And with the Next Generation 911, we're still operating on copper lines so we're still operating on technology from the 1970s. When next generation comes into play, which is already starting to happen here in Nebraska, it will all be done through fiber and internet based and so we will have to upgrade those consoles and it will be at least a half a million dollars to do that. We run off of a \$1 million budget currently. We just can't support to do that. And, and Taylor, Nebraska, is a community of 200 people. Most people, even in the area, don't know where their 911 calls go. They just know that they get help where they need it. And so among the eight counties, it's going to be really hard for us to be able to do that without taking loans out, which we already have. We currently have a loan for some equipment we bought about five years ago because we had to upgrade it. But now this is the Next Generation equipment that's going to be mandatory. So we can do the text to 911. We can do the video calls. We can just provide a better, better service overall.

CLEMENTS: Thank you.

JAY MEYER: Thank you.

STINNER: Additional questions? Seeing none, thank you.

JAY MEYER: Thank you.

BEN HUGHES: Good afternoon.

STINNER: Afternoon.

BEN HUGHES: I'd like to thank the committee for the opportunity to support LB1194 today. I'd also like to thank Senator McDonnell for his support of the needs of public safety by sponsoring LB1194. My name is Ben, B-e-n, Hughes, H-u-g-h-e-s. I am the chief of police of the Burwell Police Department in Burwell, Nebraska. I've been the police

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chief since 2007, serving in law enforcement since 2005. I was born and raised in Lincoln, but Burwell is my home. The Burwell Police Department is a two-person agency serving a town of approximately 1,200 people and a few old crabs. Since December 30, 2020, my agency has been a one-person agency due to staffing issues. Garfield County has a population of approximately 1,800 people. The Garfield County Sheriff's Office is also a two-person agency. Sometimes I feel like we truly live on the frontier. Our emergency services are dispatched to the Region 26 in Taylor, Nebraska. You've heard about the eight counties that it serves. Burwell is one of two municipal police agencies that Region 26 serves. For the last five years, my agency has serviced-- or excuse me, averaged 350 to 500 calls for service per year. We handle every type of call, from barking dogs to all major felonies, all manner of traffic enforcement, nuisance basement-- abatement, suicidal individuals, and assisting individuals in surrounding agencies to include the Burwell Volunteer Fire Department, Nebraska State Patrol, and Nebraska Game Parks officials. Garfield County, along with Loup County to the west, is home to the Calamus Reservoir. We see approximately 300,000-plus visitors per year from all 93 Nebraska counties and nearly every state in the Union. They come to enjoy fishing, hunting, camping, and other activities. There is a strain on emergency services and commit-- conventional communications equipment, especially on a long holiday weekends. Burwell also hosts Nebraska's big rodeo every year of the last full weekend of July. This event attracts approximately 20,000 rodeo fans over the course of four days and many thousands more to party. I have experienced in recent years that your cell phone simply does not work during the height-- due to the volume of users on the towers being overloaded. A call to 911 on a cell phone simply does not go through. In the last two to three years, I've noticed a large uptick of travelers on local highways going between Minneapolis, St. Paul, Minnesota, and Denver, Colorado. Large numbers of these people stopped for lodging, food, fuel. Semi-truck traffic is also-- is increasing also. Not all, but some of these people who visit or pass through our town and county need some type of assistance, whether it's because of vehicle break down, they ran out of gas, they're lost, they need some kind of emergency service, 911 is-- gets called when these people in their time of need. Modern and reliable emergency dispatch equipment is vital in all areas of the state, including rural areas. Sometimes it isn't as easy as raising taxes for rural county boards or city councils to pay for equipment that's mandated by the state. Sending ARPA funds in equal amounts to all areas of the state of Nebraska is a great way to have this necessary and possibly lifesaving equipment

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available should the need arise. I strongly urge the committee to support LB1194. Thank you.

STINNER: Thank you. Questions? Seeing none, thank you.

BEN HUGHES: Thank you.

STINNER: Afternoon.

JOSEPH SMITH: Good afternoon, sir, how are you?

STINNER: Good.

JOSEPH SMITH: Thank you. Good afternoon. My name is Joseph Smith, J-o-s-e-p-h S-m-i-t-h, Thedford, Nebraska. I serve as a sheriff of Thomas County, county emergency manager, a member of the Thedford Fire and Rescue Squad, and I sit on the Region 26 Advisory Board. I'm a combat veteran, having served as an army bomb squad technician in Afghanistan. I'm a husband and a father. I say all this to underscore my personal commitment to the service of others. By supporting LB1194, you can support the lifesaving efforts of our dispatchers and first responders statewide. I'm blessed to serve as a law enforcement officer in the Sandhills. Clearly, the Sandhills are special and have become a needed escape for many people, some hailing from the more populous metro areas of the state. The lakes, grasslands, and national forest attract countless families year round. These families expect to receive professional emergency services provided by dispatchers, firefighters, EMTs, and law enforcement officers. These are services that we often take for granted until a personal emergency arises. Region 26 is a 911 call center responsible for the rural eight-county area that we've discussed in previous testimony. It's nearly 5,000 square miles. Our population increases dramatically during the outdoor recreation months. In fact, Region 26 has documented a 60 percent increase in emergency calls during the peak tourism months over the past decade, emergencies that include car accidents, personal medical events, off-road injuries, boating or lake-related incidents, search and rescue operations, and various law enforcement-related situations. Region 26 has suffered from the transition to cell phones over landlines. Historically, surcharges from landlines have provided stable funding, but less landlines have forced Region 26 to significantly increase assessment rates. This increase is passed along to county boards, as you heard from a county commissioner, that in turn have to reduce funding in other program areas to meet the need. Additionally, unfunded federal and state mandates have pushed budgets

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to a breaking point. Our taxpayers are carrying a burden that is becoming more cumbersome annually. Sandhillers often do a lot with a little, but we desperately need your help and the resources that LB1194 would provide. Your support of this bill would provide funding to recruit professional dispatchers, pursue mandated equipment updates, and facilitate new training and accreditation requirements. This is not a rainy day fund. This is truly necessary to continue providing lifesaving services to our residents and visitors. When an infant can't breathe, a fire has been spotted, or someone's been assaulted, it's the dispatcher that stands ready to deploy the appropriate resources and comfort the victim until help arrives. By supporting LB1194, this committee can immediately and dramatically bolster the state's-- the entire state's ability to respond to all emergency situations. You'd be supporting those humble dispatchers that continue to wait for us to call upon them day and night. Thank you for your time and thank each of you for your service to our great state.

STINNER: Thank you. Senator Dorn.

DORN: Thank you, thank you, Chairman Stinner. Thank you for being here and thank you for doing all you do.

JOSEPH SMITH: Thank you, sir.

DORN: You mentioned-- some others have mentioned too that the-- going from the landlines to the cell phones, that's been a decrease in revenue. Any idea about how much or any idea of what that amount could be?

JOSEPH SMITH: I would have to defer to, to Ms. Beland. I don't-- I'm not very good with figures, Senator--

DORN: OK.

JOSEPH SMITH: --to be honest with you.

DORN: Thank you.

STINNER: Additional questions? Seeing none, thank you.

JOSEPH SMITH: Thank you all.

TIM SCHRAM: Good afternoon, Chairman Stinner and members of the Appropriations Committee, I'm Tim Schram, T-i-m S-c-h-r-a-m,

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representing the third district for the Nebraska Public Service Commission and I am here today on behalf of the commission to support LD1194. Pursuant to the 911 Service System Act, adopted in 2016 with LB938 and as revised in 2018 by LB993, the Public Service Commission is a statewide coordinating authority for the 911 service system in Nebraska. The act provides that the commission has responsibility for planning, implementation, and deployment of Nebraska's statewide 911 system to ensure that coordinated 911 services provided to all state residents at a consistent level of service in a cost-effective manner. This effort is vigorous and ongoing, with the first of Nebraska's seven 911 regions now connected to the new statewide emergency services IP network, or ESINet, and Next Generation 911 core services, the remaining regions, including all Nebraska public safety answering points, also known as PSAPs, are anticipated to be connected to the ESINet and Next Generation 911 core services by the end of the year. Nebraska has 68 PSAPs serving our citizens, from Falls City to Gering and South Sioux City to Benkelman. Our Nebraska PSAPs are as varied as our state, each operated under local, local control by local governing bodies, which may be a county, city, or a combination of jurisdictions working together under, under an interlocal agreement. Some PSAPs take hundreds of calls per day, while others may take fewer than 100 calls per month. But we know every Nebraskan deserves a consistent level of service across the state, from our population centers to our rural areas, because emergencies can happen anywhere at any time. And if it is you or your family, that 911 call may be the most important call you ever make. Nebraska's PSAPs need to be at their best for every call, no matter circumstances and no matter the location. That is why the Nebraska Public Service Commission supports LB1194, which would provide \$50 million in aid pro-rata to each of Nebraska's PSAPs. This funding would be incredibly valuable every PSAP and they would put the money to good use, enhancing emergency communications in our state. Two points of clarification: first, the bill states that there are 67 Nebraska PSAPs. However, there are presently 68 PSAPs in our state. Second, the bill refers to a pro-rata allocation of funds. However, it does not say if this means pro-rata by population, by 911 call volume, or by some other method. The commission will need further guidance on how these funds are to be divided. The bill would also provide \$2 million to purchase cloud-cloud based software for PSAPs. We would recommend that any such software purchase be the result of a formal RFP. In addition, the bill includes \$3 million for a public-private partnership with the University of Nebraska to develop cloud-based artificial intelligence software to process 911 calls. Of course, it will be critically important for this software to be interoperable

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with Next Generation 911 and also meet cybersecurity requirements. Funding for PSAPs to enhance emergency communications throughout our state would be a great use of federal ARPA funds, but we all know that federal money brings with it the responsibility to account for how the money has been used. As a recipient, recipient of these federal funds under LB1194, this reporting responsibility will belong to the commission. We're glad to fulfill that role. However, it is important to note that we will need the cooperation of all the PSAPs and their governing bodies to make this happen. It also means that administrative costs must be taken into account when the funds are allocated. We thank Senator McDonnell for introducing LB1194. We also thank the committee for its time and attention this afternoon. I would be happy to try to answer any questions you may have.

STINNER: Any questions? Senator Dorn.

DORN: Thank you, Chairman Stinner. I'll try answering-- asking the question from you then. Any idea on the level of funding, how it's been decreased over time by the increased use of cell phones or--

TIM SCHRAM: I can't give you an exact number, but it, it, it has dramatically declined. The latest numbers, the, the-- I think we're reaching-- it's decrease-- it's decreasing at a decreasing rate. I don't think it's as fast as it's been, but there has been a dramatic drop in the funding from the landline.

DORN: Thank you.

STINNER: Senator Clements.

CLEMENTS: Thank you, Mr. Chairman, and thank you, Mr. Schram. The-- are there some PSAPs that already have the upgraded equipment? Do you know?

TIM SCHRAM: They haven't been-- yeah, some of the PSAPs do have Next Generation capability-- compatibility. There was a press conference last week in Kearney that the-- ESINet. As far as that, that south-central region, I think there's two, two of the PSAPs in that region that are yet to be connected, but many of the PSAPs do have Next Generation-capable equipment.

CLEMENTS: So would-- wouldn't-- the pro-rata distribution, if they already have the equipment, they really wouldn't need it, would, would they?

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TIM SCHRAM: Well, in my prior life, I was a county commissioner at Sarpy County and I can tell you that, that emergency radio equipment is very expensive equipment. And what I've experienced with it is, is that a lot of times the manufacturers, even though the equipment still may be good and functional, the manufacturers of that equipment will say we're no longer going to support that equipment. So when it comes to emergency communications equipment, the, the, the backbone equipment in the dispatch center, the radios in the emergency units, and the mobile radios that they carry are continually evolving. And if the manufacturer determines they're going to not service it any longer, that, that PSAP has no other choice but to replace it.

CLEMENTS: Did you say that all of them must be connected by the end of this year?

TIM SCHRAM: No, not must be. That's, that just-- we-- the commission did an RFP with Lumen Technologies for the, for the statewide ESINet and it's, it's our hope that we're going to have all the regions connected by the end of this year.

CLEMENTS: All right.

STINNER: Any additional questions? Seeing none, thank you.

TIM SCHRAM: Thank you.

STINNER: Good afternoon.

JON CANNON: Chairman Stinner, members of the Appropriations Committee, good afternoon. My name is Jon Cannon, J-o-n C-a-n-n-o-n. I'm the executive director of the Nebraska Association of County Officials, also known as NACO, here to testify in strong support of LB1194. First, thank you, Senator McDonnell, for having brought this bill. This is something that I think you've heard from the testimony is vitally important across our great state. All the folks from Region 26 that came up here to testify, that-- you know, I'm not sure-- just to put things into perspective, it's an area the size of Connecticut, right, with eight trained staff members and not nearly as many resources as the state of Connecticut has to provide emergency service to their people. And oh, by the way, those folks who came here, they're not driving quite to Gering or Bayard, but they do-- they're going to have a late supper tonight, in all likelihood, so I certainly appreciate them coming up here. The American Rescue Plan Act, as most of you know, that was a \$1.9 trillion bill passed by the U.S. Congress

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last year, signed by the President spring of last year. And the advice that we've been giving to all of our counties has been, you know, this is a huge bill and it's going to take a long time to pay off and so if you're going to spend it on something, spend these dollars wisely on something that, that your kids and your grandkids-- because they're the ones are going to pay that bill back-- can point to and say, this is what we're getting for, for all that-- all those dollars. And certainly public safety is, is, you know, top of mind as far as priorities are concerned for counties and we hope the state. This is a great example of a statewide issue. The pandemic allowed people to work remotely. Whether they went to Lake McConaughy or they went to Calamus Reservoir, they were able to-- they had to get out of the office and so what, what better place to go than to the lake house? Well, with that is a commensurate increase in the sorts of emergency services that are required for those areas. And these are folks that are coming from, you know, not necessarily the area. They're coming from Omaha. They're coming from Lincoln. They're coming from all corners of our state. They're coming from places out of the state as well. And so, you know, we always conceive of these sorts of things that are supported by the property taxes being devoted to purely local issues, but as you can tell, you know, we're, we're not dealing with just serving the locality. We're dealing with a lot of people that are coming from a lot of different places. PSAPs are not designed to serve purely the local effort. It's just those things that occur in the local area. So we think this is terrific legislation. We think this is a very wise use of, of our ARPA dollars. It's a great investment for our future and we certainly urge your support of LB1194 in whatever shape that may take and I'd be happy to take any questions you might have.

STINNER: Any questions? Seeing none, thank you.

JON CANNON: Yep, thank you very much.

STINNER: Any additional proponents? Any opponents? Anyone in the neutral capacity? Seeing none, would you like a close, Senator?

McDONNELL: Thank you. Just quickly, I'll work with Commissioner Schram to make sure that we take care of those points that he pointed out and, and try to improve the bill. I'll answer any of your questions at this time.

STINNER: Senator Clements.

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CLEMENTS: Thank you. Is this 100 percent of the funding or is there cost share expected by--

McDONNELL: I think as you heard the testimony, this isn't going to cover the cost. We're trying to do is divide it equally and in the bill, if you look at the fiscal note, it says 67. It should be 68, as was pointed out by Commissioner Schram and other people testifying. But no, this is not covering the cost.

CLEMENTS: It's not?

McDONNELL: No, it's going to help. It's going to be-- put them on the right direction to try to improve on what they, that 1970s technology, but we can't guarantee to cover all of the, the cost.

CLEMENTS: Thank you.

STINNER: Any additional questions? Seeing none, thank you. We have five-- six letters of support, none in opposition, and no neutral. That concludes our hearing on LB1194. We will now open on LB1199. OK, Senator, go ahead.

McDONNELL: Thank you, Senator Stinner and members of the Appropriations Committee. My name is Mike McDonnell, M-i-k-e M-c-D-o-n-n-e-l-l. I represent Legislative District 5, south Omaha. I come before you today regarding LB1199, which would appropriate \$25 million of ARPA funding to provide radios, programming of radios, and training to use the radios to volunteer fire and rescue departments throughout the state of Nebraska. When disasters hit, radio communication is critical in saving lives and protecting property. Reliable communication is critical during any emergency response, but particularly during blizzards, flooding, wildland fires, and a host of other instances. The bill provides a priority to be given to volunteer departments along the interstate system, primarily because of the volume of vehicle traffic accidents, tragedies which have occurred in the past. The funding for the radios and equipment would be directed to the Department of Administrative Services through the Office of the Chief Information Officer. Radios would be provided for motor vehicles and individual first responders based upon the demonstration of needs and the size of the-- each volunteer fire and rescue department. In addition, the legislation states that the Office of the Chief Information Officer would not charge any subscription, programming, or training fees to a volunteer department which connects to the Statewide Radio System upon receiving a grant from this program. It is

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my intent that if there are additional funds remaining after prior-- priority is given to the volunteer departments along the interstate system, other departments would be able to apply for the grant. In the U.S. Department of Treasury Final Rule implementing the Coronavirus State Fiscal Recovery Fund established under ARPA, published during January of this year, the Treasury has addressed the specific issue of eligibility and using ARPA funds for the purchase of radio systems. This information is found on page 61 of the Final Rule. There are testifiers here today who will provide additional insight and personal experience for the committee's consideration as it relates to the needs of the-- for this legislation. Steve Rasgors [SIC], a retired radio technician formerly with the Nebraska State Patrol, will testify to his experiences with radio communications among volunteer departments in Nebraska. Also here to testify is Lauren Bestwick from Valparaiso to share her experiences of what happened to her as a volunteer first responder during the blizzard of 2019 while she was a member of the Waco Volunteer Fire and Rescue Department. We talked earlier about the public safety access points and the idea of how it starts with communication where someone makes that 911 call. Now we're to the point where we're asking our volunteers to respond to that emergency. And without the proper equipment-- you talk about any business. A successful business is based on communication and their business is saving lives. And that's why this is so necessary based on, on this equipment and try to use ARPA to get them, them caught up with their communication ability. I'll answer any of your questions.

STINNER: Questions? Senator Clements.

CLEMENTS: Thank you. Senator McDonnell, is public safety equipment automatically eligible for ARPA funding?

McDONNELL: Yes, according to rules-- rule-- Final Rule on page 61 of the ARPA from the U.S. Department of Treasury.

CLEMENTS: OK, thank you.

STINNER: Senator Erdman.

ERDMAN: Senator McDonnell-- thank you, Senator Stinner. On the fiscal note, it said life expectancy of radio is 25 years and the table below shows that the cost of estimated maintenance 2,847,000. Is that over the 20-year period?

McDONNELL: As far as I understand, yes.

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ERDMAN: And that's not a, not an ongoing annual--

McDONNELL: No, as far as I know, but I'll make sure I clarify that.

ERDMAN: OK, thank you.

STINNER: Additional questions? Senator Dorn.

DORN: Thank you, Senator McDonnell. I know I talked to some earlier too. It's along the interstate. What criteria are you going to use for how wide out or what-- I mean, what are you looking at as-- how does, how does a volunteer squad qualify for this? How close do they have to be?

McDONNELL: Well, I think strategically based on who would be the closest volunteer department and as you go and work your way geographically across the state.

DORN: Farther out then?

McDONNELL: Yes.

STINNER: Additional questions? Seeing none, thank you.

STEPHEN RASGORSHEK: Good afternoon, senators, Chairman. Senators, thank you for your time. My name is Stephen Rasgorshek, S-t-e-p-h-e-n R-a-s-g-o-r-s-h-e-k. Senator got the last name-- just a little close, not really, though, but that's fine, Senator. Thank you. I recently retired as a trooper from the Nebraska State Patrol after 27 years, just back in-- last November. In the last eight years with the patrol, I worked as their radio specialist and interoperability coordinator, programming radios and training all the troopers statewide on the Statewide Radio System. I also assisted and trained all state agencies and local agencies as they joined the Statewide Radio System over the years. Over the last eight years, I have personally seen the impact of local users not being able to communicate with state agencies, both during major events as well as everyday incidents. The spring floods of 2019, I was called on to program every spare radio that the State Patrol had so we could hand them out to the local fire departments to assist with water rescues. Fire departments with no direct communications were now able to communicate with the State Patrol and Department of Transportation as roads were being shut down due to the flooding. They could communicate with the National Guard and the State Patrol helicopters during the water rescues. Without the ability to communicate on the SRS, these agencies would have had to rely on the

slow process of relaying messages back and forth through dispatch centers, hoping nothing is lost in translation, instead of having direct communications with others on the ground and in the air when time is of an essence. The blizzard in 2019, when hundreds of motorists were stranded on I-80, the State Patrol and local fire departments were responding to calls of stranded motorists. With no ability to coordinate communications directly, there were multiple times where an agency would arrive on scene, only to discover another agency had already responded to the call. With limited resources, this slowed the rescue of all individuals stranded in the storm. Almost daily, the Nebraska State Patrol calls on the volunteer fire departments to assist with an incident on I-80. Establishing interoperable communications between state agencies and local responders will provide the state of Nebraska with the ability to vastly improve current operations by providing a more rapid response, coordination, and time and effort to make a difference between possible life and death. Interoperability: this is the main focus of this bill. Interoperability: the ability of multiple agencies to communicate on a shared system. This bill is not about changing the way fire departments communicate when fighting fires or working with other local agencies. This bill is about interoperability, interoperability with state agencies, having the ability to communicate directly with the state agencies when responding to calls from the state agencies. I've worked on the Statewide Radio System from the early beginnings and understand the difference between the state trunked radio system and a conventional radio system. All of your firefighters are currently using conventional radio systems and not a trunk system like the SRS. Conventional radio communications is similar to your basic walkie-talkie two-way radio communication. I'm not going to get technical on you. Just know that a firefighter inside a building fire does not care if dispatch can hear them. Their help is standing next to them and being able to communicate with the person next to them is the priority. Using a conventional radio system is how you fight a fire. The equipment this grant would provide will give the volunteer fire department the ability to continue working on their conventional system, plus the added ability to communicate with agencies on the Statewide Radio System. The Statewide Radio System is a mobile radio coverage-based system, which means that it's designed to give coverage to the radio in the truck and not the portable radio carried by the individual. The NICE grant was designed with this in mind. Every truck installing a radio with this grant will also receive a vehicle repeater designed so the individual carrying a radio can talk through the truck when trying to communicate on the Statewide

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Radio System. This is how all state troopers, Game and Parks, and other state agencies currently communicate. The NICE grant also place training and programming in the grant as a high priority. Training every agency the same and programming their equipment to be similar with each other will help with interoperability in the field. All state and federal agencies in Nebraska are on the Statewide Radio System. Currently, 23 local fire departments are on SRS and as more local agencies join the SRS, this will expand the interoperability communications of these local fire departments. Prior to retiring from the State Patrol, I wrote the nice grant as a way to help volunteer fire departments join the Statewide Radio System. I would love to see every volunteer fire department in the state have this opportunity, but with limited resources, I focused on the interstate, where almost 60,000 vehicles pass a day each way. The hope was to make the largest impact for the state of Nebraska with the resources available. Thank you very much. I'll take any questions.

STINNER: Questions? Seeing none, thank you.

STEPHEN RASGORSHEK: Thank you. Thank you, Chairman.

STINNER: Afternoon.

LAUREN BESTWICK: Hello. My name is Lauren Bestwick, L-a-u-r-e-n B-e-s-t-w-i-c-k, and I'm here in support of LB1199. I'm here to share a personal story from what could potentially happen and in fact obviously did happen with me when there is a significant breakdown between your local emergency agencies and your state departments that are responding. When the blizzard of February 2019 rolled in, we all anticipated something happening, prayed like heck that it wouldn't, but when the page comes out and that call goes, without hesitation, you do what you got to do and you get out the door and that's how that was for me. Get en route to the scene, arrive to a massive pile up on the interstate. We had no idea of the significant impact it was and how big it truly was. We had merely parked, unbuckled our seatbelts. I remember standing up and our squad was hit by a semi going 50 to 55 miles per hour. So not only did we suffer the impact of the initial semi striking us, we were propelled into another emergency rig that was parked there to offer aid. I woke looking up at a ceiling, knowing all unwell that I was not doing well and in fact, I told the responder that was next to me that. So in a normal situation for the-- yet another emergency department to come now rescue the rescuers, it was almost double the time that it took them to get to us because roads were unsafe and they were doing what they had to do as well. We

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stopped in Seward for emergency lifesaving measures because there was no way I was making it all the way to Lincoln. And during that time, yet another emergency agency is now stepping out, not knowing exactly what is going on, except that one of their own brothers and sisters is now injured without the communication for those local-- the state people. So arriving at Bryan with an escort from Seward Fire Department, plows clearing the road, because of this communication breakdown, I spent a week in ICU, lost two days where I woke up and not realized what had happened. I was intubated, sedated. I had a concussion, cut on my head, broken clavicle, seven broken ribs, double hemopneumothorax, broken scapula with bone fragmentation. My ankle was dislocated facing the wrong way and I later had to have two surgeries where donor tissue had to be implanted into me so I could regain some function back into it. I spent a week in Bryan intense rehab facility and it took me all of-- till late May of '20 before I was fully cleared, leaving me with a disability impairment rating in my ankle and my hip. But weirdly enough, I got back on the nearest department when I moved because I have a passion for the service and serving the community with me. So despite the horrors and what I had gone through for this, it's important to now move forward. And if that moving forward position is me scared to death up here talking, but getting support and communication improvements through our agencies to better do our jobs, that's what's ultimately important because I don't like knowing that I'm now a horror story that our spouses worry about when that pager goes off, all well, knowing that it could have been less-- it could have been prevented or less impactful with a different outcome had communications not broke down, had our state been able to talk to our local responders. And that's something that you can carry with you going forward. So I'm asking for your support in moving forward with this because nobody wants this more than I do. Questions?

STINNER: Thank you. Questions?

HILKEMANN: Thank you for your story.

STINNER: Senator Kolterman.

KOLTERMAN: Well, first of all, we've met several times.

LAUREN BESTWICK: Yes.

KOLTERMAN: Thank you for coming. And she's from my district, Waco, Nebraska, and we've met with the Department of Roads and tried to figure out how we can close the interstate. That was part of the

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problem. Communication wasn't there. And I just appreciate you coming today and your service.

LAUREN BESTWICK: Absolutely.

KOLTERMAN: Thank you.

LAUREN BESTWICK: Thank you, Senator.

STINNER: Additional questions? Seeing none, thank you.

TONY KOSIVA: Thank you, Chairman Stinner and members of the Appropriations Committee. My name is Tony Kosiva, K-o-s-i-v-a, just like it sounds. I am thankful for your attention to Nebraska bill, LB1199. I represent Motorola Solutions and we have the honor of being the Statewide Radio System provider and we service many of the cities, counties, and state agencies of Nebraska. I specifically handle large systems across a 15-state region, including Nebraska, Kansas, Missouri, and Minnesota. I have been with Nebraska since the inception of the Statewide Radio System and I have learned a great deal about the challenges that face public safety agencies with communications. Really comes down to four items. Can they talk to who they need to, when they need to, where they need to? And frankly, is it trainable and repeatable? These fundamentals are the reason we are here today. Many Nebraska fire/EMS agencies are not able to communicate with state or federal agencies in the time of crisis. I liken this to you having an AT&T cell phone, you having Verizon, you having Sprint, and you're not allowed to talk to each other. That's what our agencies face in Nebraska. They're on different systems, different abilities, different communication paths. That is a problem for first responders trying to keep the citizens of Nebraska safe. The fact is whether it's a car accident, a grass fire, hazardous materials, a drug bust, or a medical incident, Nebraska State Patrol have no means of direct communications to work with these other folks. This creates a longer time that roads are closed, a danger to first responders, and a potential risk of life to Nebraska citizens and our visitors. We just heard a perfect case of this, unfortunately, that happened. This bill would allow for interoperability with fire, EMS, and law enforcement while allowing local agencies to not have to change their daily operations. It allows them to use their current conventional and paging systems while giving them greater interoperability with state and federal agencies. A critical component of success is knowing how to use the equipment you have received efficiently and effectively. A purposeful training program has also been included in this bill. Therefore, all

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departments will be trained on radio use and situational training to ensure a smooth transition in communications. This bill would allow you to provide frontline responders with the tools they need to respond quicker to citizens' needs, keeping roadways safer during incidents, and ensure that they can do their jobs effective-- effectively and efficiently. I thank you for your time and would take any questions.

STINNER: Questions? Senator Clements.

CLEMENTS: Thank you. Thank you. Is see this is for volunteer fire and rescue. Do the local sheriffs have a problem like this?

TONY KOSIVA: So the local sheriffs have-- work on communications as well. We've been working in the state of Nebraska to bring sheriffs on. Some sheriffs have built out communications and came to the system. There are-- quite a few of them have radios to do that, but they frankly face the same issues. They have a need for interoperable radios for communications with all agencies. The way the state is right now is there is a complete backbone of radio communications and everybody-- I don't want say everybody, but there are a lot of fragmented systems out there because you look at cost, you look at their coverage, and you look at who they talk to normally. They look at 90 percent of my challenges are here and so they try to address those with the limited budgets they have. Frankly, most counties in Nebraska face the same issue. Some have elected to move forward and do systems joining the state of Nebraska. Scotts Bluff County was just the one that did last year. Others have done the same thing with Madison County, Norfolk, others over the last few years. So it has been an issue and frankly, it will continue to be until there is a funding process that allows this to be solved.

CLEMENTS: OK, thank you.

STINNER: Senator Hilkemann.

HILKEMANN: Thank you, Senator Stinner. I'm going to comment because you and I have been on this Appropriations Committee for eight years together and you know very well that for the first four years, all we talked about was, was state radios and now I'm hearing this and I'm discouraged that we didn't-- that, that we're still not talking to one another. I don't know whether that-- that's sort of an inside thing for Senator Stinner and I, but our first years, we kept coming with there was appropriations to-- for the radios to talk to one another

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and that was what-- we spent lots of dollars on that, appropriated out. Remember that? And I, and I-- so I hear this and I'm-- so I'd just like to say we didn't get it right, right?

TONY KOSIVA: Sir, if I could be blunt, there wasn't enough dollars spent on the-- the system was built to get the State Patrol and other users up and running with the coverage that they could afford with the state, with a phenomenal partnership with Nebraska Public Power District. That is very unique across the country. And they did really well with what they had, but it didn't cover all the needs of the local users. There was additional towers needed, coverage, capacity as well as consoles within-- that we heard on the last bill for dispatch and radios for portables and mobiles.

HILKEMANN: So you know exactly what I was--

TONY KOSIVA: I know exactly what you're facing and frankly, you're, you're-- you know, as I cover multiple states, we see this in, in other areas. I'm working with three different states right now on bills similar to try to help first responders, especially using ARP funds.

HILKEMANN: So what you're seeing is that back then, we, we gave funding, but we have-- we funded it inadequately?

TONY KOSIVA: You funded it the best of the ability to cover what they were trying to accomplish at that time. There were certain challenges that, frankly, I think getting the state to do what they needed to do and trying to get the locals on board was a challenge. And the state had to move forward with a state radio system and the locals frankly were left behind because the state couldn't mandate that you come on because then it would be an unfunded mandate and we would all hear about it. The state did what they could. They got the system up and running. It's a great system. It's been very stable, very secure. They've got great coverage in most areas and it's time for the locals to look at those options. And frankly, they're running into their own funding challenges right now. So I think any way we can help the locals to ensure that public safety moves forward-- because as a citizen, I live in Otoe County, right? When my daughter had an accident, I didn't care that, you know, the sheriff showed up, local police, which fire department. If they all-- if they would have told me at that time that they couldn't talk to each other and that would have resulted in my daughter having more injuries than she did, I

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would be furious. That's not tolerable. Nebraska citizens shouldn't have to sit there and say, can you all communicate to do your jobs?

HILKEMANN: Thank you.

STINNER: Senator Kolterman.

KOLTERMAN: Thank you, Senator Stinner. First of all, you cover eight states, but you live in the right state.

TONY KOSIVA: Thank you.

KOLTERMAN: The radio-- we're talking about the radios now.

TONY KOSIVA: Correct.

KOLTERMAN: Is, is the towers-- are the towers accurate or are they complete enough so that the towers that we have would take care of the problems that we're talking about?

TONY KOSIVA: People always want more coverage, but you do have towers in this state that allow mobile coverage and then when you use the repeater in the vehicle, it allows the portable to talk to the car and then the car to talk off to the actual tower. That gives you the portable coverage you need. Now--

KOLTERMAN: But this deals strictly with the radio.

TONY KOSIVA: This strictly deals with the radios.

KOLTERMAN: Thank you.

STINNER: Additional questions? Seeing none, thank you.

TONY KOSIVA: Thank you.

TIM NORRIS: Hello again.

STINNER: Afternoon.

TIM NORRIS: Tim Norris, T-i-m N-o-r-r-i-s. I am the fire chief in Bennett. We-- Lancaster County is in the midst of trying to figure out what we are going to do as rural providers for our radio system. We don't have good solution. The county tells us it's our-- the Mutual Aid Association to figure out how to fund something. Mutual Aid Association has no money and the Lincoln system, when they did it in

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Lancaster County, they only included Lincoln and the sheriff's department. The county itself was left out completely. If we want to get on the Lincoln system, it's the cost of \$3,000-plus per radio and most departments have 50 radios or so, plus they want a user fee-- an annual user fee of over \$300 per radio per year, which is more than what most of our fire budgets can afford. So we are in the process of looking at solutions. Several of our departments are on the I-80 corridor. Several of our departments are on the Highway 2 corridor and that's going to continue to get busier as the bypass gets done. In the last-- within a week and a half of each other, we had two fatalities on Highway 2. We have no way to talk to State Patrol, none, and they have no way to talk to us. One of the State Patrol officers-- we had a grass fire on Highway 2. He was there before we were. He could have told us what was happening, what he saw, but he couldn't communicate with us. He was great. He actually got a swatter out and started swatting the fire with us. So I mean, that doesn't happen all the time. But what I'm saying is, I think this is a great bill to help get us to be able to communicate. It may be a way for us to have a radio system in our county that works for the rural because we don't have one now. The one we have is becoming obsolete and it's limited on the channels. We have ten-plus departments that use the same channels. So this system would give us the ability to have multiple calls at the same time without having to listen to someone else's page go off while you're trying to talk to someone in a house or someone trying to save someone's life. I think it would also give the ability for Adams when they come up to have better communication as well. So I think for communication, I think this is essential. I mean, if you think 911 dispatch is important, how about the people that are actually doing the responding, for them to be able to communicate? So that's why I'm, I'm supporting of this and I think it's a good idea for us to move forward with this.

STINNER: Very good. Questions? Seeing none, thank you.

TIM NORRIS: You bet. Thank you.

BRIAN BARNES: My name is Brian Barnes, B-r-i-a-n B-a-r-n-e-s. I'm here today as a taxpayer and as a probably a rookie member of Pleasant Dale Volunteer Fire Department. I've been on about a year and a half. Our department starts seven miles west of here and covers Lancaster County and Seward County and some of Interstate 80. Our problem is we're on Lancaster's radio system, but we are based in Seward County. So if we get a call from Seward County, ambulance comes from Milford. Only problem is we can't talk to Milford. We have a handheld of theirs. So

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until they get within handheld range, we can't talk to them. A lot of times, we have to call 911 to see if they're even coming because we haven't heard anything on the radio after three or five minutes. If we're not getting a Milford call, we have to call on the radio to Seward 911, they make a phone call to Beatrice, and then they dispatch Crete and then we can't talk to Crete. And Lancaster County side, we rely on three different-- we have one contractor who's a mile and a half east of here and then two other departments as backups for mutual aid, but they're very busy departments. This kind of sounds like it's a plug for LB760, which I intended on talking about, but everybody kind of covered everything there. Since we are in Seward County, Seward County is one of three counties that all the rural fire districts are under one board. Therefore, we have no bonding. When we need a vehicle, we can't sell a bond to get that vehicle. We get \$100,000 every ten years and that's it. So if Lancaster County moves forward with this system, now we can't talk to anybody because we're still on the old system and they're on the state radio system. And with the State Department of Roads planning on expanding the interstate west to Lincoln to three lanes each direction, there's going to be a lot of accidents. This last year, when they were resurfacing in Seward County, there was so many accidents. And as a taxpayer, just to cover both of these, my tax bill for this year for the school system is \$3,365 and my tax bill for fire is \$96. There's just no money going to fire and like they said before, when you dial-- make that phone call, you're expecting somebody to be there. Thank you for your time.

STINNER: Thank you. Questions? Seeing none, thank you.

BRIAN BARNES: Thank you.

STINNER: Any additional proponents? Any opponents? Anyone in the neutral capacity?

MATTHEW GILLESPIE: Here I am again.

STINNER: Good to see you.

MATTHEW GILLESPIE: My name is Matt Gillespie. I'm the fire chief for Dalton Volunteer Fire Department. It's M-a-t-t-h-e-w G-i-l-l-e-s-p-i-e and I've talked to several of the officers on this. As a volunteer fire department that mutual aids to several areas on the I-80 corridor, we sit on the 385 corridor. We go to Scotts Bluff. We go into Alliance down to the east. I'm concerned with cross-communication

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and communication that the-- the fire departments that are going to be far enough off the I-80 corridor to not have the same capabilities or the State Patrol assuming that we do and we don't. These are some of the things that-- if anything is going to break down in a fire, in an accident, in any situation, it's going to be communications. If you can't get ahold of the guy on the other side of the hill, he's useless or I'm useless. The thing I'm worried about, like I said, is what is the end goal? Is-- are all volunteer fire departments going to be a statewide? And by the time that happens, will we be into the next technology where we're going to be doing this again? That is it.

STINNER: OK. Senator Erdman.

ERDMAN: Thank you, Senator Stinner. Matt, thanks for coming back in. As some in this room may know, I'm not a fan of being neutral, but, but what I'm gonna ask you is this: you have the opinion we can make this bill better. Is that what you're trying to tell us?

MATTHEW GILLESPIE: There is always room for improvement on everything. I'm just trying to figure out what's the end goal and what are you-- time wise?

ERDMAN: So, so you're--

MATTHEW GILLESPIE: Are we going to get passed up by the time we get completed with this technology? Just like the senator was saying, you started this eight years ago and you thought you had it covered. Here we are again. In 10 years or 12 years from now, are we going to go to a different type of radio system? Is the State Patrol going to update theirs or mutual aid going to change? Are we going to get buried and end up spending this kind of money again and throwing those radios to the wayside?

ERDMAN: So in your opinion, if they go to this system along the interstate and you're on 385, you may not be able to communicate with them. Is that your reason?

MATTHEW GILLESPIE: That's, that's my concern.

ERDMAN: So you'd like, you'd like to see this expanded from 385-- from I-80 to include you?

MATTHEW GILLESPIE: Yeah, but what happens when we go north? Are we going to be affected by communications with fire departments that are further away, that are away from the big corridors and the assumption

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that they're able to talk with State Patrol and everything else? As a taxpayer, I'm looking at this and going, what's the most economical way for "x" number of State Patrolmen to talk to almost 1,500 volunteer fire departments or volunteer firefighters? Get them an extra radio to take up their car or get that many radios so that we can talk to them?

ERDMAN: So you were saying this is an unfunded mandate on your department.

MATTHEW GILLESPIE: This would be an unfunded mandate on our department.

ERDMAN: You may not be in the neutral category.

MATTHEW GILLESPIE: The State Patrol is back there and I don't want to make them mad, but that's just the concern. That's why I stayed on a neutral basis is because it's a good idea. Communications, the more we can step forward, the better, but it's how long is it going to take to get to the top of the stairs. Are we going to have to go to another floor? Are we going to have to put more money into it? Are we going to have to go back down to the bottom and start over?

STINNER: Senator Clements.

CLEMENTS: Thank you. Thank you, Matt. How far is Dalton from the interstate?

MATTHEW GILLESPIE: 21 miles.

CLEMENTS: 21 miles. Do you respond to interstate calls?

MATTHEW GILLESPIE: It depends. We mutual aid a lot to Potter Fire District, Sidney, Lodgepole, sometimes to Chapel. Mostly fires, but in certain circumstances, we're assisting if they've got multiple accidents and they need EMS or fire to other calls. We will go.

CLEMENTS: OK, thank you.

STINNER: Thank you. Anymore questions? Seeing none, thank you.

MATTHEW GILLESPIE: Thank you.

STINNER: Anybody else in the neutral capacity? Senator, would you like to close?

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McDONNELL: Well, I'd like to thank everybody for their service and being here today. Apologize to Steve for screwing up his last name. Just quickly, if you do respond to the interstate, you would be part of this bill. I agree there's always room for improvement and answer any of your questions and if not, I'm going home and I think that's where all you want to head too. Thank you.

STINNER: Questions? Seeing none, thank you. There were no, no letters of support, one in opposition, and one in neutral. That concludes our hearing on LB1199 and that concludes our hearings for today.