

Transcript Prepared by Clerk of the Legislature Transcribers Office  
Revenue Committee February 24, 2023

**LINEHAN:** [RECORDER MALFUNCTION] appear due to a disability, you may use Nebraska's Legislature's website to submit your written testimony in lieu of in-person testimony. To better facilitate today's proceedings I ask that you follow these procedures. Please turn off your cell phones and other electronic devices. The order of testimony is introducer, proponents, opponents, neutrals, and closing remarks. If you will be testifying, please complete the green form and hand it to the committee clerk when you come up to testify. If you have written materials that you would like to distribute to the committee, please hand them to the page to distribute. We need 11 copies for all committee members and staff. If you need additional copies, please ask the page to make copies for you now. When you begin to testify, please state and spell your first and last name. Please be concise. We're going to go with three minutes today, so you'll have two minutes on green and one minute on yellow. And then if you go onto the red, I will ask you to stop. If there-- if your remarks were reflected in previous testimony or if you would like your position to be known but do not wish to testify, please sign the white form at the back of the room and it will be included in the official record. Please check directly-- excuse me-- please speak directly into the microphone so our transcribers are able to hear your testimony clearly. Now, I'd like to introduce committee staff: to my immediate right is legal counsel Lyle Wheeler, to my immediate left is research analyst Charles Hamilton, to the left at the end of the table is committee clerk Tomas Weekly who you will be handing your green sheets to. And now I would like the committee members with us today to introduce themselves beginning at my far right.

**KAUTH:** Kathleen Kauth, LD 31.

**MURMAN:** Dave Murman from Glenvil, represent eight counties in southern Nebraska.

**von GILLERN:** Brad von Gillern, Legislative District 4 in west Omaha.

**BRIESE:** Good afternoon. Tom Briese, District 41.

**ALBRECHT:** Senator Joni Albrecht, District 17.

**DUNGAN:** Senator George Dungan, District 26, northeast Lincoln.

**LINEHAN:** And if our pages would stand up, and I didn't give you a heads up, but I guess many committees are doing that, could you introduce yourselves?

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**AMELIA STONER:** Sure, I'm Amelia. I'm a senior at UNL studying political science.

**CAITLYN CROFT:** My name's Caitlyn. I am also studying political science but I am a junior.

**LINEHAN:** Thank you, ladies. So they are who you hand your handouts to. Please remember that senators may come and go during our hearing as they may have bills to introduce in other committees. Please refrain from applause or other indications of support or opposition. For our audience, the microphones in the room are not for amplification but for recording purposes only. Lastly, we use electronic devices to distribute information. Therefore, you may see committee members reference information on their electronic devices. Be assured that your presence here today and your testimony are important to us and a critical part of our state government. So I think the way we're going to do this-- how many people are here to testify today? OK, we'll go three minutes proponents, then opponents and then neutral. So, Senator Albrecht, welcome.

**ALBRECHT:** Good afternoon, Chairwoman Linehan and members of the Revenue Committee. For the record, my name is Joni Albrecht, J-o-n-i, Albrecht, A-l-b-r-e-c-h-t, and I represent District 17, which includes Dakota, Thurston, Wayne, and a portion of Dixon County-- Counties in northeast Nebraska. Today, I'm introducing LB606, the Nebraska Pregnancy Help Act, which will empower under-supported women to choose a different and better future for themselves and their children. The Nebraska Pregnancy Health Act would establish a new tax credit to incentivize private donations to pregnancy help organizations across Nebraska who are providing under-supported pregnant women and family services free of charge that are crucial for their physical, emotional well-being. These free services include pregnancy testing, pregnancy and prenatal care education, counseling, food, clothing, housing, transportation, parenting and life skills classes, childcare, licensed medical care and referrals to additional community services and material help. Pregnancy help organizations also provide personal relationships and a strong local support network for women and their families in ways no government program can. LB606 will help support and expand this work by providing for up to \$10 million in tax credits to be allocated per year for private donations to be eligible charitable organizations. One of several pregnancy help organizations in Omaha last year raised a little under \$2.5 million to serve the 1,991 clients that they helped; 32.5 percent of those are-- were African American and 17 percent of whom were Hispanic. During this work, these pregnancy help organizations do require resources because

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of the sheer need out there in Nebraska communities. Research by the Charlotte Lozier Institute shows pregnancy help organizations save their communities millions of dollars annually they would otherwise need to spend on social services that these organizations provide. This bill defines an eligible charitable organization as a 501(c)(3) that regularly answers a dedicated phone number for clients-- telephone number for clients, maintains its physical office clinic or maternity home in Nebraska, and office-- offers services at no cost to the client for the express purpose of providing assistance to women in order to carry out their pregnancies to term, encourage and enable parenting or adoption, prevent abortion, and promote healthy childbirths. An eligible charitable organization must use licensed medical professionals for any medical services offered and cannot receive more than 75 percent of its annual revenue from government grants or sources. An organization seeking to become an eligible charitable organization shall provide the Department of Revenue with a written certification that meets all criteria under the LB606 bill to be considered an eligible charitable organization. The department shall review each certification to determine whether the organization meets the criteria and shall compile and make available to the public a list of eligible charitable organizations that have been approved. No more than 50 percent of the amount in tax credits allocated per year may be allocated for contributions to any one single organization, and no individual taxpayer may receive a tax credit greater than 50 percent of their income tax liability. Whether you are pro-life or pro-choice, we can all agree that every woman and child deserves love and support. That's what these organizations do. I've seen the impact that they've had on women, families, and communities. The Nebraska Pregnancy Help Act will allow those who are caring for under-supported pregnant and parenting women and their families to expand this important work. I believe it is one of the most important things that we can do in a time where we are also working to enable greater protections for the unborn in Nebraska. If you have questions about pregnancy help organizations and the work that they do, there are several representatives from various organizations across Nebraska, as well as individuals who have helped-- have been helped by them who will be testifying behind me. Thank you for your time and I encourage your support of the Nebraska Pregnancy Help Act and I'm happy to answer any questions.

**LINEHAN:** Thank you, Senator Albrecht. Are there any questions from the committee? Seeing none, thank you.

**ALBRECHT:** Thank you.

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**LINEHAN:** We'll have our first proponent.

**LAURA BUDDENBERG:** Hello. My name is Laura Buddenberg, L-a-u-r-a B-u-d-d-e-n-b-e-r-g. I have 37 years' involvement with pregnancy help organizations as a volunteer donor board member and just recently retired as the executive director of Essential Pregnancy Services, EPS, in Omaha. I have a master's degree in Human Services. PHOs serve women in under-supported pregnancies. At EPS, for example, we work to help women improve their physical, emotional, social, and financial circumstances through parenting and life skills classes, professional behavioral health services delivered by licensed mental health professionals. We also provide material aid, financial assistance and case management services, all of them free of charge to women pregnant and through 18 months postpartum, after which we connect families with those who can help them further in the next phase of life. The total goal of our program is to help women and their children flourish by building stable families and working toward successful futures. Last month, January 2023 alone, EPS provided 1,373 total services to 325 families, including 3,285 material assistance items delivered, and 462 completed parenting and life skills classes. The level of need is growing. In 2021-2022 fiscal year over the previous fiscal year, EPS saw a 36 percent increase in new client registration, 162 percent increase in completed parenting and life skills classes, a 242 percent increase in case management assistance, and an 81 percent increase in material assistance provided. As a 40-year donor to PHOs myself, I know donors like to support a local nonprofit that reflects their values and is highly accountable where they can have direct access to those who are making the funding decisions where money is going. You can see the financials, you know exactly what's happening, and also where you can visit and directly see how your, how your generosity is being used to improve your own community. This accountability encourages private charity and civic engagement, and PHOs are absolutely dependent upon that to continue their service to women and children. I will say that building stable families builds a much better local community and local communities make for a better Nebraskan. And I am a lifelong Nebraskan myself, so I do believe in the good life here. Thank you for listening and I ask your support of LB606.

**LINEHAN:** Thank you very much. Are there any questions from the committee? Senator von Gillern.

**von GILLERN:** Thank you for your testimony today. I'm particularly interested in the, the parenting. I'm always interested in things that have a return on investment value to them. Do you see impact on

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parenting, are, are there people that are maybe deferred from public assistance programs, even incarceration, those kinds of things through your parenting programs?

**LAURA BUDDENBERG:** Thank you for that question. Yes, we do try to track exactly what's happening. We have been using the family resource scale with a lot of our families in parenting and life skills classes. So we're looking to create additional stability, shore them up where they need some help with informal supports so women do come to us. Our classes qualify to kind of help them get a better start on things. They report that they feel that they are doing better parenting perhaps than their parents did. They have increased confidence and this also can really help to increase father involvement and we like to see that happen as well.

**von GILLERN:** Great. Thank you.

**LINEHAN:** Thank you, Senator von Gillern. Other questions from committee? Senator Dungan.

**DUNGAN:** Thank you, Chairman. And thank you for being here today.

**LAURA BUDDENBERG:** Um-hum.

**DUNGAN:** So you said you worked for EPS, is that Essential--

**LAURA BUDDENBERG:** Yes.

**DUNGAN:** --Essential Pregnancy Services

**LAURA BUDDENBERG:** In Omaha, yes.

**DUNGAN:** What are-- I know, I know that all of the different organizations we're talking about here probably provide slightly different services. But in your experience, what are the services that were provided by EPS?

**LAURA BUDDENBERG:** EPS provides a number of services. We do have sites that do testing and ultrasound. The bulk of what we are doing, however, really is for women who are pregnant and under-supported pregnancies and who are needing some additional assistance. And we continue that out through 18 months postpartum. So we have parenting and life skills classes. We have professional mental health. In other words, we're doing behavioral health with licensed mental health professionals. We have part time on staff. We are also doing case management because we can't provide everything, but you want to give a

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one-stop shop for somebody. You know, when a woman is in crisis and she's dealing with little kids you want her to be able to sit down and have somebody who can, not only help her in the immediate moment but help her make those phone calls and get her connected to other resources. And then we do our best to collaborate with values aligned, organizations for things like food insecurity, help with housing, etcetera. We do provide also one-time emergency financial assistance, help stop eviction. Sometimes somebody just needs a little help getting transportation and those kinds of things. So we do a lot, and the statistics that I gave were strictly for the life services portion of our programming.

**DUNGAN:** OK. Do you, as an organization, have medical doctors that are licensed medical doctors on your premises?

**LAURA BUDDENBERG:** We are very careful to tell women that our sites, our testing sites, we do not refer to them as clinics, and also that all we are providing there is medical-grade pregnancy tests and limited first trimester obstetric ultrasound. Those services are provided by licensed and trained nurses under the orders of a licensed OB-GYN here in the state of Nebraska. He does volunteer his services and ultrasounds after they are performed are then read and signed off on by a licensed physician, either an OB-GYN or a radiologist.

**DUNGAN:** And I guess my question for you, too, is when, when somebody comes in and you, you make clear to them that you're not dealing with medical advice necessarily, do they have to sign anything indicating they--

**LAURA BUDDENBERG:** Yes, they do.

**DUNGAN:** What does that look like?

**LAURA BUDDENBERG:** And, and we are-- we have them signed a disclaimer and we also tell them upfront that we are, you know, what services we do provide and don't provide. It is our protocol when a woman walks in to ask her what her understanding is of what we offer in those testing sites to make sure she understands what we do offer and what we do not. We do not refer to the women who come in for those testing services as patients because we are not providing continuity of care. We just want to be very clear about what we do and don't do. Again, the bulk of what we do then does happen in the life services side of our programming.

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**DUNGAN:** OK. And so you also provide-- in the life services you provide things like clothes and diapers and things such as that?

**LAURA BUDDENBERG:** Yes, maternity clothing, baby clothing, diapers, formulas, cribs, car seats. We also like to encourage our clients to read to their children so we keep a large, you know, selection of books. And those things also are all given to women. We're using incentives-based program because women reported years ago when we started this, they really like earning what they're providing for their families, but they can earn those things through attendance at any of our programs. But we also recognize parenting classes that are offered anywhere else as well as any behavior that's just really good for health so attendance at doctor's appointments, prenatal care visits, any kind of other professional mental health that they are getting any time they take their kids to the, you know, to the pediatrician. All of those are ways essentially to participate in the program so they don't have to do their parenting classes with us in order to be able to come in and shop in the what we call the boutique.

**DUNGAN:** And the books that you provide, are any of those religious in nature? Do they push any kind-- not push, do they, I guess, have a religious ideology attached to them in the books that are provided in the library?

**LAURA BUDDENBERG:** If women ask for those or want them, certainly. But there are a lot of your basic: Pat the Bunny, Goodnight Moon. I mean, all of the things that we read to our kids and that are good for just encouraging that bonding. And also we know that reading is good for kids. If kids are read to, they associate that with positive things and we want to help our families, you know, be literate and bond with their kids.

**DUNGAN:** In your experience at EPS, what kind of-- and I genuinely don't know the answer to this question-- what kind of medical records or records are kept for all the services that are provided, like the ultrasounds and things like that? I know you said they're not necessarily medical services, but do you keep records of your patients and what's provided?

**LAURA BUDDENBERG:** Everything is kept under lock and key and those records are kept for a full ten years after someone visits EPS so there is always a record of that. We have confidentiality policies and we keep-- again, those records are all kept locked and only accessible by those who would have a need to see them. And we do not release any, any records at all to anyone or answer the question if someone has

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been to visit us without written consent from the client herself, and then the records are released to her and she can release them then where she chooses.

**DUNGAN:** OK, so they do get kept, but those aren't for any kind of reporting back to governmental oversight or anything like that, because these aren't, they're not medical services. Right? So these aren't being kept then to report back to any kind of medical board or anything like that?

**LAURA BUDDENBERG:** No.

**DUNGAN:** OK. Thank you.

**LAURA BUDDENBERG:** Um-hum.

**LINEHAN:** Thank you, Senator Dungan. Is there any other questions from the committee? Seeing none, thank you very much.

**LAURA BUDDENBERG:** Thank you.

**LINEHAN:** Next proponent. Good afternoon.

**GINA TOMES:** Good afternoon. My name is Gina Tomes, G-i-n-a T-o-m-e-s, and I have been with the Bethlehem House for 20 years and recently just left to start my own consulting business called Maternity Home Consulting. Thank you for allowing me to come here today. I am very honored and privileged to have worked in the maternity home business for well over 20 years. What I have noticed and have been able to be a part of and grow and strengthen is providing housing for women who choose life and are facing very big barriers. The barriers that we see that are women are coming to us asking for help are homelessness, addiction and recovery, undiagnosed mental health issues, the breakdown of the family, which means they don't have any family support, maybe have aged out of the foster care system and really needing help and are struggling, poverty, and want to choose life. Women go through an application process and get accepted into our program and move in. There is never any cost to any woman that we serve at any time. The average length of stay a woman resides in a maternity home such as Bethlehem House is a little over a year. What we are able to do is hit the pause button in a woman's life. When she is able to do that and receive the individualized care such as addiction and recovery treatment, mental health assessments, therapy, healing, just being able to be caught in an environment that is feeling safe for the very first time, maybe she's fleeing domestic violence, the sky's the limit. What we have noticed at Bethlehem



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House, and especially over the past five years, we are in partnership with the University of Notre Dame to provide causal research evidence to prove the effectiveness of this pro-life intervention in a woman's life. What we have found out is 76 percent of our alumni that leave Bethlehem House and bridge into our lifelong aftercare program, which means continued case management, fellowship, scholarships, home visitation is that we have ended homelessness for 96 percent of the women that come through our doors. Eighty-six percent of the women we have served are maintaining their sobriety because of their continued addiction and recovery, fellowship and treatment through our aftercare program. And we also like to refer to ourselves as poverty fighters. Seventy-six percent of our alumni are maintaining their housing and are increasing their income because of their engaged programming and classes that they receive through the aftercare programming. It's truly an investment in a woman's life and in a family's life when she is able to receive the care that she receives under one roof and continued care for life. We have to get away from just feeling like there's one, one Band-Aid or one, one type of solution for every type of family. Every family is very different and what we're able to do inside of maternity homes is truly miraculous.

**LINEHAN:** Thank you very much. Are there questions from the committee? Senator Dungan.

**DUNGAN:** Thank you, Chair Linehan. Just briefly, generally speaking, do you provide services for LGBTQ people as well?

**GINA TOMES:** We would provide services absolutely, absolutely for that population.

**DUNGAN:** OK. Thank you. I appreciate it.

**LINEHAN:** Thank you. Are there any other questions? Senator von Gillern.

**von GILLERN:** How many, how many-- not knowing this bill and with Bethlehem House, how many women were-- approximately were served at any given time or how many families?

**GINA TOMES:** So we can serve 12 women inside of Bethlehem House at one time. Here's the horrible part, is that we have a very extensive long waiting list so we are looking into expanding or expanding in general. Over the past, over the past 18 years, we have served over 1,200 women. And then when women leave Bethlehem House, they're voluntarily eligible to, to bridge into our aftercare programming and 89 percent

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automatically maintain that. And so we continue to serve their kids if they're reunified through foster care, their parents, so we've really opened up our gamut of who we serve.

**VON GILLERN:** Thank you.

**LINEHAN:** Thank you, Senator von Gillern. Other questions from the committee? Seeing none, thank you very much for being here.

**GINA TOMES:** Thank you.

**LINEHAN:** Next proponent. Good afternoon.

**GAYE TILLOTSON:** Good afternoon. My name is Gaye Tillotson, G-a-y-e T-i-l-l-o-t-s-o-n. I'd like to first express my appreciation to all of you for serving the people of our great state. I was born and raised here in Nebraska, and I spent the last 22 years serving as the executive director of Collage in Kearney, Grand Island, and soon to be Columbus. Our promise is pretty simple at Collage, we'll be a safe place, a place of hope and restoration, a place where those facing the reality of a sexually transmitted disease, an unexpected pregnancy, or even a struggle with a past pregnancy decision where they can begin to discover beauty despite their circumstances. And we do this by providing community-funded medical services like STD testing and treatment, pregnancy testing, and limited OB ultrasounds, all at no cost to our patients. We also provide early intervention programs for those who are at risk of unhealthy sexual behavior. By partnering with area schools, we help students recognize their value and worth, and we equip them with practical tools to empower them to make healthy relationship choices. And some in our community who've experienced abortion find themselves struggling in various ways. So we're here to listen and to walk alongside them and help them in their healing journey. It's truly one of my favorite parts of what we get to do. And I think one of the reasons is because it seems like seldom do people talk about abortion in a way that it brings hope and life to those who have been hurt by it, women and men who we rub shoulders with every single day. Instead, our words tend to either bring shame and condemnation or justification. Through our after abortion retreats, we get to see women's lives and families literally transformed. All of these services, again, which are provided at no cost, are what allow us to meet people at a crossroads of significant decision-making and help reposition them to thrive in life. It always amazes me to learn that our budget of nearly three-quarters of \$1 million, our supporters are just so amazed that it's provided entirely by individuals, businesses, organizations, and churches. And to be honest, it still

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amazes me after all these years. When I called a donor recently to thank them for the financial support, I was caught off guard of it when I heard I should be the one thanking you. I just can't imagine what our community would be like without Collage in it. Well, I'd like to take that step-- that statement one step further today. I just can't imagine what our state would be like without pregnancy help organizations in it. Thank you for your consideration of this bill that would benefit all of those we get to serve as well as all those who help make it possible. Thank you.

**LINEHAN:** Thank you very much. Are there any questions from the committee? Seeing none, thank you very much.

**GAYE TILLOTSON:** Thank you.

**LINEHAN:** Next proponent. Good afternoon.

**JOEY RUFF:** Good afternoon. I'm Joey Ruff, J-o-e-y R-u-f-f. First, I'd like to thank the committee for your work on behalf of the people in our state. I also want to thank you for allowing us the time to share and to show our support for this bill and also to give you a glimpse into the work that pregnancy health organizations do. I've had the privilege of serving as the center director of Collage in Grand Island, as well as the lead sonographer for over ten years now. Prior to that, I worked as a sonographer in a hospital and outpatient clinic setting for 13 years. One of the things that drew me to Collage was the unique ability we have as a PHO to not only meet medical needs of our patients through a more holistic approach but also the opportunity that we have to build relationships and walk alongside them during their pregnancy and sometimes even beyond. This is quite different for me coming from the typical hospital and clinic setting where my role was to get the patient in, perform the scan, and then move on to the next as quickly as possible. And I've seen the difference that makes in people's lives, particularly those who are walking through some very difficult situations, to have someone to listen to them for as long as it takes and help them unravel their fears as they figure out what their next best steps may look like. We provide limited OB ultrasounds for women in our communities at no cost to them, where we're providing the vital information they need, such as estimated gestational age and confirmation of a viable pregnancy, meaning that the pregnancy has developed in the uterus. It's not ectopic and we can see a heartbeat. This information also allows women to access prenatal care earlier with their physician, which is not often the case due to financial obstacles. The early care that this-- that they get with these physicians is so important, not only for their health but the

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health of their babies. But it's not just about women, though. I'll never forget a young couple that actually came in recently facing an unexpected pregnancy. And when I asked them how they came to Collage, the young man said, well, actually I came here for STD testing a couple of years ago. And I love that because it spoke to the importance of providing that safe environment for them and validating-- validated the needs that we're meeting through the other services that we provide. So like many, this couple had no idea where to start, how to talk to their parents. And in the midst of their fears, we were not only able to provide the medical services they needed but instill a little courage and even give them some helpful suggestions on how to start that conversation. It was pretty cool because when I performed the ultrasound, he's the one who actually started to cry. And when I asked him if he was OK, he said, you know, how amazing it was to see their baby and to be able to affirm and encourage a young man like that to step up to the challenge of fatherhood is just another way that we can make a difference. So thank you.

**LINEHAN:** Thank you. Thank you.

**JOEY RUFF:** Sorry.

**LINEHAN:** No, you're fine. Are there other questions from the committee?

**JOEY RUFF:** Yeah.

**LINEHAN:** Senator Briese.

**BRIESE:** Thank you, Chairwoman Linehan. Thank you for your testimony here today.

**JOEY RUFF:** Yeah.

**BRIESE:** How is Collage funded now?

**JOEY RUFF:** We are private funded. So whether it's through individuals, organizations, some businesses, churches.

**BRIESE:** Essentially donations from--

**JOEY RUFF:** Donations. Yes. Great question.

**BRIESE:** --the public, private--

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**JOEY RUFF:** Yep.

**BRIESE:** --corporate sectors, things of that sort. How would you describe your funding level currently? Are you needing additional funds or additional donations?

**JOEY RUFF:** That's a great question.

**BRIESE:** With that, I see a nod.

**JOEY RUFF:** She's our executive director.

**BRIESE:** OK.

**JOEY RUFF:** I don't handle the money.

**BRIESE:** Very, very good. You bet. Yeah.

**JOEY RUFF:** Yeah.

**BRIESE:** OK. Thank you. What is the budget for, say, Collage in Grand Island, ballpark, do we know?

**JOEY RUFF:** So right now-- we're actually one organization with two locations at the moment, and right now our budget is almost a quarter million--

**BRIESE:** Almost a quarter million.

**JOEY RUFF:** --or three-quarter million. Sorry.

**BRIESE:** Three-quarters of a million.

**JOEY RUFF:** Yeah.

**BRIESE:** And how many did you say that you serve? How many families?

**JOEY RUFF:** So, OK, yeah, I was just going to say so our-- from our last visit-- our last year visits, it was about 2,500 visits, 2,500 visits, which would include our testing and then material services, follow-ups, all of that, so.

**BRIESE:** OK. Very, very good. Thank you.

**JOEY RUFF:** Yeah.

**LINEHAN:** Thank you, Senator Briese. Senator Dungan.

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**DUNGAN:** Thank you, Chair Linehan. And thank you for being here. I really appreciate your efforts. And I know that what you do is a very helpful service. And it sounds like there's been a lot of really personal experiences that I think have been very probably fulfilling.

**JOEY RUFF:** Yes.

**DUNGAN:** You mentioned STI testing that you also do as well.

**JOEY RUFF:** Yes.

**DUNGAN:** Just by way of background, I, I have heard stories. We've all heard stories, right? I, I know people who have gone to these kind of centers and had very positive experiences. I know some who have gone and had what they believe to be very negative experiences,--

**JOEY RUFF:** OK.

**DUNGAN:** --just to be candid. Right? I think it's important just to say that. One of the things that I've heard about, for example, is sort of the fact that the STD testing in certain centers, and I know yours is just one of many,--

**JOEY RUFF:** Sure.

**DUNGAN:** --can be attached to or tethered to the pregnancy or the ultrasound, and that when somebody comes in who's pregnant receives an STD test they also have to get the ultrasound in order to get the results. Is that something that your facility does?

**JOEY RUFF:** No, not at all.

**DUNGAN:** So if somebody were to come in and say get an STD test but also be pregnant and refuse the ultrasound, would they be able just to get the STD test?

**JOEY RUFF:** 100 percent. Absolutely. Yeah.

**DUNGAN:** OK. And who performs the STD testing?

**JOEY RUFF:** It would be our nurses. We have licensed medical professionals. We have a nurse manager in our Kearney office and then we have a nurse that performs in our Grand Island center.

**DUNGAN:** OK.

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**JOEY RUFF:** And then we also work with the state health department with our STD testing, STI testing.

**DUNGAN:** And if somebody is positive then, I think, you said they can get referred for whatever medication they would need and all the--

**JOEY RUFF:** Actually at our center, if they, if they test positive, we are able to treat them through the program, the state program that we work with in our office, so.

**DUNGAN:** And then also you were mentioning, you kind of look at the pregnancy to see whether it's, whether it's viable or not, identifying a heartbeat or abnormalities or things like that. In the event that you identify any kind of abnormalities or issues with the pregnancy, what, what are the next steps that you take as an organization to direct that person to whatever other services they may need at that point?

**JOEY RUFF:** That's a great question. We actually-- so we work with volunteer clinic physicians, so we also have an OB-GYN and a radiologist. And so if we would detect an abnormality, then as a sonographer, I mean, we're not the ones to give these results, that's out of our scope, but we would, you know, confer with our doctors. They read those scans and then we always let our patients know that we will follow-up with them once we have the official report back and then we give them, you know, the recommendations that our doctors have given. And obviously, if it's a situation that requires more immediate attention, we would, you know, deal with that before they even leave the office so that they're getting the care that they need, so. And they-- we also release them with the discharge instructions on, you know, if it is their decision to continue on with prenatal care that they get into see, you know, a doctor within the recommended timeline that our, that our doctors give, so.

**DUNGAN:** And then, again, similar question to what I asked before. Does your organization, because I'm not as familiar with your organization, provide written materials that are in any way, shape, or form religious in nature?

**JOEY RUFF:** That are religious in nature?

**DUNGAN:** Um-hum.

**JOEY RUFF:** So like the services or the resources that we have are based off of, like, with options so that they have all of that in front of them. I know you asked Laura about the, the books, so it's

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kind of the same way with us. We do have some that would have more of a religious tone to them and that is up to the, the patient to [INAUDIBLE].

**DUNGAN:** Right, they're in the library, they're not given to them.

**JOEY RUFF:** Right. You know, everything is always offered. So that's up to them if they choose to take whatever they want.

**DUNGAN:** Thank you.

**JOEY RUFF:** Yeah.

**LINEHAN:** Thank you, Senator Dungan. Are there any other questions from the committee? Seeing none, thank you much for being here.

**JOEY RUFF:** Yeah, thank you.

**LINEHAN:** Next proponent. Don't be shy.

**KAREN BOWLING:** Good afternoon, Senator Linehan and members of the Revenue Committee. My name is Karen Bowling, K-a-r-e-n B-o-w-l-i-n-g, and I serve as the executive director at Nebraska Family Alliance, a nonprofit policy research and education organization. And we represent a diverse statewide network of thousands of individuals, families, and faith leaders. LB606 encourages increased private contributions to pregnancy help organizations in Nebraska through the creation of a tax credit. This will provide greater support to pregnant and parenting women in need. The 25-plus pregnancy help organizations, I'm going to refer to them as PHOs, in Nebraska serve under-supported pregnant women and anyone who walks through their doors. They provide prenatal care as well as afterbirth care, some up to 24 months post birth. PHOs are local, community-based not for profits who exist to provide care and resources to assist women with immediate and ongoing needs related to pregnancy. They empower women providing personalized care within a respectful, compassionate, and supportive environment by trained staff. You've heard from some of them. Of note, in 2021, nationally, there were approximately 30,000 pregnancy center locations in the U.S., including the medical mobile units, as is counted as separate locations. So you've heard from Nebraska PHOs, but I want to talk about the national data, too. From 219 [SIC] shows that PHOs served close to 2 million people that year with services and material assistance with a total value of over \$266 million. Some of the highlights from the 219 [SIC] findings for 2,700 centers in the U.S. show that 486 free ultrasounds were performed, 291 clients attended parenting and prenatal classes, and 2,525 locations offered material



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assistance. Consistently, high client satisfaction rates are reported. Women, men, and youth who visit centers feel respected, valued, and well cared for. In a recent Lozier Institute, the rate of approval is from 99.1 to 99.6 percent. With over 25 pregnancy organizations in Nebraska who provide essential and professional care in virtually every type of community, rural, urban, college settings, and even mobile medical units, they are a bright light of compassionate care. Nebraska Family Alliance applauds the amazing work Nebraska pregnancy help organizations do and we're thankful that Senator Albrecht brought-- brought LB606 and we encourage the Revenue Committee to move to General File. Thank you for your time and I'll take any questions.

**LINEHAN:** Thank you very much. Are there any questions from the committee? Seeing none,--

**KAREN BOWLING:** Thank you.

**LINEHAN:** --thank you very much for being here. Are there other proponents? Good afternoon.

**SANDY DANEK:** Good afternoon. Thank you for allowing me to be here. My name is Sandy Danek and I am the executive director of Nebraska Right to Life. And I'm here today to give our support to LB606, the Nebraska Pregnancy Help Act. Pregnancy help organizations are critical to women and families in an unplanned pregnancy. Since the 1960s, these not-for-profit organizations have provided care and assistance to women with immediate and ongoing needs related to unexpected pregnancy. They discuss with their clients alternatives to abortion offering life-affirming options, supporting women with compassionate care, and enabling them to welcome their babies with joy. Services are made available usually at no cost to the women and men they serve and are generally funded by private donors. As you have heard already from the organizations themselves, they offer a range of services from ultrasounds and pregnancy testing to options of counseling and classes for parenting and adoption. However, I would like to focus my comments on the lesser known services they provide, that being counseling and resources to women and their families who suffer from post-abortion syndrome. Many of the women who seek the services of a pregnancy help organization will go on to either parent or consider adoption but some will go on to have an abortion. Regardless of whether a woman has received counseling prior to an abortion, she is welcomed to partake in post-abortive services. By providing a holistic health approach, these help organizations will acknowledge and give support to the women, men, and families who suffer from the trauma of abortion by offering emotional, social, mental, and spiritual support. Abortion

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affects more than 2,300 women every day in our country. The psychological and physical consequences of the decision to abort may not be evident by all and is not always immediately visible. Some will not experience symptoms for weeks, months, or even years later. However, the problems that can arise in the aftermath of an abortion are real. By validating the client's feelings of regret and anxiety, these trained workers can provide essential care to those suffering a great number of issues surrounding the post-abortion experience. We applaud the work of the many pregnancy health organizations throughout the state and enthusiastically support the tax credits that would be made available with the passage of LB606.

**LINEHAN:** Thank you very much.

**SANDY DANEK:** Thank you.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you--

**SANDY DANEK:** Thank you.

**LINEHAN:** --very much. Next proponent. Clerk. It's confusing.

**STEPHANIE JOHNSON:** Sorry.

**LINEHAN:** No, you're fine. You're fine.

**STEPHANIE JOHNSON:** My name is Stephanie Johnson, S-t-e-p-h-a-n-i-e J-o-h-n-s-o-n, and I am the executive director for Nebraskans for Founders Values here in Nebraska. And we're a grassroots organization, guardians of the First and Second Amendment and our constitutional right, so. I have a little different perspective, I guess, I had something prepared but I'm just going to switch it up. As a young girl, as a student at UNL, I experienced both opportunities with two unplanned parent-- unplanned pregnancies, my husband and I, while I was a junior at UNL and a senior at UNL. And when I was a junior at UNL, and I graduated in four years along with my master's degree two years later, but when I was a junior, I-- we found ourselves pregnant unexpectedly and I went to Planned Parenthood because that's where all my friends had gone when they had issues that arose or they needed birth control. And I'm not going to, you know, say it was a terrible experience at all, but I was just very shocked to, to have been given the opportunity to abort my baby as my first option. That's just the truth of what happened. Obviously, I kept my baby girl. She's now-- I'm a grandma now. She just had a baby 18 months ago, ago. And then a year later, I found myself pregnant again as a senior at UNL. And I

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went to a pregnancy health center this time just to confirm that I was, in fact, pregnant, because it was really like, oh, my goodness. And I had a very different story, a very different set of circumstances as far as the reaction and then the follow-up and the help that I received from them. It was more that I had been given an option to all the options, all the options, what I could do with my baby. And then also car seat, clothes, help with getting a doctor, help with daycare for the baby that I had. I was a student, you know, so it just-- there were, there were lots of layers of support that I received in comparison than what I had gone through the year before. Obviously, kept my baby. Now, I had a boy and a girl. And so I just want you to know there are people like me out there who decide to keep their babies and that we need all the options for people like me and women like me who want and need and deserve to have extra layers of support, kind of follow-up care. And it all, as, as a citizen of the state of Nebraska, I feel that given an opportunity to get a, to get a tax credit to, to give to organizations like this, it, it should just be a no-brainer. It should just be a no-brainer. So I just support this bill and I would please ask that you send it on and vote it out of committee.

**LINEHAN:** Thank you.

**STEPHANIE JOHNSON:** Thank you so much.

**LINEHAN:** Thank you. Thank you. Wait, wait.

**STEPHANIE JOHNSON:** Oh, OK.

**LINEHAN:** I don't know if we'll have questions, but--

**STEPHANIE JOHNSON:** Yep, sorry.

**LINEHAN:** --part of the process. Do we have any questions? Senator Murman.

**MURMAN:** Yes. Thanks for testifying.

**STEPHANIE JOHNSON:** You're welcome.

**MURMAN:** How did you get better services at the pregnancy health center than at Planned Parenthood?

**STEPHANIE JOHNSON:** It was just a very different procedurally as far as even just going in and where we met, how many people I was able to see at Planned Parenthood. I saw, like, two. I, I saw two people. And then

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at the other private health center, I, I saw somebody-- I saw, like, three to four people just based on different follow-up things and coming back. I, I, I was able to get-- right away, I left with help for the child that I already had at home because that was something that they could give me. I went into a room where they had, like, supplies and diapers and things like that. I was not expecting that. And then just, I guess, you could say the depth of the questions of just getting to know, like, more about who I was and what I needed, not just kind of a solution to it, to it at that point in time, if that makes sense.

**MURMAN:** Sure.

**STEPHANIE JOHNSON:** More of a long term, how can we help you get through school? Things like that, so.

**MURMAN:** Thank you very much.

**STEPHANIE JOHNSON:** Yeah.

**LINEHAN:** Thank you, Senator Murman. Are there any other questions? Seeing none, thank you very much for being here.

**STEPHANIE JOHNSON:** OK. Thank you.

**LINEHAN:** Other proponents? Hello.

**MARION MINER:** Good afternoon, Madam Chair Linehan, members of the Revenue Committee. My name is Marion Miner, M-a-r-i-o-n M-i-n-e-r. I'm associate director for Pro-Life and Family Policy at the Nebraska Catholic Conference and I'm here to express the Conference's support for LB606, the Nebraska Pregnancy Help Act. Since before the founding of the nation, the Catholic Church in the United States has developed and run countless ministries to help those in need. In Nebraska, many of these ministries are local and parish-run, such as countless Saint Vincent de Paul societies in our parishes that give direct financial assistance to those who need help. Catholic Social Services in the Diocese of Lincoln and Catholic Charities in the Archdiocese of Omaha for their part provide food, clothing, immigration services, refugee resettlement, shelters for women experiencing domestic abuse, professional counseling, etcetera, much more. The church in Nebraska, as well as nation and worldwide, has also developed many ministries especially for expectant mothers and those who find it difficult to care for their children after they are born. All these ministries are an integral part of building a culture of life. One of the most rapidly growing of these ministries is "Walking with Moms in Need," a

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parish-based ministry sponsored by the USCCB to help open the eyes of parishioners to pregnant and parenting moms in their communities, helping them to respond to Pope Francis' challenge to parishes to be, quote, islands of mercy in a sea of indifference, close quote. The reason I mention all of this is because one of the chief partners for the "Walking with Moms" ministry is the network of good pregnancy help organizations that exist throughout the country and the state of Nebraska. Catholic parishes and Catholic social service agencies cooperate often with these organizations. Many of the women who come to PHOs asking for help have been referred by Catholic parishioners or social service agencies. Local Knights of Columbus councils often raise the money to buy the ultrasound technologies in many of these PHOs across the country. Pregnancy help organizations enable mothers to look to the future with hope and to help build a society where a woman never feels helpless tension between her own future and the life of her child. Their work for women and children will only become more important in a post-Roe world, and they are vital partners in building this culture of life across this whole network of social services agencies and organizations that are meant to support them in times of need. So for all these reasons, we urge the committee to advance the Pregnancy Help Act to General File. Thank you.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you very much for being here.

**MARION MINER:** Thank you.

**LAURA BUDDENBERG:** Are there other proponents? Good afternoon.

**MERLYN BARTELS:** Good afternoon, Senator. My name is Merlyn Bartels, M-e-r-l-y-n B-a-r-t-e-l-s. And as I was sitting back there listening to all the other people talk here, I didn't realize there were so many organizations that were PHO's in this state, I guess. I'm originally from central Nebraska and I knew about the one there in Kearney and Grand Island, but I didn't realize there were so many other organizations that work in that area. But, I guess, I'm going to come at this from a little bit of a different area here. I do support this bill because I feel that with the tax credits being offered to the people through their private donations, it would be-- help relieve some of the cost to the taxpayers. I also feel that even though our state agencies and programs are doing as good as they can, we all know that most of them are overloaded with cases. And I feel like that if we could put this program to the private organizations more that are already involved in helping the women, they could do much more if they knew more money would be available to them. Because I feel like if

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people can receive a tax credit, they might be more willing to give. I also believe with private organizations, they also might have more time to spend with their clients and they maybe could be a little more flexible in meeting the needs of the women and the families, possibly including the option of adoption if the family or the lady feels like she couldn't keep that baby. And I feel like that if the state sets up a tax credit program, maybe it'll become more widely known what these organizations are doing and more people would respond to it. Like I said, I was amazed at how much is really going on and how many organizations in the state are available to help these women so it was a learning experience for me today. Thank you for your time.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you for being here.

**MERLYN BARTELS:** Thank you again.

**LINEHAN:** Are there any other proponents? Any other proponents? OK. Opponents? Good afternoon.

**JOEY ADLER RUANE:** Good afternoon, Chairperson Linehan and members of the Revenue Committee. My name is Joey Adler Ruane, J-o-e-y A-d-l-e-r R-u-a-n-e, and I'm the policy director at OpenSky Policy Institute. I'm here today to testify in opposition to LB606 for a couple of reasons. Specifically, OpenSky doesn't support giving preferential tax treatment to some types of donations over others and we're concerned about the cost, as other states with similar incentives have seen dramatic drains on state resources. First, we generally oppose the creation of new tax credits, especially ones that lack a dedicated revenue source and lack solid data backing them up as a good investment of state dollars. Tax credits are a type of tax expenditure funded by reducing the amount of tax revenues that the state collects, meaning they sidestep the appropriations process. Many tax credits, including the one that would be created here, don't sunset. Instead, will continue until the Legislature takes further action, which could take years or never happen at all. Tax credits can, therefore, run on autopilot with many having norm-- no formal review mechanism to ensure they're still working toward their stated policy goals. If such measures were proposed as appropriations, they would be reviewed biennially and adjusted to ensure funding for such initiatives is a good investment of Nebraska tax dollars. In this case, we would also question whether this is a good use of state dollars as there isn't a solid body of evidence showing any potential return on investment or significant increase in public health. Second, we have concerns about the specific structure of this credit, in particular, as it would give

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taxpayers who donate to pregnancy care centers a nonrefundable income tax credit equal to their donation, so long as it isn't more than half of their total liability, which the state hasn't done for any other types of charitable donations. That would mean a taxpayer could get a \$10,000 tax credit if they made a \$10,000 donation to such a center so long as they owed at least \$20,000 in income taxes. That same donation for any other nonprofit would only warrant a tax deduction of \$664, assuming the taxpayer paid at our top income tax rate. Finally, we're concerned about the cost to the state given other states' experiences with this type of credit. For example, Missouri has gone-- Missouri has had a program like this since 2006, although it's been revised a few times, including a significant expansion in 2017, a full examination of the benefit cap in 2021-- or a full elimination of the benefit cap in 2021. Eliminating the cap dramatically increased the amount of tax credits claimed in the first quarter of 2022, when they jumped from about \$1.1 million to over \$7 million. That's nearly a 550 percent increase. While we appreciate that Nebraska proposed legislation has a cap at \$10 million, there are no guarantees that the cap will stay in place and we see, and we will see a similar jump in revenue loss due to the credit. It's for these reasons we oppose LB606, urge the committee not to pass it, and I'd be happy to answer any questions.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you.

**JOEY ADLER RUANE:** Thank you.

**LINEHAN:** Other opponents? Welcome.

**CLAIRE WIEBE:** Thank you. Good afternoon, Chairperson Linehan and members of the Revenue Committee. My name is Claire Wiebe, C-l-a-i-r-e W-i-e-b-e, and I am a senior manager of public affairs at Planned Parenthood, North Central States. At Planned Parenthood North Central States, we provide, promote, and protect sexual and reproductive healthcare through high-quality care, education, and advocacy. Our organization covers five states, so Nebraska, North Dakota, South Dakota, Iowa, and Minnesota. We strongly oppose LB606, which seeks to divert taxpayer dollars to reimburse private donors for their support of anti-abortion centers. When Nebraskans are fully informed about their options for reproductive healthcare, they can make the best decisions for their lives and their futures. Unfortunately, those who are opposed to abortion have developed a national network of anti-abortion organizations called Crisis Pregnancy Centers, or anti-abortion centers that restrict, control, and manipulate the

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information people facing unintended pregnancies receive. I'll let my colleagues at the ACLU follow-up on some of the statistics around Crisis Pregnancy Centers in our state, but I really wanted to focus on some of the stories from our health centers. Crisis Pregnancy Centers use false and misleading advertising in an, in an attempt to confuse and misdirect Nebraskans seeking healthcare, they'll often mimic the colors, the fonts, and the images used by real health centers like ours to provide-- that provide ethical care. They deliberately set up shop next to Planned Parenthood health centers, including in Omaha and Lincoln. And as a result, we regularly hear stories from patients about their experiences with CPCs. So some of the stories from our health center staff a month or so ago, a patient came in that had gone to a CPS, there she had had an ultrasound and chlamydia and gonorrhea testing. She was told they would only give her the results of her STI test if she went back in person. Withholding that test could be potentially dangerous to a possible pregnancy. Chlamydia can cause premature rupture of membranes, low birth weight, and all sorts of other complications in pregnancy. Several patients have told our staff they went to a CPC thinking they were a comp-- a comprehensive healthcare provider. They were told they could schedule an abortion, but only after they had STI testing and gotten the results back. That's a commonly used tactic-- tactic to waste time and potentially push a patient past the limit for an abortion. Finally, patients regularly come to us after receiving an ultrasound at a CPC and learn, too, they were lied to about where they were in their pregnancy so maybe they were told they were too far along to make the decision to have an abortion in Nebraska or they were earlier in their pregnancy than they thought which takes away the time to make the decision. So we are opposed to the bill. We ask that the committee not support it.

**LINEHAN:** Thank you very much. Are there questions from the committee?

**CLAIRE WIEBE:** Yeah.

**LINEHAN:** Senator Murman.

**MURMAN:** Do you know how much federal funding or how much funding you get through taxpayer funding?

**CLAIRE WIEBE:** Yeah, I can't answer that question directly. I'm not sure, like, what the number is, but we're like any healthcare center that receives Medicaid reimbursement just like any other healthcare center.

**MURMAN:** Thank you.



**CLAIRE WIEBE:** Yeah.

**LINEHAN:** Thank you, Senator Murman. Other questions? I, I think--

**CLAIRE WIEBE:** Yeah.

**LINEHAN:** --maybe I'm wrong, isn't there a federal appropriation for Planned Parenthood?

**CLAIRE WIEBE:** In some states, Planned Parenthood does receive some Title X funding, but there's no, like, separate funding program outside of, like, the Medicaid reimbursements and Title X funding for Planned Parenthood to my knowledge, but I am not at all an expert in our funding, much more in the advocacy space, so. Yeah, we can follow-up about that.

**LINEHAN:** Thank you very much.

**CLAIRE WIEBE:** Yeah, absolutely.

**LINEHAN:** Any other questions?

**CLAIRE WIEBE:** Yeah.

**LINEHAN:** Senator von Gillern.

**von GILLERN:** Thank you for being here. If a, if a woman comes into Planned Parenthood clinic and says that-- and finds that she's pregnant but she chooses to keep the baby, is there any ongoing long-term relationship with that woman? What-- from there forward, what happens there?

**CLAIRE WIEBE:** Yeah. So many of our patients do choose to continue their pregnancy, and if that choice is made, we don't offer prenatal care. We don't do that, but we do refer out to folks in our community who can provide those services. So making sure that we're also referring out to, to folks that will provide people all of the options that they need and all of the information that they need to make those decisions. We can also do things like helping folks sign up for Medicaid if that's something they need, and providing options for mental health resources, if that's something they need, all of those options exist and we can refer out for those. Yeah.

**von GILLERN:** So if those-- knowing that those options exist through some of the organizations that have testified here today, would you ever refer to any of those organizations?

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**CLAIRE WIEBE:** Not to my knowledge, no.

**von GILLERN:** OK. Thank you.

**LINEHAN:** Thank you, Senator von Gillern. Are there any other questions from committee? So you don't-- following up and those are very good questions, Senator von Gillern-- so you don't have options-- when you say you sign them up for Medicare or Medicaid, excuse me, don't you sign them up for Medicaid anyway if they're going to get services from you?

**CLAIRE WIEBE:** Yeah, we want everybody to be insured so, yeah, absolutely.

**LINEHAN:** OK, that's what I thought. OK. Thank you very much.

**CLAIRE WIEBE:** Thank you.

**LINEHAN:** Hi.

**MINDY RUSH CHIPMAN:** Good afternoon. My name is Mindy Rush Chipman, M-i-n-d-y R-u-s-h C-h-i-p-m-a-n, and I'm here on behalf of ACLU of Nebraska in opposition to LB606. As we just heard, LB606 aims to provide tax credits to those who donate to pregnancy help organizations, which are also called anti-abortion clinics or sometimes called Crisis Pregnancy Centers or CPCs for short. These facilities often are disguised as medical clinics. They provide counseling designed to discourage or prevent people who are pregnant from accessing abortion care. Many of these centers are affiliated with national anti-abortion organizations or evangelical Christian networks. They do not offer abortion care or referrals to abortion providers, nor do they offer access to contraception. Even though most of these centers are not actual medical clinics and are rarely staffed by medical professionals, it is common for these facilities to model themselves after medical facilities with ultrasound machines, staff that wear white coats, medical sounding names, and medically similar professional websites. Importantly, however, HIPAA laws that protect patient information only apply to medical clinics and providers. Therefore, information shared with these facilities is not protected and not required to be treated as confidential. Ultimately, the tactics used by anti-abortion centers interfere with individuals' abilities to access healthcare, such as contraception and abortion, and with the relentless efforts to push abortion reach out of care, access to time sensitive abortion care is as critical as it has ever been. The ACLU released a report in May of 2022, which is in front of

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you, and it details common practices of these centers in Nebraska. The report reviewed the websites of 16 organizations that were operating these centers across Nebraska and identified several common themes. What we found is that many of the centers provide medically inaccurate information on their websites about abortion and use deceptive tactics to discourage or prevent pregnant Nebraskans from accessing abortion care. For example, some of the web-- websites recommended that abortion procedures should be delayed because a patient may have an early miscarriage. Two of the websites claim abortion care can lead to a patient's death. And while most of the websites claim center staff will advise visitors of every option, only one of the websites clearly disclosed that it was not a medical facility. The report also highlights an example of Jennifer, a Nebraskan who visited an anti-abortion clinic when she suspected she was pregnant, and the center told her she was a full month later along than she actually was. Ultimately, given what we know about the common practices of these centers, including providing false and misleading information, offering tax incentive for these centers to receive more funding is extremely concerning and must be rejected by this committee. As such, we urge the committee to indefinitely postpone LB6--

**LINEHAN:** Thank you. Thank you. Are there any questions from committee? Senator von Gillern.

**von GILLERN:** Thank you for your testimony today. Your-- in your testimony you say that CPCs interfere with individuals' ability to access healthcare. The previous testifier said that often these clinics are next door to one another. How does that interfere with one's ability to go through one set of doors or another set of doors?

**MINDY RUSH CHIPMAN:** The example that is highlighted in our report is just one kind of example where a visitor to a anti-abortion clinic is going to be given misleading information, which then could prevent them from actually accessing care at a medical clinic. For example, Jennifer, in the story, was told that she was a month later along in her pregnancy and so receiving that type of false information can lead to somebody ultimately not being able to access a healthcare facility to receive abortion care.

**von GILLERN:** OK. And, and one other question. You also stated that two of the websites claim abortion care can lead to a patient's death. Has an abortion ever led to an individual's death?

**MINDY RUSH CHIPMAN:** Abortion is much safer than actually bringing a pregnancy to full term.

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**von GILLERN:** I'm sorry, that was not my question.

**MINDY RUSH CHIPMAN:** I'm not a doctor, so I can't answer that question.

**von GILLERN:** You don't know of any case where an abortion has ever led to the death of the mother?

**MINDY RUSH CHIPMAN:** I'm sure that there are cases just as if childbirth leads to the death of the mother.

**von GILLERN:** OK. Thank you.

**LINEHAN:** Thank you, Senator von Gillern. Are there other questions? You probably aren't an expert on federal funding either are you?

**MINDY RUSH CHIPMAN:** I'm not.

**LINEHAN:** All right. Thank you very much.

**MINDY RUSH CHIPMAN:** Thank you so much.

**LINEHAN:** Other opponents?

**NYOMI THOMPSON:** Good afternoon, members.

**LINEHAN:** Yes.

**NYOMI THOMPSON:** Oh, OK, we're good.

**LINEHAN:** No, you're fine.

**NYOMI THOMPSON:** All right. Good afternoon, members of the Revenue Committee. My name is Nyomi Thompson. That's N-y-o-m-i T-h-o-m-p-s-o-n, and I'm representing I Be Black Girl. We serve as a collective for black women, femmes, and girls to actualize their full potential to authentically be through autonomy, abundance, and liberation. We are a reproductive justice organization that centers black women, femmes, and girls because when we do everybody benefits. I'm testifying in opposition to LB606 because it takes away Nebraskans' power over their bodies while limiting healthcare access. Crisis Pregnancy Centers mislead individuals in the decisions on what's best for their bodies and families. Designed by the pro-life movement, almost two-thirds of these centers are reported to promote misinformation, to pressure those seeking pregnancy options to carry unwanted pregnancies to term. These centers have been found to have five times the funding of true healthcare centers and providing incentives to fund them are a misallocation of resources and

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perpetuate the already existing disparities in healthcare access and outcomes. Funding and support should go to legitimate healthcare centers and nonprofits that honor a person's bodily autonomy. Crisis Pregnancy Centers disproportionately affect the social and autonomous power of black individuals, and as a parent takes away from the economic control we are entitled to. Crisis Pregnancy Centers are portrayed to center the pregnant person when in reality these centers all reported to receive funding from predominantly white individuals who do not support reproductive rights and encourage government overreach on human rights. In addition, the persuasion to keep an unwanted pregnancy has economic cost to those who do not have the means to pay for the procedure required when convinced to keep the pregnancy for a prolonged period of time. Public taxpayer dollars are obligated to go to promoting public health, yet Crisis Pregnancy Centers exist to deter people from accessing the reproductive healthcare they choose and are entitled to. Providing incentive to continue funding a legitimate reproductive healthcare center is not only immoral, but significantly impacts the socioeconomic liberation of Nebraskans who are continuously disregarded in legislation that is prioritized by this legislative body. We push you to respect the choice and autonomy of birthing folks residing in Nebraska and stop LB606 from moving forward in the legislative process. Thank you for your time.

**LINEHAN:** Thank you very much. Are there questions from the committee? Senator Murman.

**MURMAN:** Thank you for your testimony. Do you know the percentage of black babies that are aborted compared to white babies?

**NYOMI THOMPSON:** I do know that-- I'm going to have to get back to you on that one. When it comes to the numbers, I'm unsure.

**MURMAN:** I'd appreciate it.

**NYOMI THOMPSON:** Yeah, I will.

**MURMAN:** Thank you.

**LINEHAN:** Thank you. Are there any other questions? Seeing none, thank you very much for being here.

**NYOMI THOMPSON:** Thank you.

**LINEHAN:** Appreciate it.

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**ERIN FEICHTINGER:** Hi. Chairperson Linehan, members of the Revenue Committee, my name is Erin Feichtinger, E-r-i-n F-e-i-c-h-t-i-n-g-e-r. And because I had to spell that long last name, I'll keep my testimony brief. I am the policy director for the Women's Fund of Omaha, and it is our belief at the Women's Fund that all Nebraskans deserve the right to determine for themselves if, when, and how to start a family. We are here in opposition to LB606. I don't want to be repetitive so a few things that we haven't heard yet. In Nebraska, anti-abortion centers outnumber licensed abortion clinics, places that offer comprehensive medical care based on science and research eight to one. Nationally, anti-abortion senators-- centers are funded at five times the rate of healthcare centers dedicated to ensuring abortion access. So that's \$278 million, compared to \$56 million from 2015 to 2019. And Nebraska has planned to allocate \$9 million of our Temporary Assistance for Needy Families funds, or TANF, if you've heard that, to supporting anti-abortion centers. So we're already using public dollars to subsidize these centers. In a recent issue of the Unicameral Update, and, yes, I do read it for all of your interviews, Senator Sanders was quoted as saying: When someone complains that pro-life senators don't care about the mother or baby after birth, I respectfully disagree. This is not the bill to take care of mothers and babies. If Nebraska wants to support pregnant people and their babies in the state, particularly those who are low income, there are several bills this session that I think deserve more of our attention than LB606. LB294 and LB295 were both heard in this committee, the child tax credit and the earned income tax credit. LB58 as well was heard in this committee, the sales and use tax exemption for diapers. LB333 to increase Medicaid for family planning services. LB57 for family medical leave so parents can spend time with their babies. LB35 to extend the sunset on childcare subsidies and LB84 to do the same for SNAP. All the bills to increase the Aid to Dependent Children program like LB310, LB290, LB233. LB763 to increase the capacity of food pantries or any of the bills to increase housing stability across our state. Pregnant Nebraskans deserve compassionate healthcare that is free from coercive practices and based in medically accurate research. And we would urge this committee to oppose LB606 and I'm happy to answer any of your questions to the best of my abilities.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you much. Other proponents, excuse me, opponents?

**CARINA McCORMICK:** Hi, my name is Carina McCormick, C-a-r-i-n-a M-c-C-o-r-m-i-c-k, and my salutation is doctor. I did a lot of research before this about the dangers and risks and utter lack of-- well, not-- I'll take out the utter, largely lack of value of these

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centers and that's what I was planning on talking about. However, I've changed my mind about the point of my testimony. I heard the people talk about the great care that they got. I heard churches, notably churches, religious organization talk about how important these are to their mission. OK, sure, let's pretend that that's all true. I'm willing to do that. You know, it's funny, my husband is an immigrant and his English was so good so I actually haven't got to teach him very much English. One English phrase I did teach him, though, was "be that as it may," which is, OK, I'm willing for the sake of this argument to pretend that it's true, let's move forward. So be that as it may. So what, we have so many really good nonprofit organizations in this state operating. We have a lot that are centered in this state, unlike a lot of these national pregnancy help centers that come in and it doesn't actually matter that some people came here and said, OK, these do good work. We have to apply the standard of out of all nonprofit organizations in the entire state, do these pregnancy help centers alone deserve to be pulled out and eligible for additional tax credits? Like, I know Senator von Gillern is very involved in the Boy Scouts. That's a nonprofit organization. I sat in that hearing and I heard people talk about all the great work that the Boy Scouts and Girl Scouts do. And I was very moved by that. How come these pregnancy centers should get more than the Boy Scouts and Girl Scouts? And I didn't go and look at all of your nonprofit credentials, but I know that almost every senator is involved with at least one nonprofit organization. And this particular bill says that these-- basically says that these pregnancy help centers are more important than all of the organizations that you're on the boards for or donate for, because all of-- all nonprofit organizations are already eligible for tax donate-- tax deductions. But instead, this bill makes tax-- pregnancy help centers a whole other category of tax credits. And I don't think that is fair to the good work that's done by all the other nonprofit organizations and all the hardworking people on the local boards of these nonprofit organizations, especially those that are centered in Nebraska to prioritize these help centers that have dubious good that's done by them, even if everything those people said was true, which I don't believe it is.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you for being here. Next opponent.

**SHIRLEY NIEMEYER:** I am Shirley Niemeyer, S-h-i-r-l-e-y N-i-e-m-e-y-e-r, and on LB606 I support all the work that the nonprofits are doing now. The help to families who are low income and poverty and the children. That's important. I just gave to one of the nonprofits that's connected with a religious center, and I support

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almost everything in here except the need for all nonprofits to recognize we need total education. You know, it sounds like we're limiting what kind of education we can provide-- I'm representing myself-- and I also wonder about separation of church and state. I'm not saying everybody that is opposed to abortion in a nonprofit is connected to a religion, but some of them are. And so I think the separation of church and state is important to think about in this situation in terms of the tax credits and as-- we already get tax credits if that nonprofit is associated with a foundation. So that would be one thing to connect. I think the, the wording, you cannot discuss abortion, make a referral, and so on. Can't even talk about it. Well, number one, how are you going to police that? It's probably a very private conversation. And number two, why can't they say, well, our philosophy is we don't support abortion but, however, you can get information from this, this, and this? I don't understand that because we have the right of free speech. And so we don't understand some of the situations that women get themselves into because of rape, abuse. Children age ten on record have become pregnant. Age 10, 11, 12. They're not capable-- their bodies are barely capable of supporting a pregnancy. So if you look at, if you look at Texas and what's happened in Texas, I've read about the doctors who have trouble making choices, they're feared they're going to get sued. And so some of the patients are ending up in emergency rooms, toxic, sepsis because the doctor didn't want to talk about it. And they said, well, wait until you're-- some have even said wait until you're septic. So I think there's a whole background on this that needs to be considered more than are you pro or con of abortion. With that, I thank you very much and appreciate your work.

**LINEHAN:** Thank you. Are there any questions from the committee? Seeing none, thank you much for being here.

**SHIRLEY NIEMEYER:** Thank you.

**LINEHAN:** Other opponents? Are there any other opponents? Anyone wants-- wanting to testify in a neutral position? Neutral? Senator Albrecht, would you like to close? Let me figure out the letter situation here for the record. We had 83 proponents, 75 opponents, and no one was neutral.

**ALBRECHT:** Senator Linehan, colleagues, thank you for taking the time to listen to LB606. You know, I really appreciate the proponents and the opponents that came to speak. I think it helps us understand the, the plethora of opportunities out there for women. But I think it's most important to acknowledge that these are not state funds that are



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going to these folks. LB606 is about private funding from businesses, individuals. You know, it's their choice. If they owe \$20,000 and they want to send \$10,000 to their charity of choice they'll be able to do that. And the Revenue Department will make sure, they'll be vetting these people, whether they're religious or not would not have anything to do with that because it isn't state dollars that are funding them. So with that, I hope you'll support LB606 out of committee and thanks for listening. Any questions?

**LINEHAN:** Thank you, Senator Albrecht. Do we have any questions from the committee? With that, we'll bring the hearing of LB606 to a close. Thank you. Hello, Senator Slama, how are you?

**SLAMA:** Oh, I am loving life, Chair Linehan.

**LINEHAN:** We are--

**SLAMA:** Rolling.

**LINEHAN:** --open this hearing on LB213.

**Speaker 3:** There was no.

**Unidentified:** One else to.

**Speaker 7:** I know how it goes.

**SLAMA:** All right. Hi. We'll give them a second.

**LINEHAN:** Yeah.

**SLAMA:** It's just Friday.

**LINEHAN:** It is, it's going much better than [INAUDIBLE].

**SLAMA:** I've got a busload of people just waiting to testify on this outside. [LAUGHTER] I'm too scared of you to pull that. OK. Good afternoon, Chair Linehan and members of the Revenue Committee. My name is Julie Slama, J-u-l-i-e S-l-a-m-a, and I represent District 1 in southeast Nebraska. I'm here today to introduce LB213. To start, the pages have just passed out a possible amendment to this committee, AM407. Initially, LB213 included measures to reduce the rural workforce housing match from .5:1, so a 50 percent ratio to a .25:1, 25 percent housing match. This is targeted towards cities of the second class and villages who might not have the resources to really take advantage of these matching funds. And this is just a proposal of

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if there's a compromise needed to get this out of committee and onto the floor, I'm willing to go in that direction. I'd like to see the housing language stay. But if it needs to go for the sake of a fiscal note or any other reason, I'm willing to move in that direction. The main focus of LB213 is the Nebraska Job Creation and Mainstreet Revitalization Act renewal. LB213 was inspired by my summer tour of every community in District 1, all 37 of them. Every village and town had at least a handful of highly motivated people who wanted to grow and improve their hometown. I pointed them towards our current rural economic development programs. But these programs are often built to serve larger cities in rural areas that have a full-time economic development director and strong private investment. However, our smallest towns are the ones that are most in need of these programs that helps to revitalize and rehabilitate communities. For context, the Nebraska Job Creation and Mainstreet Revitalization Act established the Nebraska Historic Tax Credit in 2015 for investment in the rehabilitation of historic buildings or buildings that contribute to a historic district. The NHTC allowed for a state income tax credit on 20 percent or less of the eligible costs associated with renovating a certified historic structure, which is what most of the downtowns and main streets of our rural communities are made of. Unfortunately, during the 2022 Nebraska legislative session, we failed to renew this program. State historic tax credits have been shown to be effective at promoting both economic growth and historic preservation in small communities. Such credits are available in more than 30 states, most notably in states bordering Nebraska. The NHTC has played a crucial role in the rehabilitation of more than 50 income-producing historic buildings around the state over the past seven years. Most of these historical structures would still be abandoned or would have been destroyed if not for the NHTC, which helps to reduce the financial risk associated with repairing a historic building. And just for context, in our smaller towns, business owners look at potentially taking on the storefronts or the historic building on Main Street. But then they start digging into the potential issues with that building, it's normally over 100 years old, and they decide not to pursue that option. They decide to go elsewhere or not have a brick-and-mortar storefront at all. This NHTC tax credit helps alleviate some of those concerns, alleviate some of those unexpected costs. According to a program report from the University of Nebraska, the following things happened as a result of the NHTC between 2015 and 2020: the direct employment of 1,900 full-time workers, the indirect employment of an additional 1,100 full-time workers, \$102 million in wages paid to employees, an increase of \$9.5 million in local and state property taxes was collected due to these projects, and nearly 100 historic

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buildings were restored. In closing, this program not only makes financial sense, but it also protects Nebraska's unique cultural history for future generations to enjoy. The NHTC makes restoring and reusing these unique historic buildings a feasible alternative to neglect and demolition. Thank you very much and I'd be happy to answer any questions you may have.

**LINEHAN:** Thank you, Senator Slama. Are there any questions from the committee? Seeing none, thank you.

**SLAMA:** Thank you very much.

**LINEHAN:** First proponent.

**TOMAS WEEKLY:** Are we doing three or five minutes for this?

**LINEHAN:** Is three OK or--

**NICOLE SEDLACEK:** Yes.

**LINEHAN:** [INAUDIBLE]. [LAUGHTER] I know it's Friday for everybody.

**NICOLE SEDLACEK:** Yes, it's Friday, and I-- it's been a long week--

**LINEHAN:** Do you want it one?

**NICOLE SEDLACEK:** --for you all. Yeah. So good afternoon, Chair Linehan and members of the Revenue Committee. My name is Nicole Sedlacek. That's N-i-c-o-l-e S-e-d-l-a-c-e-k, and I'm here on behalf of the Nebraska Chamber of Commerce and serve as the economic development policy chair on the board. The Nebraska Chamber of Commerce establishes committees based on areas important to Nebraska's businesses, large and small, urban and rural. And it's no surprise that economic development would be one of those priority areas for the State Chamber. Earlier this year, our Economic Development Council explored which legislative proposals would make our communities more stronger, more vibrant, and better for our businesses and the Nebraskans that truly-- that they employ. Senator Slama's bill, LB213, is one of those bills that our council and, and then the chamber board ultimately voted on to support this legislative session. As a statewide organization, we believe that this bill would provide an incentive for our smaller communities to continue revitalizing their main street areas. Anyone who has been in a small town, you know that main streets are the economic engine and often the core of a rural community. It's one of the reasons that my family and I, we actually took a leap of faith and purchased a business in downtown O'Neill in

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the fall of 2020. Crazy time to buy a business, but, but it was a leap of faith and we really, truly believe in, in that, that community, that, that downtown communities have. Providing a tax credit to help cover 20 percent of the expenditures up to a million in credits will allow communities to modernize and grow. And sometimes it really takes that one person, that one investor, one developer to really start a, a transformational change to a downtown to help bring life back into a, a community like an O'Neill, a Chadron, whatever it may be. Downtown commercial corridor revitalization can support rural recovery and resilience. The Brookings Institute did a, a five-part study on main streets and their roles in economic recovery in, in rural America. They really help create an ecosystem for small business survival, growth, and development. They include quality-of-life improvements that contribute to health and resilience of a community, and they often help enhance local capacity to be independently resilient. Should LB213 advance out of committee, our small towns will have more of an ability to make these changes and enhance their communities, all while reaping benefits in the process. And for this reason, that's why the, the State Chamber, the Nebraska Chamber supports LB213. I'd be happy to answer any questions that you may have. Thank you.

**LINEHAN:** Thank you very much. Are there any questions from the committee? Seeing none, thank you very much for being here. Other proponents?

**JILL DOLBERG:** Oh, this is lower than I thought.

**LINEHAN:** I got it, something happens during the week. [LAUGHTER]

**JILL DOLBERG:** Good afternoon, Chairperson Linehan and members of the Revenue Committee. My name is Jill Dolberg, Jill, J-i-l-l, Dolberg, D-o-l-b-e-r-g, and I'm the interim director and CEO of History Nebraska, the state's Historical Society. I'm speaking in favor of LB213 and I want to thank Senator Slama for introducing it. This will extend the Nebraska Job Creation and Mainstreet Revitalization Act through 2026. This act more commonly called the Mainstreet-- or I'm sorry, the Nebraska Historic Tax Credit is a program that my agency administers with the cooperation of the Department of Revenue. I was thrilled to hear Senator Slama quote the study we commissioned with the Bureau of Business Research so I won't share all of those statistics with you. You've already got them. But while the tax credit program has been a financial success, I want to emphasize the true value of historic preservation from a historic preservationist position, which is how it improves the quality of life for Nebraskans. You can see this in Hartington, where a single tax credit project

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rehabbed a main street business. It created new rental space and downtown housing. But this project also inspired several other property owners in Hartington to make improvements to their own businesses, revitalizing their buildings in ways large and small up and down Main Street. The tax credit has been used for numerous multimillion dollar projects. But personally, I love small scale passion projects that might not have been possible without tax credits or that has brought a tangible benefit to the community. Senator Albrecht and I toured the Palace Hotel in Pender not too long ago--

**ALBRECHT:** Lovely.

**JILL DOLBERG:** --it was beautiful, right-- which created 16 apartments in a town of 1,000 people that was sorely in need of housing for their workforce. They're so popular, they've never had to advertise. There are two projects in Kearney where entrepreneurs built first floor businesses and apartments in the upper stories of formerly vacant buildings. One of the most exciting things is that the vast majority of these efforts in our smaller cities are undertaken by young entrepreneurs who believe in their communities and invest in them. The Historic Tax Credit helps make their projects possible. I want to assure you, however, that the tax credit is not free money. It requires adherence to preservation standards. And although it, it provides tax relief to property owners who receive the credit, it also requires the applicant to make a significant private investment and contribution to economic development. This has been a successful approach since 2015 and it will ensure that it can continue to strengthen our state and improve our quality of life for cities and towns with a population of less than 5,000. Clearly, I'm passionate about this program. The only thing I would beg for to make it better would be to go bigger by making the program available to a larger number of our communities. I think that if we wanted to support smaller communities, one way we could do that is through also reviewing LB697 and LB756, one of which would lower the threshold, financial threshold from \$25,000 to \$5,000 for smaller communities. So thank you for your consideration of LB213 and I would be happy to answer any questions that you have about the program.

**LINEHAN:** Thank you very much. Are there questions from the committee? Seeing none, thank you very much. Are there other proponents? Good afternoon.

**CAROL BODEEN:** Good afternoon, Chairperson Linehan and members of the committee. My name is Carol Bodeen, C-a-r-o-l B-o-d-e-e-n. I'm the director of Policy and Outreach for the Nebraska Housing Developers

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Association here today to testify in support of LB213. The Nebraska Housing Developers Association is a membership organization with over 70 members from across the state. Our mission is to champion affordable housing. Our goal is that all Nebraskans have the cornerstone foundation of a healthy and affordable home. Our members include nonprofit, for-profit developers, nonprofit organizations, government agencies, and economic development organizations. Thank you to Senator Slama for bringing this bill. We were in support of extending the, the Historic Tax Credit program last year as well. And so we were watching to see that this would get revived for this year. And very happy to see that that has happened. As developers and providers of affordable housing, we'd like you to know that this Historic Tax Credit program is a valuable tool, which our membership has often utilized, develop and preserve affordable housing across Nebraska as well. These tax credits have been paired with public subsidies, such as the Low-Income Housing Tax Credit program, to make previously impossible projects financially feasible. The result is not only the preservation of historically significant buildings, but also the provision of safe and quality housing for Nebraska's low-to-moderate income residents. These historically significant buildings are often in older areas of the communities. From large to small, these areas are the heart of the city. And the upper story housing that can sometimes be developed as well with some of these-- revitalizing some of these buildings is very positive for the downtowns of these communities to bring residents into the area as well. These projects typically result in increased financial investment in economically distressed areas. So-- and then once these-- housing is in these areas, it's also usually closer to employment and transportation and things of that. So we are very much in support of LB213 in extending these tools for our state. As to the Rural Workforce Housing Fund match aspect of it, we feel like there would be a benefit in reducing match. Anything that can be done to remove barriers, make it easier to develop housing is something that we support. Maybe tying something into LB249 that Senator Briese has introduced related to workforce housing might be a solution as well, but that is also not a deal breaker for us in this legislation. We very much would like to see the Historic Tax Credit program extended, so.

**LINEHAN:** Thank you. Thank you very much. Are there any questions from the committee? Thank you for being here.

**CAROL BODEEN:** Thank you.

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**LINEHAN:** Are there any other proponents? Any other proponents? Any opponents? Any opponents? Anyone wanting to testify in the neutral position? Senator Slama. We have some letters for the record: three proponents, no opponents, and no neutral.

**SLAMA:** So consent calendar. Right?

**LINEHAN:** Yeah.

**SLAMA:** Thank you, Chair Linehan, members of the Revenue Committee. I brought this bill for a really simple reason in that this summer I slogged around to every single town in District 1, District 1 by areas, like, the six largest district in the state. And every time I visited every town, it didn't matter if it was a town of 20 people or a town of 2,000, there was always at least one person who was ready to go. They had an idea in mind. They were excited about the future of their town. Every single town I went to. And in these smaller towns, it was somebody who has a full-time job, who has a family outside, and they're not a full-time economic development director. We need to make sure that our economic development programs are working for everybody, not just the towns that are blessed enough to have a wonderful, full-time economic development director. And I think LB213 is a strong step in that direction and gives that, that person with the vision for the future of their small town a fighting chance to restore some of the old buildings, get some new housing going, and get their town moving in the right direction. So I'd appreciate your consideration. Thank you very much.

**LINEHAN:** Thank you very much. Are there any questions from the committee? Seeing none, thank you very much.

**SLAMA:** Thank you.

**LINEHAN:** And we'll close the hearing on LB213.