

ONE HUNDRED NINTH LEGISLATURE - SECOND SESSION - 2026
COMMITTEE STATEMENT
LB214

Hearing Date: Thursday March 06, 2025
Committee On: Health and Human Services
Introducer: Holdcroft
One Liner: Provide for the use of newborn safety devices and procedures relating to surrendered newborn infants

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:
Aye: 4 Senators Hardin, Ballard, Hansen, Meyer, G.
Nay: 3 Senators Fredrickson, Quick, Riepe
Absent:
Present Not Voting:

Testimony:

Proponents:

Senator Rick Holdcroft
Jessi Getrost
Judith Mansisor
Nate Grasz
Sandy Danek
Adam Schwend

Representing:

Opening Presenter
Safe Haven Baby Boxes
self
Nebraska Family Alliance
Nebraska Right to Life
SBA Pro Life America

Opponents:

Scott Thomas

Representing:

Village in Progress

Neutral:

Representing:

* ADA Accommodation Written Testimony

Summary of purpose and/or changes:

LB 214 amends the current Newborn Safe Haven Act to allow the use of a newborn safety device at drop off locations. Requirements are provided for the newborn safety device, hospital staff, fire station staff, and the Department of Health and Human Services. Definitions are also provided as well as intent language for the Legislature to appropriate money for installation grants. Finally, this bill provides immunity from prosecution to those that surrender a child under this Act.

Sec. 1: Includes new sections 2 through 6 in the Newborn Safe Haven Act.

Sec. 2: Definitions are provided. Department is defined as the Department of Health and Human Services. Also,



newborn infant is defined as a child 90 days old or younger. Lastly, newborn safety device is defined as a padded and temperature-controlled device used for the purpose of permitting an individual to anonymously surrender a newborn infant.

Sec. 3: A new section of law requiring a newborn safety device to meet one of the following requirements.

First, if this device is located at a hospital, it must be staffed 24 hours a day, 7 days a week, and be conspicuous and visible to hospital staff; or if the device is located at a fire station, it must be staffed 24 hours a day, 7 days a week, and located in a conspicuous area and be visible to staff or equipped with motion sensor and dual alarm system.

Second, a newborn safety device is required to be equipped with a dual alarm system, visually inspected once a day, and contain a pouch with information. The dual alarm system shall be programmed to sound first when the newborn safety device is opened by immediately placing a telephone call to a 911 service and dispatching an emergency medical care provider or firefighter to the location of the device. It shall be programmed to sound a second time by immediately placing a telephone call to a 911 service after movement is detected inside the device. The system shall be tested at least once per week.

Sec. 4: A new section of law requiring the staff at each location where a newborn safety device is installed to perform all necessary repairs, complete documentation of all inspections and tests, and notify the Department of Health and Human Services of any failure that would need the device to be removed from service. The staff are also required to post signage, approved by the Department of Health and Human Services, that clearly identifies the device access portal door and provides both written and pictorial instruction. The written signage shall be in English, Spanish, and any other language that is commonly used in the community. In addition, the written and pictorial instruction shall depict how to open the access portal door, place the newborn infant inside the unit, retrieve the information in the pouch, and close the access portal door to engage the lock. Further, participation as a location of a newborn safety device shall be voluntary. The proposal, location selection, and purchase of a newborn safety device shall be initiated by one or more residents of a local community or by an authorized drop-off location. Lastly, such devices may be purchased using public funds and philanthropic or private donations.

Sec. 5: A new section of law providing that it is the intent of the Legislature to appropriate \$15,000 to the Department of Health and Human Services for fiscal year 2025-26 for awarding grants to be used for the installation of newborn safety devices. However, the appropriation cannot be used for the purchase or ongoing operation of newborn safety devices unless the lack of such funding jeopardizes the continued use of an installed device.

Sec. 6: A new section of law requiring the Department of Health and Human Services to develop procedures, to be published on its website, to allow an individual to anonymously provide any medical history information relating to a newborn infant surrendered, reconsider the surrender of a newborn infant, and undergo paternity testing for a newborn infant.

Sec. 7: Amends Section 43-4902 to require the Department of Health and Human Services to include public awareness of newborn safety devices in its public information program.

Sec. 8: Amends Section 43-4903 to not allow persons to be prosecuted for any crime based solely upon the act of surrendering a newborn infant pursuant to the Newborn Safe Haven Act. Language relating to leaving a child 90 days or younger at a hospital, fire station, law enforcement agency, or emergency care provider is removed.

Sec. 9: Repealer

Sec. 10: Emergency clause



Explanation of amendments:

AM1665 strikes the original sections and inserts the following new sections.

Section by Section Summary:

Section 1: Amends Section 43-4901 to include new sections 2 through 7 in the Newborn Safe Haven Act.

Section 2: A new section of law that adds the definitions of Department, newborn infant, and newborn safety device. Department means the Department of Health and Human Services. Also, newborn infant is defined as a child 90 days old or younger. Lastly, newborn safety device is defined as a padded and temperature-controlled device used for the purpose of permitting an individual to anonymously surrender a newborn infant. These definitions are the same as in the original bill.

Section 3: A new section of law which provides that it is the intent of the Legislature to implement a pilot program that provides for the installation of 4 newborn safety devices in the state. The Department of Health and Human Services is required to adopt and promulgate rules and regulations specifying the minimum safety and security requirements for a newborn safety device, develop criteria for qualification as a location for a newborn safety device in the pilot program, and create an application form. A decision of the Department of Health and Human Services to approve a newborn safety device location is final and shall be based on merit. Also, the date of application may be considered.

In addition, as part of the pilot program, one newborn safety device shall be approved for installation at a hospital or fire station located in each of the following: the first congressional district, the second congressional district, and the third congressional district east of the one hundredth meridian and the third congressional district west of the one hundredth meridian. Participation as a location of a newborn safety device shall be voluntary. The proposal, location selection, and purchase of a newborn safety device shall be initiated by one or more residents of a local community or by an authorized drop-off location, and such devices may be purchased by public funds, philanthropic funds, and private donations. Also, the pilot program shall terminate on December 31, 2028. Lastly, upon request, the Department of Health and Human Services shall electronically report to the Clerk of the Legislature statistics compiled both during the pilot program and after the pilot program is terminated, including, but not limited to, the number of newborn infants surrendered, the consistency of ongoing community financial support for installed newborn safety devices, and problems and concerns relating to newborn safety devices. Nothing in the bill shall prohibit an individual from surrendering a newborn infant to a hospital, staffed fire station, staffed law enforcement agency, or emergency care provider.

Section 4: A new section that adds the language in original Section 3 of the bill relating to requirements for newborn safety device when they are located at a hospital or fire station and its dual alarm system. First, if a device is located at a hospital, it must be staffed 24 hours a day, 7 days a week, and be conspicuous and visible to hospital staff. If the device is located at a fire station, it must be staffed 24 hours a day, 7 days a week, and located in a conspicuous area and be visible to staff or equipped with motion sensor and dual alarm system.

Second, a newborn safety device is required to be equipped with a dual alarm system, visually inspected once a day, and contain a pouch with information. The dual alarm system shall be programmed to sound first when the newborn safety device is opened by immediately placing a telephone call to a 911 service and dispatching an emergency medical care provider or firefighter to the location of the device. It shall be programmed to sound a second time by immediately placing a telephone call to a 911 service after movement is detected inside the device. The system shall be tested at least once per week.

Section 5: A new section that adds the language in original Section 4 of the bill relating to hospital staff requirements and fire station staff requirements. This section requires the staff at each location where a newborn safety device is



installed to perform all necessary repairs, complete documentation of all inspections and tests, and notify the Department of Health and Human Services of any failure that would need the device to be removed from service. The staff are also required to post signage, approved by the Department of Health and Human Services, that clearly identifies the device access portal door and provides both written and pictorial instruction. The written signage shall be in English, Spanish, and any other language that is commonly used in the community. In addition, the written and pictorial instruction shall depict how to open the access portal door, place the newborn infant inside the unit, retrieve the information in the pouch, and close the access portal door to engage the lock. Further, participation as a location of a newborn safety device shall be voluntary. The proposal, location selection, and purchase of a newborn safety device shall be initiated by one or more residents of a local community or by an authorized drop-off location. Lastly, such devices may be purchased using public funds and philanthropic or private donations.

Section 6: States legislative intent to appropriate \$4,000 to the Department of Health and Human Services for FY2026-27 for the purpose of awarding grants for the installation of newborn safety devices.

Section 7: A new section that adds the language in original Section 6 of the bill relating to the Department of Health and Human Services procedures. This section requires the Department of Health and Human Services to develop procedures, to be published on its website, to allow an individual to anonymously provide any medical history information relating to a newborn infant surrendered, reconsider the surrender of a newborn infant, and undergo paternity testing for a newborn infant.

Section 8: Amends Section 43-4902 the same as in original section 7 of the bill to require the Department of Health and Human Services to include public awareness of newborn safety devices in its public information program.

Section 9: Amends Section 43-4309 to remove language relating to persons not being prosecuted for leaving a child at a hospital, law enforcement agency, or emergency care provider. In addition, this section provides that an individual who surrenders a newborn infant pursuant to the Newborn Safe Haven Act shall not be prosecuted for any crime based solely upon the act of surrendering such newborn infant to the custody of an employee on duty at a licensed hospital, staffed fire station, staffed law enforcement agency, or an emergency care provider, and be allowed to remain anonymous unless evidence of abuse or neglect of the newborn infant is apparent. Also, an individual who surrenders a newborn infant using a newborn safety device shall not be prosecuted for any crime based solely upon the act of surrendering such newborn infant, and be allowed to remain anonymous unless evidence of abuse or neglect of the newborn infant is apparent. Lastly, the hospital, staffed fire station, staffed law enforcement agency, or emergency care provider shall promptly contact appropriate authorities to take custody of a newborn infant surrendered pursuant to the Newborn Safe Haven Act.

Sec. 10: Repealer

Sec. 11: Emergency Clause

Brian Hardin, Chairperson

