

ONE HUNDRED NINTH LEGISLATURE - FIRST SESSION - 2025
COMMITTEE STATEMENT
LB48

Hearing Date: Wednesday March 12, 2025
Committee On: Health and Human Services
Introducer: McKinney
One Liner: Establish a family resource and juvenile assessment pilot program

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

Vote Results:

Aye:	6	Senators Hardin, Ballard, Fredrickson, Hansen, Meyer, Quick
Nay:	1	Senator Riepe
Absent:		
Present Not Voting:		

Testimony:

Proponents:

Senator Terrell McKinney
Corey Steel
Jason Witmer

Representing:

Opening Presenter
Nebraska State Court Adminstrator
ACLU Nebraska

Opponents:

Representing:

Neutral:

Representing:

* ADA Accommodation Written Testimony

Summary of purpose and/or changes:

LB 48 creates a family resource and juvenile assessment center pilot program in Nebraska cities of the metropolitan class. DHHS is required to establish a designation process and the process requirements are provided. Requirements for each center as well as funding and an evaluation are provided.

Sec. 1: DHHS is required to establish a Family Resource and Juvenile Assessment Center Pilot Program for a period of 5 years in cities of the metropolitan class areas, that shall operate 24 hours a day, 7 days a week. The pilot program shall be developed in partnership with local grassroots organizations, community stakeholders, and advisors representing youth and families impacted by the juvenile justice system.

Family Resource and Juvenile Assessment Center is defined as a facility designed to provide support, assessment, and intervention services for youth and families involved in, or at risk of, entering the juvenile justice system. The goal of the centers is to offer comprehensive, community-based solutions that address underlying issues contributing to juvenile delinquency.



Sec. 2: The pilot program shall provide comprehensive support resources, minimize individual and community harm, and foster community trust and engagement.

Sec. 3: DHHS is required to establish a designation process for these centers to ensure high-quality standards in service delivery, staff qualifications, and organizational effectiveness. A center shall complete a comprehensive self-assessment and submit an application and the self-assessment to DHHS for review. DHHS shall conduct site visits and staff interviews. A center that meets the criteria will receive official designation while a center that does not meet the criteria shall receive feedback and technical assistance. Four centers shall be selected for the pilot program.

Sec. 4: To receive designation as a family resource and juvenile assessment center, an applicant shall offer a range of core services; employ professionals trained in family and cultural issues; develop partnerships with local grassroots organizations; demonstrate a framework that supports service delivery, quality improvement, and sustainable operations; and implement data collection processes.

Sec. 5: Each center is required to host multiple community providers, grassroots organizations, and community navigators. Each center shall provide assessments and services free of charge to families and maintain active membership in the National Assessment Center Association. The purpose of the assessment shall be to have discussions between youth and families, identify the origins of issues and provide referrals, and creating actions plans for success.

Sec. 6: Each center shall integrate culturally relevant and trauma-informed services that include tutoring, mentoring, conflict resolution and anger management training, mental health and wellness services, social skills/job-readiness training, financial literacy programs, youth/family counseling, cognitive behavioral therapy, drug and substance abuse prevention/treatment, and food/clothing assistance and resource navigation. Each center shall establish community partnerships to provide apprenticeships, vocational training, and mentorship.

Sec. 7: Each center shall have a youth advisory council and parent advisory board, host regular outreach activities, and employ individuals with established community ties and lived experience.

Sec. 8: Each center is required to implement a data collection system. The data collected shall be used to adjust and refine services.

Sec. 9: Each center shall offer ongoing support to youth after they complete the initial service period. This support may include alumni mentoring programs, periodic check-ins, or additional family resources as youth transition into adulthood or exit from other systems of care.

Sec. 10: Funding for centers shall be allocated to prioritize partnerships with local grassroots organizations and businesses. Each designated center shall receive up to \$1 million annually from the Health and Human Services Cash Fund.

Sec. 11: An annual evaluation of the pilot program's impact on youth and family well-being, community trust, and reduction in juvenile justice system involvement shall be conducted by DHHS.

Sec. 12: This act becomes operative on September 1, 2025.

Sec. 13: Emergency clause



Explanation of amendments:

AM 680 reduces the 4 centers for the pilot program to 2 centers.

AM 680 removes the \$1 million funding from the Health and Human Services Cash Fund for 4 centers. The new language provides, subject to available funds, each designated center shall receive up to \$500,000 annually from the Medicaid Managed Care Excess Profit Fund. If such funds are not available, no General Funds shall be used. No more than 10% of funds appropriated for the Family Resource and Juvenile Assessment Center Pilot Program, up to \$100,000 per year, shall be used to administer the pilot program.

AM 680 adds the Family Resource and Juvenile Assessment Center Pilot Program to the list of services under the Medicaid Managed Care Excess Profit Fund.

Brian Hardin, Chairperson

