## LEGISLATIVE BILL 520

### Approved by the Governor June 9, 1993

Introduced by Rasmussen, 20; Withem, 14; McKenzie, 34

AN ACT relating to children; to amend section 79-3303, Reissue Revised Statutes of Nebraska, 1943, and sections 43-2501 to 43-2503, 43-2505 to 43-2513, and 79-3301, Revised Statutes Supplement, 1992; to state and restate intent; to define and redefine terms; to provide for early intervention services coordination; to provide powers and duties; to create the Special Education Accountability Commission; to provide a termination date; to eliminate provisions relating to construction and applicability of the Early Intervention Act and an obsolete provision relating to a report; to harmonize provisions; to repeal the original sections, and also sections 43-2504 and 43-2514, Revised Statutes Supplement, 1992; and to declare an emergency.

Be it enacted by the people of the State of Nebraska,

Supplement, 1992, be amended to read as follows:

43-2501. Sections 43-2501 to 43-2514 <u>43-2513 and</u> sections 2 to 5, 11, 12, 17, 20, and 21 of this act shall be known and may be cited as the Early Intervention Act.

Sec. 2. The Legislature hereby finds and declares that: (1) All families have strengths; (2) families strengthen communities; (3) families are the primary decisionmakers for their children; and (4) all families have needs that change over time and require the support of their communities.

Sec. 3. The Legislature further finds that: (1) Many state initiatives for improving or reforming the current service delivery systems for children and their families have been identified and are currently underway within Nebraska; (2) there is a need to facilitate coordination and promote communication across these efforts to identify common visions and approaches and to establish linkages across health, social services, family support services, mental health, and education initiatives at the state and community levels; and (3) these initiatives need continued support and nurturing in order to empower communities and families and to provide and promote an integrated service delivery system.

Sec. 4. The Legislature declares that it shall be the policy of the State of Nebraska to promote the development of a statewide system of comprehensive, coordinated, family-centered, community-based, and culturally competent services for children and their families to assure that services help build strong families and provide appropriate environments prenatally and for children from birth through their early years in programs and services which are:

(1) Family-centered, recognizing that parents have the primary responsibility for their children's development and learning and that programs must recognize and support the role of parents through family-friendly criteria in planning their structure, services, staffing, and delivery:

(2) Comprehensive, recognizing that services must include attention to all aspects of the child and family and address needed health and nutrition, education, family support, and social services. Such a service system should allow families to choose the services they need with minimal costs and requirements;

(3) Coordinated, recognizing that collaboration among the state agencies and variety of private and community programs and services is required to assure that comprehensive child and family needs are met and that the most efficient use is made of public resources, community services, and informal support systems of families;

(4) Quality, recognizing that outcomes for children in the early years are strengthened when programs and services display indicators of quality, including developmentally appropriate practices, extensive family involvement, trained staff, and culturally responsive approaches:

(5) Inclusive, recognizing that all children benefit when they have optimum opportunities to interact with peer groups of children with diverse backgrounds and characteristics; and

(6) Equitable, recognizing that program practices strive for potential achievement of all children including children from minority groups, with disabilities, from less advantaged backgrounds, and from less populated geographic areas.

Sec. 5. The Legislature further declares that it shall be the policy of the State of Nebraska, through the implementation of the Early Intervention Act, to promote, facilitate, and support:

(1) Healthy families, enhancing the well-being of each family member as well as that of the family as a unit and encouraging family independence and decisionmaking about the future of their children:

(2) Service systems which are responsive, flexible, integrated, and accessible to children and their families;

(3) Community ownership, recognizing that families live and children grow up in communities, that programs are implemented in communities, and that all families need supportive communities; and

(4) Maximum impact of prevention and early intervention, encouraging and supporting active parent and family partnership in all programs and services. Sec. 6. That section 43-2502, Revised Statutes Supplement,

1992, be amended to read as follows:

It is the intent of the Legislature to establish 43-2502. demonstration sites to study the feasibility of implementing selected assist in securing early intervention services to infants or toddlers with disabilities and their families in accordance with the federal early intervention program portions of the Early Intervention Program for Infants and Toddlers with Disabilities, 20 U.S.C. 1471 to 1485, and whenever possible in concert with the family policy objectives prescribed in sections 43-532 to 43-534 and federal and state initiatives. Such services are necessary to:

(1) Enhance the development of infants and toddlers with disabilities;

(2) Reduce the costs to our society by minimizing the need for special services, including special education and related services, after such infants or toddlers reach school age;

(3) Minimize the likelihood of institutionalization of persons with disabilities and maximize their potential for independent living in society;

(4) Enhance the capacity of families to meet the needs of their infants or toddlers with disabilities; and

(5) Strengthen, promote, and empower families to determine the most appropriate use of resources to address the unique and changing needs of families and their infants or toddlers with disabilities; and

(6) Enhance the capacity of state and local agencies and service providers to identify, evaluate, and meet the needs of historically underrepresented populations, particularly minority, low-income, and rural populations.

Sec. 7. That section 43-2503, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2503. The purposes of the Early Intervention Act shall be to:

(1) Develop and implement a statewide system of comprehensive, coordinated, family-centered, community-based, and culturally competent early intervention services Establish and demonstrate a referral and services ecordination system in at least two sites, one in a single district planning region and one in a multidistrict planning region, for infants or toddlers with disabilities and their families through the collaboration of the Department of Health, the Department of Public Institutions, the Department of Social Services, the State Department of Education, school districts, educational service units, approved cooperatives, and other political subdivisions and all other relevant agencies or organizations at the state, regional, and local levels;

(2) Design and demonstrate Establish and implement a billing system for accessing federal medicaid funds; under the act at selected sites;

(3) Facilitate the coordination of payment for referral and Establish and implement services coordination through a community team approach; from federal, state, local, and private sources, including public and private insurance coverage; and

(4) Facilitate the coordination of payment for early intervention services from federal, state, local, and private sources including public and private insurance coverage; and

(5) (4) Enhance Nebraska's capacity to provide quality early intervention services and expand and improve existing early intervention services being provided to <u>eligible</u> infants or toddlers with disabilities and their families.

Sec. 8. That section 43-2505, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2505. For purposes of the Early Intervention Act:

(1) Collaborating agencies shall mean the Department of Health, the Department of Public Institutions, the Department of Social Services, and the State Department of Education;

(2) Developmental delay shall mean any of the disability classifications or conditions described in section 79-3309;

(3) Early intervention services may include services which:

(a) Are designed to meet the developmental needs of each eligible infant or toddler with disabilities and the needs of the family related to enhancing the development of their infant or toddler;

(b) Are selected in collaboration with the parent or guardian;

6

personnel;

(e) Are provided under public supervision by qualified

(c) (d) Are provided in conformity accordance with an individualized family service plan;

(c) Are provided at no cost unless federal or state law provides a system of payments by families, including a schedule of sliding fees:

(d) (f) Meet the standards of the State of Nebraska all applicable federal and state standards; and

(c) (c) Are provided, to the maximum extent appropriate, in the types of settings in which infants and toddlers without handleaps would participate natural environments including the home and community settings in which infants and toddlers without disabilities participate; and

(h) May-include; based on the availability of resources for the demonstration sites:

G) Audiology:

fii) Services coordination;

fiii) Family training, counseling, and home visits;

-4-

(iv) Health services;

(v) Medical services only for diagnostic or evaluation

purposes;

(vi) Nursing services;
(vii) Nutrition services;
(viii) Occupational therapy;
(ix) Physical therapy;
(x) Psychological services;
(xi) Social work services;
(xii) Special instruction;

# (xiii)-Speech-language-pathology; and (xiv) Transportation;

(4) Eligible infant or toddler with disabilities shall mean a child who needs early intervention services and is two years of age or younger, except that toddlers who reach age three during the school year shall remain eligible throughout that school year. The need for early intervention services is established when the infant or toddler experiences developmental delays which shall mean any of the disability classifications or conditions described in the Special Education Act; residing in a demonstration site who needs referral or services coordination because he or she:

(a) Experiences developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: Cognitive-development; physical development; language and speech development; psychosocial development; or self help skills; or

(b) Has a diagnosed physical or mental condition which has a high probability of resulting in developmental delay;

(5) Federal early intervention program shall mean the federal Early Intervention Program for Infants and Toddlers with Disabilities, 20 U.S.C 1471 to 1485;

(6) (5) Individualized family service plan shall mean the process, periodically documented in writing, of determining appropriate early intervention services for an eligible infant or toddler with disabilities and his or her family;

(7) (6) Interagency planning team shall mean an organized group of interdisciplinary, interagency representatives, community leaders, and parents family members in each local community or region;

(8) Lead agency or agencies shall mean the Department of Social Services and State Department of Education and any other agencies designated by the Governor for general administration, supervision, and monitoring of programs and activities receiving federal funds under the federal early intervention program and state funds appropriated for early intervention services under the Early Intervention Act;

(7) (9) Nebraska Interagency Coordinating Council shall mean the state council the function of which is to advise and assist the collaborating agencies in carrying out the provisions of the act. The members of the council shall be appointed by the Governor and shall include, but not be limited to, representatives of school districts, social services, health and medical services, parents, mental health services, developmental disabilities services, educational service units, Head Start, higher education, parents; physicians, legislative agencies the Legislature, and the collaborating agencies; and

(8) Referral coordinator shall mean the person or persons designated by the agencies represented on a local or regional interagency planning team who serve as the initial point of contact when an infant or toddler with possible disabilities or a family is referred for services and assists the family with accessing services until a services coordinator is

#### selected;

(9) (10) Services coordination shall mean a flexible process of interaction provided facilitated by a services coordinator to assist the family of an eligible infant or toddler with disabilities and his or her family within a community to identify and meet their needs pursuant to the Early Intervention Act. act. Services coordination under the act shall not duplicate any case management services which an eligible infant or toddler with disabilities and his or her family are already receiving or eligible to receive from other sources tand

(10)-Services-coordinator-shall mean the person who is responsible for coordinating all services across agency-lines and helps parents or guardians-obtain the assistance they need for securing early intervention services.

Sec. 9. That section 43-2506, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2506. (1) The Nebraska Interagency Coordinating Council and collaborating agencies shall make recommendations regarding the following to the lead agency or agencies which shall have the responsibility and authority for:

(a) The general administration, supervision, and monitoring of programs and activities receiving federal funds under 20 U.S.C. 1471 to 1485 the federal early intervention program to ensure compliance with federal law;

(b) The identification and coordination of all available resources within the state from federal, state, local, and private sources;

(c) The assignment of financial responsibility to the appropriate agency and the use of family payment and a sliding fee schedule for services:

(c) (d) The development of procedural safeguards, including procedures for complaints and appeals, to ensure that services <u>coordination is</u> are provided to <u>eligible</u> infants or toddlers with disabilities or possible disabilities and their families in a timely manner pending the resolution of any disputes among public agencies or service providers;

(c) The resolution of intra-agency and interagency

(d) (f) The entry into formal interagency agreements that define the financial responsibility of each agency for paying for early intervention services and that include all additional components necessary to ensure meaningful cooperation and coordination; and

(e) (g) The coordination of interagency rules and regulations pursuant to the Early Intervention Act, + and

(h) The enforcement of financial and direct service responsibilities of collaborating agencies.

(2) The Nebraska Interagency Coordinating Council and collaborating agencies shall make recommendations to the lead agency or agencies which shall prepare and submit all applications for funding under 20-U.S.C. 1471 to 1485 the federal early intervention program

disputes;

and shall distribute federal funds according to such applications.

Sec. 10. That section 43-2507, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2507. (1) Planning for the implementation of early intervention services, including fiscal and programmatic responsibility for and the monitoring and supervision of such services; shall be the responsibility of each collaborating agency. The collaborating agencies shall design and develop The planning shall address a statewide system of comprehensive, coordinated, comprehensive, multidisciplinary, interagency programs providing appropriate family-centered, community-based, and culturally competent early intervention services to all eligible infants or toddlers with disabilities and their families in Nebraska. The statewide system shall include the following minimum components:

(a) A public awareness program, including a central directory;

(b) A comprehensive ehild-find early identification system, including a system for identifying children and making referrals for infants or toddlers who may be eligible for early intervention services;

(c) Eligibility determination for children and their families referred for early intervention services <u>Common intake</u>, referral, and assessment processes, procedures, and forms to determine eligibility of infants and toddlers and their families referred for early intervention services;

(d) An individualized family service plan, including services coordination, for each eligible infant or toddler with disabilities and his or her family; and

(e) A comprehensive system of personnel development;

(f) A uniform computer data base and reporting system which crosses agency lines; and

(g) Services coordination to access the following early intervention services: Audiology; family training, counseling, and home visits; health services; medical services only for diagnostic or evaluation purposes; nursing services; nutrition services; occupational therapy; physical therapy; psychological services; social work services; special instruction; speech-language pathology; transportation and related costs that are necessary to enable an eligible infant or toddler with disabilities and his or her family to receive early intervention services; assistive technology devices and assistive technology services; vision services; and hearing services.

(2) Collaborating agencies shall review and study standards to ensure that personnel are appropriately and adequately prepared and trained to carry out the Early Intervention Act.

(3) <u>Collaborating agencies shall be responsible for</u> designing, supporting, and implementing a statewide training and technical assistance plan which shall address preservice, inservice, and leadership development for service providers and parents of eligible infants and toddlers with disabilities.

(4) Policies and procedures shall be jointly examined and by the collaborating agencies to satisfy data collection nts under <del>20 U.S.C. 1471 to 1485 the federal early</del> analyzed requirements under intervention program and to assure the confidentiality of the data contained in the statewide system. Information-shall-be-accessed only by appropriate staff in each of the collaborating agencies and school districts, educational service units, or approved cooperatives which are responsible for the provision of early intervention services either directly or through contract to private providers: Notwithstanding any other provision of state law, the collaborating agencies shall be permitted to share information and data necessary to carry out the provisions of the federal early intervention program, including the personal identification or other specific information concerning individual infants, toddlers, or their families, except that the vital and medical records and health information concerning individuals provided to the Department of Health may be released only under the laws authorizing the provision of such records and information. Nothing in this section shall prohibit the use of such data to provide for the preparation of reports, fiscal information, or other documents required by the Early Intervention Act, but no such information may in such reports, fiscal information, or other documents shall be used in a manner which would allow for the personal of an individual infant, or toddler, or family. identification Notwithstanding any other provision of state law, the collaborating agencies shall be permitted to share information and data necessary to carry out the provisions of the act.

(4)—The -collaborating agencies shall be responsible for planning and program oversight of the demonstration sites, including fiscal and oversight responsibility for training and technical assistance:

Sec. 11. (1) Infants or toddlers who are referred because of possible disabilities shall be entitled, at no cost to their families, to early identification of eligible infants or toddlers, evaluation and assessment in order to determine eligibility under the Special Education Act, and procedural safeguards.

(2) By June 1, 1995, eligible infants or toddlers with disabilities shall also be entitled, at no cost to their families, to services coordination and development of the individualized family service plan.

(3) For other early intervention services not mandated under the Special Education Act and not paid through any other source, including, but not limited to, insurance, medicaid, or other third-party payor, payment for such services shall be the responsibility of the parent, guardian, or other person responsible for the eligible infant or toddler.

(4) Except for services coordination, the Early Intervention Act shall not be construed to create new early intervention or family services or establish an entitlement to such new services.

Sec. 12. The State Department of Education shall maintain its responsibility under the Special Education Act regarding special education and related services. The department shall provide grants for the costs of such programs to the school district of residence as provided in section 79-3325.

Sec. 13. That section 43-2508, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2508. (1) The State-Department of Education and the Department of Social Services shall jointly-develop-the-criteria and contracting procedures for referral and services coordination at the demonstration sites with the participation of the other collaborating agencies and the Nebraska Interagency Coordinating Council be responsible for providing or contracting for services.

(2) Whenever possible, the medical assistance program prescribed in sections 68-1018 to 68-1025 shall be used for payment of the referral and services coordination, for eligible infants or toddlers with disabilities and their families in the demonstration sites.

(3) It is the intent of this section that the Department of Social Services shall apply for and implement a Title XIX medicaid waiver as a way to provide referral and assist in the provision of services coordination to eligible infants or toddlers with disabilities and their families, in the demonstration sites:

Sec. 14. That section 43-2509, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2509. The Department of Health shall be responsible for incorporating components required under 20 U.S.C. 1471 to 1485 the federal early intervention of the the state of the federal early intervention.

the federal early intervention program into the state plans developed for the Special Supplemental Food Program for Women, Infants, and Children, the Commodity Supplemental Food Program, the maternal and child health program, and the developmental disabilities program. The department shall provide technical assistance, planning, and coordination related to the incorporation of such components.

Sec. 15. That section 43-2510, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2510. The Department of Public Institutions shall be responsible for incorporating components required under 20 U.S.C. 1471 to 1485 the federal early intervention program into the mental health and mental retardation developmental disabilities planning responsibilities of the department. The department shall provide technical assistance, planning, and coordination related to the incorporation of such components.

Sec. 16. That section 43-2511, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2511. The selected demonstration sites shall implement There is hereby established a statewide billing system for accessing federal medicaid funds for special education and related services provided by school districts. The system shall apply to all students verified with disabilities and verified eligible infants or toddlers with disabilities from date of diagnosis to twenty-one years of age as allowed under the Madicare Cataron for Coverson of the fully.

Medicare Catastrophic Coverage Act of 1988. The system shall be developed jointly by the Department of Social Services, and the State Department of Education. School districts, educational service units, or

approved cooperatives providing special education and related services shall be required to participate in the statewide billing system. It is the intent of this section that costs to school districts associated with the implementation of such a system shall be eligible for payment through the medicaid reimbursement rates to be established for each therapy. ;-and the demonstration sites.

Sec. 17. The lead agencies shall develop and implement a statewide services coordination system for eligible infants or toddlers with disabilities and their families pursuant to the Farly Intervention Act. The amount and duration of services coordination shall be based on need, as specified on the individualized family service plan. Services coordination under the act shall not duplicate any case management services which an eligible infant or toddler with disabilities and his or her family are already receiving or eligible to receive from whatever source.

Sec. 18. That section 43-2512, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2512. Each region established pursuant to section 79-3328 shall establish an interagency planning team, which planning team shall include representatives from school districts, social services, health and medical services, parents, and mental health, mental retardation; developmental disabilities, Head Start, and other relevant agencies or persons serving children from birth to age five and their families and parents or guardians. Each interagency planning team for the demonstration sites shall be responsible for assisting in the planning and implementation of the Early Intervention Act in each local community or region. The Department of Social Services, in collaboration with each regional interagency planning team, shall provide or contract for services coordination.

Sec. 19. That section 43-2513, Revised Statutes Supplement, 1992, be amended to read as follows:

43-2513. For purposes of subdivision (15) of section 79-3803, funds received by the demonstration sites to carry out the referral and services coordination functions and the administration of the billing system shall be considered special grant funds.

Sec. 20. On or before October 1, 1993, and for each year thereafter, the Department of Social Services and the State Department of Education shall jointly certify to the budget administrator of the budget division of the Department of Administrative Services the amount of federal medicaid funds paid to school districts pursuant to the Early Intervention Act for special education services for children age five and older. The General Fund appropriation to the State Department of Education, Program 440, for state special education aid shall be decreased by an amount equal to the amount that would have been reimbursed with state general funds to the school districts through the special education reimbursement process for special education services for children age five and older that was paid to school districts or approved cooperatives with federal medicaid funds.

It is the intent of the Legislature that an amount equal to

child.

the amount that would have been reimbursed with state general funds to the school districts, certified to the budget administrator, be appropriated from the General Fund to the Department of Social Services, Programs 341 and 348, to aid in carrying out the provisions of the Early Intervention Act and other related early intervention services.

Sec. 21. The lead agencies shall adopt and promulgate rules and regulations pursuant to the Early Intervention Act. Sec. 22. That section 79-3301, Revi

That section 79-3301, Revised Statutes Supplement, 1992, be amended to read as follows:

79-3301. Sections 79-3301 to 79-3365 and sections 24 to 30 of this act shall be known and may be cited as the Special Education Act.

Sec. 23. That section 79-3303, Reissue Revised Statutes of Nebraska, 1943, be amended to read as follows:

79-3303. As used in the Special Education Act, unless the context otherwise requires, the definitions found in sections 79-3304 to 79-3314 and section 24 of this act shall be used.

Sec. 24. Child with a disability shall mean a handicapped

Sec. 25. (1) The Legislature finds and declares that:

(a) Special education is and will continue to be of significant interest to education policymakers, educators, parents, taxpayers, and, most importantly, to students;

(b) The fiscal resources requested to provide educational services to children with disabilities and the need for accountability for those resources requires a comprehensive and reliable system of review;

(c) Fiscal resources are limited while program expansion and pressures for additional programs and services are being experienced:

(d) Nebraska needs to establish educational standards for children with disabilities, including special education and related services which must be provided to children with disabilities;

(e) Current accountability systems do not adequately measure the efficiency and effectiveness of special education programs:

(f) Current accountability systems do not adequately measure the efficiency and effectiveness of special education programs in a cost-effective manner; and

(g) Local school boards should retain responsibility for the content of instructional programs within the broad program framework developed under section 28 of this act.

(2) It is the intent of the Legislature to establish a process for (a) developing a clear understanding of the range of services required by law to meet the educational needs of children with disabilities, (b) assuring that the intent of rules and regulations are carried out in the most cost-efficient manner, and (c) establishing an effective and meaningful system of program standards and evaluation of student outcomes.

Sec. 26. There is hereby created the Special Education Accountability Commission. The commission shall consist of thirteen members as follows: One representative from the Governor's office, one

## LB 520

public school classroom teacher not in special education, one public school special education teacher, one administrator or administrative staff member not involved in special education, one special education administrator or administrative staff member, two parents, one representative of postsecondary special education, one school board member, and four representatives not directly related to the administration, delivery, or receipt of special education services, all appointed by the Governor with the consent of a majority of the Legislature upon the recommendations of associations and organizations representing parents, teachers, school administrators, and school board members. Members shall be appointed no later than September 1, 1993, and shall serve for one three-year term. A vacancy shall be filled by the Governor for the remainder of the term. Members shall be reimbursed for their actual and necessary expenses as provided in sections 81-1174 to 81-1177.

Sec. 27. The primary goal of the Special Education Accountability Commission shall be to identify strategies for accomplishing cost containment in special education that will result in average special education costs increasing at a rate no greater than the average annual education growth rate. Sec. 28. (1) The Special Education Accountability

Sec. 28. (1) The Special Education Accountability Commission shall develop an accountability system which adequately measures efficiency and effectiveness of special education programs in a cost-effective manner. The commission shall:

(a) Review all applicable federal and state laws;

(b) Examine the funding mechanism;

(c) Review any regulatory or procedural changes to determine compatibility with existing law, fiscal impact, and impact on student outcomes;

(d) Review findings of previous committees which have conducted similar studies;

(e) Develop broad frameworks for special education program standards;

(f) Establish a system for assessing student outcomes;

(g) Focus efforts on the establishment of a system for management and monitoring of special education costs and their impact on total education costs; and

(h) Select demonstration sites for the purpose of pilot implementation of program models which can document cost containment while maintaining appropriate services to children with disabilities. Demonstration sites shall be exempt from the provisions of the Special Education Act but shall comply with the federal Individuals with Disabilities Education Act, as amended, 20 U.S.C. 1400 et seq. The State Department of Education shall monitor each demonstration site to determine how such site would differ if it were not exempt from the Special Education Act.

(2) The commission shall annually report its activities and recommendations to the Education Committee of the Legislature, the

Appropriations Committee of the Legislature, and the State Board of Education and shall make its final report on or before September 1, 1996, except that initial recommendations for statutory or procedural changes in the funding mechanism shall be made on or before November 1, 1994.

Sec. 29. The Special Education Accountability Commission and the State Department of Education may work with other states to develop a conceptual and technical framework for examining alternative approaches to funding of special education and developing systems of assessing student outcomes. The commission shall consult with the members of the School Finance Review Committee and the Nebraska Schools Accountability Commission to ensure compatibility of effort. The department shall provide staff support to the Special Education Accountability Commission in all phases.

Sec. 30. The Special Education Accountability Commission shall terminate September 1, 1996. Sec. 31. That original section 79-3303, Reissue Revised

Sec. 31. That original section 79-3303, Reissue Revised Statutes of Nebraska, 1943, and sections 43-2501 to 43-2503, 43-2505 to 43-2513, and 79-3301, Revised Statutes Supplement, 1992, and also sections 43-2504 and 43-2514, Revised Statutes Supplement, 1992, are repealed.

Sec. 32. Since an emergency exists, this act shall be in full force and take effect, from and after its passage and approval, according to law.