

HEALTH AND HUMAN SERVICES COMMITTEE OF THE NEBRASKA LEGISLATURE

Report as required by Neb. Rev. Stat. 84-948

Committee Members

Senator Brian Hardin, Chairperson, District 48

Senator John Fredrickson, Vice-Chairperson, District 20

Senator Merv Riepe, District 12

Senator Glen Meyer, District 17

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Occupational Board Reform Act

The Legislature passed the Occupational Board Reform Act in 2018 (Neb. Rev. Stat. §§ 84-901 to 84-920) with an operative date of July 1, 2019. The act requires that:

“Beginning in 2019, each standing committee of the Legislature shall annually review and analyze approximately twenty percent of the occupational regulations within the jurisdiction of the committee and prepare and submit an annual report electronically to the Clerk of the Legislature by December 15 of each year as provided in this section. Each committee shall complete this process for all occupational regulations within its jurisdiction within five years and every five years thereafter. Each report shall include the committee's recommendations regarding whether the occupational regulations should be terminated, continued, or modified.” (Neb. Rev. Stat. § 84-948)

Committee Findings

Neb. Rev. Stat. 84-948 requires the report to include the following with answers in bold:

(3) A committee's report shall include, but not be limited to, the following:

(a) The title of the regulated occupation and the name of the occupational board responsible for enforcement of the occupational regulations.

Medical Radiographer and Limited Medical Radiographer; Board of Medical Radiography

The Board of Medical Radiography provides recommendations to the Department of Health and Human Services regarding the issuance or denial of credentials, and provides recommendations to the Department of Health and Human Services regarding rules and regulations to carry out the Uniform Credentialing Act

(b) The statutory citation or other authorization for the creation of the occupational regulations and occupational board;

Neb. Rev. Stat. 38-1901 to 38-1920

(c) The number of members of the occupational board and how the members are appointed;

5 members appointed by the Board of Health; no legislative approval is required

(d) The qualifications for membership on the occupational board;

The Board of Medical Radiography is made up of five professional members, including four medical radiographers and one limited radiographer. The professional members shall have held and maintained an active credential and be and have been actively engaged in the practice of his or her profession for a period of five years just preceding his or her appointment and shall maintain such credential and practice while serving as a board member.

(e) The number of times the occupational board is required to meet during the year and the number of times it actually met;

• **Required FY 2025-2024:**

2

• **Held FY 2025-2024:**

2-3

• Required FY 2024-2023:
2
• Held FY 2024-2023:
2-3
• Required FY 2023-2022:
2
• Held FY 2023-2022:
2-3
• Required FY 2022-2021:
2
• Held FY 2022-2021:
2-3
• Required FY 2021-2020:
2
• Held FY 2021-2020:
2-3

(f) Annual budget information for the occupational board for the five most recently completed fiscal years;

The Nebraska Board of Medical Radiography does not have a publicly separate or line-item state budget. Instead, it is an advisory board that operates under the administrative umbrella of the Nebraska Department of Health and Human Services (DHHS). Its regulatory and operational expenses are funded through the Professional and Occupational Credentialing Cash Fund.

While explicit, board-specific expenditure totals for the past five years (2021–2026) are not published as a standalone line-item, the state's credentialing cash fund data and historical reports outline the following key financial characteristics:

- **Funding Mechanism:** The board is completely cash-funded and self-sustaining through initial licensing, renewal, and administrative fees (e.g., standard licenses for Medical Radiographers cost \$146 biennially).
- **Operating Expenses:** Administrative and regulatory costs are dispersed directly by the DHHS Division of Public Health from the dedicated credentialing cash fund.
- **Board Member Compensation:** Board members receive a per diem of \$50 for days actively engaged in duties, in addition to standard travel and lodging reimbursements, which are generally nominal.
- **Historical Context:** In past legislative reviews, board-specific operational allocations for board-member expenses were historically budgeted at approximately \$8,000 annually.

To view overarching spending and check for specific, recently approved appropriations for the Division of Public Health and credentialing services, you can track agency-level disbursements on the [Nebraska Budget Information Portal](#).

(g) For the immediately preceding five calendar years, or for the period of time less than five years for which the information is practically available, the number of government certifications, occupational licenses, and registrations the occupational board has issued, revoke, denied, or assessed penalties against, listed anonymously and separately per type of credential, and the reasons for such revocations, denials, other penalties.

The exact count of medical radiographer licenses issued by the Nebraska Department of Health and Human Services (DHHS) Board of Medical Radiography over the past five years is not published in a single, readily available annual report.

(h) A review of the basic assumptions underlying the creation of the occupational regulations;

The regulations in Title 172, Chapter 93, appear to be consistent with the underlying statutory authority.

(i) A statement from the occupational board on the effectiveness of the occupational regulations

The Chair of the Board of Medical Radiography stated “As the Chair of the Board of Medical Radiography, [he has] spent 10 years watching our Board operate in a fair, transparent, responsible, and equitable manner. As a whole, the Board of Medical Radiography understands that we have a statutory and fiduciary responsibility to the State of Nebraska and to those that seek healthcare in our state. The Board also recognizes the responsibility it has to those holding a licensure for Radiography and takes deliberate steps to ensure that the practices observed by the Board are fair and equitable and that any punitive actions are proportionate to the infraction presented by the investigative division.”

- (j) A comparison of whether and how other states regulate the occupation;

Most states require licensure to practice as a Medical Radiographer or Limited Medical Radiographer. The states that do not require licensure or certification are: Alabama, Colorado, Georgia, Michigan, Missouri, North Carolina, and South Dakota. Also, the District of Columbia does not require licensure or certification.

Please see the following link from the American Society of Radiologic Technologists:

<https://www.asrt.org/main/standards-and-regulations/legislation-regulations-and-advocacy/states-that-regulate>

(4) Subject to subsection)5) of this section, each committee shall also analyze, and include in its report, whether the occupational regulations meet the policies stated in section 84-946 considering the following recommended courses of action for meeting such policies:

The regulations in Title 172, Chapter 93, appear to be consistent with the underlying statutory authority.

- (a) If the need is to protect consumers against fraud, the likely recommendation will be to strengthen powers under the Uniform Deceptive Trade Practices Act or require disclosures that will reduce misleading attributes of the specific goods or services:

N/A

- (b) If the need is to protect consumers unclean facilities or to promote general health and safety, the likely recommendation will be to require periodic inspections of such facilities;

N/A

- (c) If the need is protect consumers against potential damages from failure by providers to complete a contract fully or up to standards, the likely recommendation will be to require that providers be bonded:

N/A

- (d) If the need is to protect a person who is not party to a contract between the provider and consumer, the likely recommendation will be to require that the provider have insurance;

N/A

- (e) If the need is to protect consumers against potential damages by transient providers, the likely recommendation will be to require that providers register their businesses with the Secretary of State;

N/A

- (f) If the need is to protect consumers against a shortfall or imbalance of knowledge about the goods or services relative to the providers' knowledge, the likely recommendation will be to enact government certification; and

N/A

- (g) If the need is to address a systematic information shortfall such that a reasonable consumer is unable to distinguish between the quality of providers, there is an absence of institutions that provide adequate guidance to the consumer, and the consumer's inability to distinguish between providers and the lack of adequate guidance allows for undue risk of present, significant, and substantiated harms, the likely recommendation will be to enact an occupational license.

N/A

(5) If a lawful occupation is subject to the Nebraska Regulation of Health Professions Act, the analysis under subsection (4) of this section shall be made using the least restrictive method of regulation as set out in section 71-6222.

N/A

(6) In developing recommendations under this section, the committee shall review any report issued to the Legislature pursuant to the Nebraska Regulation of Health Professions Act, if applicable, and consider any findings or recommendations of such report related to the occupational regulations under review.

N/A

(7) If the committee finds that it is necessary to change occupational regulations, the committee shall recommend the least restrictive regulation consistent with the public interest and the policies in this section and section 84-946.

NA

Conclusion

The licenses, certifications registrations overseen by DHHS and the Board of Medical Radiography are intended to protect the health, safety, and welfare of Nebraskans. As a whole, regulation of genetic counselors is appropriate and balanced and does not need modification at this time.

