E AND R AMENDMENTS TO LB 644

Introduced by Wishart, 27, Chairman Enrollment and Review

- 1 1. Strike the original sections and all amendments thereto and
- 2 insert the following new sections:
- 3 Section 1. Section 2-301, Revised Statutes Cumulative Supplement,
- 4 2016, is amended to read:
- 5 2-301 Sections 2-301 to 2-304 2-305 shall be known and may be cited
- 6 as the Community Gardens Act.
- 7 Sec. 2. Section 2-3815, Reissue Revised Statutes of Nebraska, is
- 8 amended to read:
- 9 2-3815 (1) The Department of Agriculture shall establish an
- 10 agriculture promotion and development program. The department shall
- 11 employ a program director and one specialist in research techniques and
- 12 market development. Both individuals shall report directly to the
- 13 Director of Agriculture.
- 14 (2) The program shall concentrate on the identification and
- 15 development of opportunities to enhance profitability in agriculture and
- 16 to stimulate agriculture-related economic development. Program activities
- 17 may include, but not be limited to, (a) (1) promotion and market
- 18 development, (b) $\frac{(2)}{(2)}$ value-added processing of alternative and
- 19 traditional commodities, (c) (3) agricultural diversification, including
- 20 poultry development and aquaculture, (d) (4) agricultural cooperatives,
- 21 and (e) (5) alternative crops.
- 22 In order to carry out the purposes of this section, the program
- 23 director may, if he or she deems necessary, convene an advisory committee
- 24 to assist the program director in developing and implementing program
- 25 activities. Representatives from the Nebraska Food Processing Center, the
- 26 Cooperative Extension Service of the University of Nebraska, the
- 27 commodity boards, the Department of Economic Development, the United

- 1 States Department of Agriculture grant programs, and the private sector
- 2 may serve on such committee at the request of the program director. If an
- 3 advisory committee is convened, committee members shall not receive any
- 4 reimbursement for expenses.
- 5 (3) The Department of Agriculture shall serve as the facilitator,
- 6 coordinator, and catalyst for developments through and with the Nebraska
- 7 Food Processing Center, the Cooperative Extension Service of the
- 8 University of Nebraska, the commodity boards, the Department of Economic
- 9 Development, other state agencies, the United States Department of
- 10 Agriculture grant programs, and the private sector. It is the intent of
- 11 the Legislature that the department foster close working relationships
- 12 between production agriculture and existing programs for the purposes of
- 13 agricultural development and promotion. The department may enter into
- 14 such contracts as may be necessary to carry out the purposes of this
- 15 section.
- 16 (4) For purposes of this section, unless the context otherwise
- 17 requires, private sector <u>includes</u> shall <u>include</u>, but <u>is</u> not be limited
- 18 to, representatives of food industry associations, lenders, or venture
- 19 capital groups.
- 20 Sec. 3. Section 32-204, Reissue Revised Statutes of Nebraska, is
- 21 amended to read:
- 22 32-204 The Election Administration Fund is hereby created. The fund
- 23 shall consist of federal funds, state funds, gifts, and grants
- 24 appropriated for the administration of elections. The Secretary of State
- 25 shall use the fund for voting systems, provisional voting, computerized
- 26 statewide voter registration lists, voter registration, training or
- 27 informational materials related to elections, and any other costs related
- 28 to elections. Any money in the fund available for investment shall be
- 29 invested by the state investment officer pursuant to the Nebraska Capital
- 30 Expansion Act and the Nebraska State Funds Investment Act. The State
- 31 Treasurer shall transfer any funds in the Carbon Sequestration Assessment

- 1 Cash Fund on the effective date of this act to the Election
- 2 <u>Administration Fund.</u>
- 3 Sec. 4. Section 38-2701, Reissue Revised Statutes of Nebraska, is
- 4 amended to read:
- 5 38-2701 Sections 38-2701 to 38-2711 38-2712 shall be known and may
- 6 be cited as the Perfusion Practice Act.
- 7 Sec. 5. Section 38-2703, Reissue Revised Statutes of Nebraska, is
- 8 amended to read:
- 9 38-2703 For purposes of the Perfusion Practice Act:
- (1) Board means the Board of Medicine and Surgery; 10
- (2) Committee means the Perfusionist Committee created under section 11
- 12 38-2712;
- 13 (2) (3) Extracorporeal circulation means the diversion of a
- 14 patient's blood through a heart-lung machine or a similar device that
- 15 assumes the functions of the patient's heart, lungs, kidney, liver, or
- other organs; 16
- 17 (3) (4) Perfusion means the functions necessary for the support,
- treatment, measurement, or supplementation of the cardiovascular, 18
- circulatory, and respiratory systems or other organs, or a combination of 19
- 20 such activities, and to ensure the safe management of physiologic
- 21 functions by monitoring and analyzing the parameters of the systems under
- 22 an order and under the supervision of a licensed physician, including:
- 23 (a) The use of extracorporeal circulation, long-term cardiopulmonary
- 24 support techniques including extracorporeal carbon dioxide removal and
- extracorporeal membrane oxygenation, and associated therapeutic and 25
- 26 diagnostic technologies;
- 27 (b) Counterpulsation, ventricular assistance, autotransfusion, blood
- 28 conservation techniques, myocardial and organ preservation,
- 29 extracorporeal life support, and isolated limb perfusion;
- 30 (c) The use of techniques involving blood management, advanced life
- 31 support, and other related functions; and

- (d) In the performance of the acts described in subdivisions (a) 1
- 2 through (c) of this subdivision:
- 3 (i) The administration of:
- (A) Pharmacological and therapeutic agents; and 4
- 5 (B) Blood products or anesthetic agents through the extracorporeal
- 6 circuit or through an intravenous line as ordered by a physician;
- 7 (ii) The performance and use of:
- (A) Anticoagulation monitoring and analysis; 8
- 9 (B) Physiologic monitoring and analysis;
- 10 (C) Blood gas and chemistry monitoring and analysis;
- 11 (D) Hematologic monitoring and analysis;
- (E) Hypothermia and hyperthermia; 12
- (F) Hemoconcentration and hemodilution; and 13
- 14 (G) Hemodialysis; and
- 15 (iii) The observation of signs and symptoms related to perfusion
- services, the determination of whether the signs and symptoms exhibit 16
- 17 abnormal characteristics, and the implementation of appropriate
- reporting, clinical perfusion protocols, or changes in, or the initiation 18
- 19 of, emergency procedures; and
- 20 (4) (5) Perfusionist means a person who is licensed to practice
- 21 perfusion pursuant to the Perfusion Practice Act.
- 22 Sec. 6. Section 44-5224, Reissue Revised Statutes of Nebraska, is
- 23 amended to read:
- 24 44-5224 The purposes of the Small Employer Health Insurance
- Availability Act are to promote the availability of health insurance 25
- 26 coverage to small employers regardless of their health status or claims
- 27 experience, to prevent abusive rating practices, to require disclosure of
- rating practices to purchasers, to establish rules regarding renewability 28
- 29 of coverage, to establish limitations on the use of preexisting condition
- 30 exclusions, to provide for development of basic and standard health
- benefit plans to be offered to all small employers, to provide for 31

- 1 establishment of a reinsurance program, and to improve the overall
- 2 fairness and efficiency of the small group health insurance market. The
- 3 act is not intended to provide a comprehensive solution to the problem of
- 4 affordability of health care or health insurance.
- 5 Sec. 7. Section 44-5230, Reissue Revised Statutes of Nebraska, is
- 6 amended to read:
- 7 44-5230 Basic health benefit plan shall mean a lower cost health
- benefit plan regulated by the Department of Insurance board. 8
- 9 Sec. 8. Section 44-5255, Reissue Revised Statutes of Nebraska, is
- amended to read: 10
- 44-5255 Standard health benefit plan shall mean a health benefit 11
- plan regulated by the <u>Department of Insurance</u> board. 12
- Sec. 9. Section 44-5258, Reissue Revised Statutes of Nebraska, is 13
- 14 amended to read:
- 15 44-5258 (1) Premium rates for health benefit plans subject to the
- Small Employer Health Insurance Availability Act shall be subject to the 16
- 17 following provisions:
- (a) The index rate for a rating period for any class of business 18
- 19 shall not exceed the index rate for any other class of business by more
- 20 than twenty percent;
- 21 (b) For a class of business, the premium rates charged during a
- 22 rating period to small employers with similar case characteristics for
- 23 the same or similar coverage or the rates that could be charged to such
- 24 employers under the rating system for that class of business shall not
- vary from the index rate by more than twenty-five percent of the index 25
- 26 rate;
- 27 (c) The percentage increase in the premium rate charged to a small
- employer for a new rating period may not exceed the sum of the following: 28
- 29 (i) The percentage change in the new business premium rate measured
- 30 from the first day of the prior rating period to the first day of the new
- rating period. In the case of a health benefit plan into which the small 31

- 1 employer carrier is no longer enrolling new small employers, the small
- 2 employer carrier shall use the percentage change in the base premium rate
- 3 if such change does not exceed, on a percentage basis, the change in the
- 4 new business premium rate for the most similar health benefit plan into
- 5 which the small employer carrier is actively enrolling new small
- 6 employers;
- 7 (ii) Any adjustment, not to exceed fifteen percent annually and
- 8 adjusted pro rata for rating periods of less than one year, due to the
- 9 claim experience, health status, or duration of coverage of the employees
- 10 or dependents of the small employer as determined from the small employer
- 11 carrier's rate manual for the class of business; and
- 12 (iii) Any adjustment due to change in coverage or change in the case
- 13 characteristics of the small employer as determined from the small
- 14 employer carrier's rate manual for the class of business;
- 15 (d) Adjustments in rates for claim experience, health status, and
- 16 duration of coverage shall not be charged to individual employees or
- 17 dependents. Any such adjustment shall be applied uniformly to the rates
- 18 charged for all employees and dependents of the small employer;
- (e) Premium rates for health benefit plans shall comply with the
- 20 requirements of this section notwithstanding any assessments paid or
- 21 payable by small employer carriers pursuant to section 44-5261;
- 22 (f) A small employer carrier may utilize industry as a case
- 23 characteristic in establishing premium rates, provided that the highest
- 24 rate factor associated with any industry classification shall not exceed
- 25 the lowest rate factor associated with any industry classification by
- 26 more than fifteen percent;
- 27 (g) In the case of health benefit plans delivered or issued for
- 28 delivery prior to January 1, 1995, a premium rate for a rating period may
- 29 exceed the ranges set forth in subdivisions (a) and (b) of this
- 30 subsection for a period of three years following January 1, 1995. In such
- 31 case, the percentage increase in the premium rate charged to a small

employer for a new rating period shall not exceed the sum of the 1

- 2 following:
- 3 (i) The percentage change in the new business premium rate measured
- from the first day of the prior rating period to the first day of the new 4
- 5 rating period. In the case of a health benefit plan into which the small
- 6 employer carrier is no longer enrolling new small employers, the small
- 7 employer carrier shall use the percentage change in the base premium rate
- 8 if such change does not exceed, on a percentage basis, the change in the
- 9 new business premium rate for the most similar health benefit plan into
- which the small employer carrier is actively enrolling new small 10
- 11 employers; and
- 12 (ii) Any adjustment due to change in coverage or change in the case
- characteristics of the small employer as determined from the carrier's 13
- 14 rate manual for the class of business;
- 15 (h)(i) Small employer carriers shall apply rating factors, including
- case characteristics, consistently with respect to all small employers in 16
- 17 a class of business. Rating factors shall produce premiums for identical
- groups which differ only by the amounts attributable to plan design and 18
- do not reflect differences due to the nature of the groups assumed to 19
- 20 select particular health benefit plans.
- 21 (ii) A small employer carrier shall treat all health benefit plans
- 22 issued or renewed in the same calendar month as having the same rating
- 23 period;
- 24 (i) For the purposes of this subsection, a health benefit plan that
- contains a restricted network provision shall not be considered similar 25
- 26 coverage to a health benefit plan that does not contain such a provision
- 27 if the restriction of benefits to network providers results
- substantial differences in claim costs; 28
- 29 (j) The small employer carrier shall not use case characteristics,
- 30 other than age, gender, industry, geographic area, family composition,
- and group size without the prior approval of the director; and 31

- 1 (k) The director may establish regulations to implement the
- 2 provisions of this section and to assure that rating practices used by
- 3 small employer carriers are consistent with the purposes of the act,
- 4 including regulations that:
- 5 (i) Assure that differences in rates charged for health benefit
- 6 plans by small employer carriers are reasonable and reflect objective
- 7 differences in plan design, not including differences due to the nature
- 8 of the groups assumed to select particular health benefit plans; and
- 9 (ii) Prescribe the manner in which case characteristics may be used
- 10 by small employer carriers.
- 11 (2) A small employer carrier shall not transfer a small employer
- 12 involuntarily into or out of a class of business. A small employer
- 13 carrier shall not offer to transfer a small employer into or out of a
- 14 class of business unless such offer is made to transfer all small
- 15 employers in the class of business without regard to case
- 16 characteristics, claim experience, health status, or duration of coverage
- 17 since issue.
- 18 (3) The director may suspend for a specified period the application
- 19 of subdivision (1)(a) of this section as to the premium rates applicable
- 20 to one or more small employers included within a class of business of a
- 21 small employer carrier for one or more rating periods upon a filing by
- 22 the small employer carrier and a finding by the director either that the
- 23 suspension is reasonable in light of the financial condition of the small
- 24 employer carrier or that the suspension would enhance the efficiency and
- 25 fairness of the marketplace for small employer health insurance.
- 26 (4) In connection with the offering for sale of any health benefit
- 27 plan to a small employer, a small employer carrier shall make a
- 28 reasonable disclosure, as part of its solicitation and sales materials,
- 29 of all of the following:
- 30 (a) The extent to which premium rates for a specified small employer
- 31 are established or adjusted based upon the actual or expected variation

- in claims costs or actual or expected variation in health status of the 1
- 2 employees of the small employer and their dependents;
- 3 (b) The provisions of the health benefit plan concerning the small
- employer carrier's right to change premium rates and the factors, other 4
- 5 than claim experience, that affect changes in premium rates;
- 6 (c) The provisions relating to the renewability of policies and 7 contracts; and
- 8 (d) The provisions relating to any preexisting condition provision.
- 9 (5)(a) Each small employer carrier shall maintain at its principal
- place of business a complete and detailed description of its rating 10
- 11 practices and renewal underwriting practices, including information and
- 12 documentation that demonstrate that its rating methods and practices are
- based upon commonly accepted actuarial assumptions and are in accordance 13
- 14 with sound actuarial principles.
- 15 (b) Each small employer carrier shall file with the director
- annually on or before March 15, an actuarial certification certifying 16
- that the carrier is in compliance with the act and that the rating 17
- methods of the small employer carrier are actuarially sound. Such 18
- certification shall be in a form and manner, and shall contain such 19
- 20 information, as specified by the director. A copy of the certification
- 21 shall be retained by the small employer carrier at its principal place of
- 22 business.
- 23 (c) A small employer carrier shall make the information and
- 24 documentation described in subdivision (a) of this subsection available
- to the director upon request. Except in cases of violations of the act, 25
- 26 the information shall be considered proprietary and trade secret
- 27 information and shall not be subject to disclosure by the director to
- persons outside of the Department of Insurance except as agreed to by the 28
- 29 small employer carrier or as ordered by a court of competent
- 30 jurisdiction.
- Sec. 10. Section 44-5266, Reissue Revised Statutes of Nebraska, is 31

amended to read: 1

- 2 44-5266 (1) Each small employer carrier shall actively market health
- 3 benefit plan coverage, including the basic health benefit plans and
- standard health benefit plans, to eligible small employers in the state. 4
- 5 If a small employer carrier denies coverage to a small employer on the
- 6 basis of the health status or claims experience of the small employer or
- 7 its employees or dependents, the small employer carrier shall offer the
- 8 small employer the opportunity to purchase a basic health benefit plan
- 9 and a standard health benefit plan.
- (2)(a) Except as provided in subdivision (b) of this subsection, no 10
- 11 small employer carrier, agent, or broker shall, directly or indirectly,
- 12 engage in the following activities:
- (i) Encouraging or directing small employers to refrain from filing 13
- 14 an application for coverage with the small employer carrier because of
- 15 the health status, claims experience, industry, occupation, or geographic
- location of the small employer; or 16
- 17 (ii) Encouraging or directing small employers to seek coverage from
- another carrier because of the health status, claims experience, 18
- industry, occupation, or geographic location of the small employer. 19
- 20 (b) The provisions of subdivision (a) of this subsection shall not
- 21 apply with respect to information provided by a small employer carrier,
- 22 an agent, or a broker to a small employer regarding the established
- 23 geographic service area or a restricted network provision of a small
- 24 employer carrier.
- (3)(a) Except as provided in subdivision (b) of this subsection, no 25
- 26 small employer carrier shall, directly or indirectly, enter into any
- 27 contract, agreement, or arrangement with an agent or broker that provides
- for or results in the compensation paid to an agent or broker for the 28
- 29 sale of a health benefit plan to be varied because of the health status,
- 30 claims experience, industry, occupation, or geographic location of the
- 31 small employer.

- 1 (b) The provisions of subdivision (a) of this subsection shall not
- 2 apply with respect to a compensation arrangement that provides
- 3 compensation to an agent or broker on the basis of percentage of premium
- 4 except that the percentage shall not vary because of the health status,
- 5 claims experience, industry, occupation, or geographic area of the small
- 6 employer.
- 7 (4) A small employer carrier shall provide reasonable compensation,
- 8 as provided under the plan of operation of the program, to an agent or
- 9 broker, if any, for the sale of a basic health benefit plan or a standard
- 10 health benefit plan.
- 11 (5) No small employer carrier, agent, or broker may induce or
- 12 otherwise encourage a small employer to separate or otherwise exclude an
- 13 employee from health coverage or benefits provided in connection with the
- 14 employee's employment.
- 15 (6) Denial by a small employer carrier of an application for
- 16 coverage from a small employer shall be in writing and shall state the
- 17 reason or reasons for the denial.
- 18 (7) The director may establish rules and regulations setting forth
- 19 additional standards to provide for the fair marketing and broad
- 20 availability of health benefit plans to small employers in this state.
- (8)(a) A violation of this section by a small employer carrier, an
- 22 agent, or a broker shall be an unfair trade practice in the business of
- 23 insurance under the Unfair Insurance Trade Practices Act.
- (b) If a small employer carrier enters into a contract, agreement,
- 25 or other arrangement with a third-party administrator to provide
- 26 administrative, marketing, or other services related to the offering of
- 27 health benefit plans to small employers in this state, the third-party
- 28 administrator shall be subject to this section as if it were a small
- 29 employer carrier.
- 30 Sec. 11. Section 60-4,105, Reissue Revised Statutes of Nebraska, is
- 31 amended to read:

60-4,105 (1) Unless otherwise provided by statute, any person 1 2 aggrieved by a final decision or order of the director or the Department 3 of Motor Vehicles to cancel, suspend, revoke, or refuse to issue or renew any operator's license, any decision of the director-made after 4 5 consideration of advice from the Health Advisory Board, or suspension of 6 an operator's license under the License Suspension Act may appeal to 7 either the district court of the county in which the person originally 8 applied for the license or the district court of the county in which such 9 person resides or, in the case of a nonresident, to the district court of Lancaster County within thirty days after the date of the final decision 10 11 or order.

- 12 (2) Summons shall be served on the department within thirty days after the filing of the petition in the manner provided for service of a 13 14 summons in section 25-510.02. Within thirty days after service of the 15 petition and summons, the department shall prepare and transmit to the petitioner a certified copy of the official record of the proceedings 16 17 before the department. The department shall require payment of a fivedollar fee prior to the transmittal of the official record. 18 petitioner shall file the transcript with the court within fourteen days 19 20 after receiving the transcript from the department.
- (3) The district court shall hear the appeal as in equity without a jury and determine anew all questions raised before the director. Either party may appeal from the decision of the district court to the Court of Appeals.
- 25 (4) The appeal procedures described in the Administrative Procedure 26 Act shall not apply to this section.
- Sec. 12. Section 60-4,114, Revised Statutes Cumulative Supplement, 28 2016, is amended to read:
- 60-4,114 (1) The county treasurer may employ such additional clerical help as may be necessary to assist him or her in the performance of the ministerial duties required of him or her under the Motor Vehicle

Operator's License Act and, for such additional expense, shall be 1

- 2 reimbursed as set out in section 60-4,115.
- 3 (2) The director may, in his or her discretion, appoint department
- personnel to examine all applicants who apply for an initial license or 4
- 5 whose licenses have been revoked or canceled to ascertain such person's
- 6 ability to operate a motor vehicle properly and safely.
- 7 Except as otherwise provided in section 60-4,122,
- 8 application process, in addition to the other requisites of the act,
- 9 shall include the following:
- (a) An inquiry into the medical condition and visual ability of the 10
- 11 applicant to operate a motor vehicle;
- 12 (b) An inquiry into the applicant's ability to drive and maneuver a
- motor vehicle, except that no driving skills test shall be conducted 13
- 14 using an autocycle; and
- 15 (c) An inquiry touching upon the applicant's knowledge of the motor
- vehicle laws of this state, which shall include sufficient questions to 16
- 17 indicate familiarity with the provisions thereof.
- (4) If an applicant is denied or refused a certificate for license 18
- or a license is canceled, such applicant or licensee shall have the right 19
- to an immediate appeal to the director from the decision. It shall be the 20
- 21 duty of the director to review the appeal and issue a final order, to be
- 22 made not later than ten days after the receipt of the appeal by the
- 23 director. The director, except that if the director requests the advice
- 24 of the Health Advisory Board on the matter, the director shall have up to
- 25 forty-five days after the day a medical or vision problem is referred to
- 26 him or her to consult with members of the board to obtain the medical
- 27 opinion necessary to make a decision and shall issue a final order not
- later than ten days following receipt of the medical opinion if the 28
- 29 applicant or licensee submits reports from a physician of his or her
- 30 choice for the director's consideration as provided in section
- 60-4,118.03. The applicant or licensee who files an appeal pursuant to 31

- 1 this section shall notify the director in writing if he or she intends to
- 2 <u>submit records or reports for consideration. Such notice must be received</u>
- 3 by the director not later than ten days after an appeal is filed pursuant
- 4 to this section to stay the director's decision until after the
- 5 <u>consideration of such records or reports as provided in section</u>
- 6 <u>60-4,118.03.</u> After consideration of <u>evidence in the records of the</u>
- 7 applicant or licensee, including any records submitted by the applicant
- 8 <u>or licensee</u> the advice of the board, the director shall make a
- 9 determination of the applicant's physical or mental ability of the
- 10 applicant or licensee to operate a motor vehicle and shall issue a final
- order. The order shall be in writing, shall be accompanied by findings of
- 12 fact and conclusions of law, and shall be sent by regular United States
- 13 mail to the applicant's last-known address of the applicant or licensee.
- 14 The order may be appealed as provided in section 60-4,105.
- 15 Sec. 13. Section 60-4,118, Reissue Revised Statutes of Nebraska, is
- 16 amended to read:
- 17 60-4,118 (1) No operator's license shall be granted to any applicant
- 18 until such applicant satisfies the examiner that he or she possesses
- 19 sufficient powers of eyesight to enable him or her to obtain a Class O
- 20 license and to operate a motor vehicle on the highways of this state with
- 21 a reasonable degree of safety. The Department of Motor Vehicles, with the
- 22 advice of the Health Advisory Board, shall adopt and promulgate rules and
- 23 regulations:
- 24 (a) Requiring a minimum acuity level of vision. Such level may be
- 25 obtained through the use of standard eyeglasses, contact lenses, or
- 26 bioptic or telescopic lenses which are specially constructed vision
- 27 correction devices which include a lens system attached to or used in
- 28 conjunction with a carrier lens; and
- 29 (b) Requiring a minimum field of vision. Such field of vision may be
- 30 obtained through standard eyeglasses, contact lenses, or the carrier lens
- 31 of the bioptic or telescopic lenses.

(2) If a vision aid is used by the applicant to meet the vision 1 2 requirements of this section, the operator's license of the applicant 3 shall be restricted to the use of such vision aid when operating the motor vehicle. If the applicant fails to meet the vision requirements, 4 5 the examiner shall require the applicant to present an optometrist's or 6 ophthalmologist's statement certifying the vision reading obtained when 7 testing the applicant within ninety days of the applicant's license 8 examination. If the vision reading meets the vision requirements 9 prescribed by the department, the vision requirements of this section shall have been met. If the vision reading demonstrates that the 10 11 applicant is required to use bioptic or telescopic lenses to operate a 12 motor vehicle, the statement from the optometrist or ophthalmologist shall also indicate when the applicant needs to be reexamined for 13 14 purposes of meeting the vision requirements for an operator's license as 15 prescribed by the department. If such time period is two years or more after the date of the application, the license shall be valid for two 16 17 years. If such time period is less than two years, the license shall be valid for such time period. 18

(3) If the applicant for an operator's license discloses that he or 19 20 she has any other physical impairment which may affect the safety of 21 operation by such applicant of a motor vehicle, the examiner shall 22 require the applicant to show cause why such license should be granted 23 and, through such personal examination and demonstration as may be 24 prescribed by the director with the advice of the Health Advisory Board, to show the necessary ability to safely operate a motor vehicle on the 25 26 highways. The director may also require the person to appear before the 27 board or a designee of the board. If the examiner, board, or designee is then satisfied that such applicant has the ability to safely operate a 28 29 motor vehicle, an operator's license may be issued to the applicant 30 subject, at the discretion of the director, to a limitation to operate only such motor vehicles at such time, for such purpose, and within such 31

- 1 area as the license shall designate.
- 2 (4)(a) The director may, when requested by a law enforcement
- 3 officer, when the director has reason to believe that a person may be
- 4 physically or mentally incompetent to operate a motor vehicle, or when a
- 5 person's driving record appears to the department to justify an
- 6 examination, request the advice of the Health Advisory Board and may give
- 7 notice to the person to appear before an examiner, the board, or a
- 8 designee of the director for examination concerning the person's ability
- 9 to operate a motor vehicle safely. Any such request by a law enforcement
- 10 officer shall be accompanied by written justification for such request
- 11 and shall be approved by a supervisory law enforcement officer, police
- 12 chief, or county sheriff.
- 13 (b) A refusal to appear before an examiner, the board, or a designee
- 14 of the director for an examination after notice to do so shall be
- 15 unlawful and shall result in the immediate cancellation of the person's
- 16 operator's license by the director.
- 17 (c) If the person cannot qualify at the examination by an examiner,
- 18 his or her operator's license shall be immediately surrendered to the
- 19 examiner and forwarded to the director who shall cancel the person's
- 20 operator's license.
- 21 (d) If in the opinion of the board the person cannot qualify at the
- 22 examination by the board, the board shall advise the director. If the
- 23 director determines after consideration of the advice of the board that
- 24 the person lacks the physical or mental ability to operate a motor
- 25 vehicle, the director shall notify the person in writing of the decision.
- 26 Upon receipt of the notice, the person shall immediately surrender his or
- 27 her operator's license to the director who shall cancel the person's
- 28 operator's license.
- 29 (e) Refusal to surrender an operator's license on demand shall be
- 30 unlawful, and any person failing to surrender his or her operator's
- 31 license as required by this subsection shall be guilty of a Class III

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1 misdemeanor.

Sec. 14. Section 60-4,118.03, Reissue Revised Statutes of Nebraska, 2

3 is amended to read:

60-4,118.03 Whenever the director reviews the denial or cancellation 4 5 of an operator's license because of mental, medical, or vision problems 6 that may affect the person's ability to safely operate a motor vehicle 7 requests the advice of the Health Advisory Board concerning the physical or mental ability of an applicant for or holder of an operator's license 8 9 to operate a motor vehicle as provided in sections 60-4,114 and 60-4,118, the <u>director</u> may consider board may formulate its advice from records and 10 reports <u>from a qualified physician</u> or may cause an examination and report 11 12 to be made by one or more members of the board or any qualified person designated by the board. The applicant or licensee may cause a written 13 14 report to be forwarded to the <u>director</u> board by a physician of his or her 15 choice pursuant to an immediate appeal to the director under section 60-4,114. The director shall grant reasonable time for the applicant or 16 licensee to submit such records. 17 The director shall give due consideration to any such report. 18

Reports received by the director or made by the board or any of its members for the purpose of assisting the director in determining whether a person is qualified to be licensed shall be for the confidential use of the board, the director, and any designees of the director and may not be divulged to any person other than the applicant or licensee or used in evidence in any legal proceeding, except that a report may be admitted in an appeal of an order of the director based on the report. Any person aggrieved by a decision of the director made <u>pursuant to this section</u> after consideration of advice given by the board may appeal the decision as provided in section 60-4,105.

29 No member of the board and no person examining any applicant or licensee shall be liable in tort or otherwise for any opinion, 30 recommendation, or report presented to the board or the director if such 31

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- action was taken in good faith and without malice. 1
- Sec. 15. Section 60-4,146, Revised Statutes Cumulative Supplement, 2
- 3 2016, is amended to read:
- 60-4,146 (1) In addition to certifying himself or herself under this 4
- 5 section, an applicant shall also certify himself or herself under section
- 6 60-4,144.01.
- 7 (2) Upon making application pursuant to section 60-4,144
- 8 60-4,148.01, any applicant who operates or expects to operate a
- 9 commercial motor vehicle in interstate or foreign commerce and who is not
- subject to 49 C.F.R. part 391 shall certify that he or she is not subject 10
- 11 to 49 C.F.R. part 391. Any applicant making certification pursuant to
- 12 this subsection shall meet the physical and vision requirements
- established in section 60-4,118 and shall be subject to the provisions of 13
- 14 such section relating to the Health Advisory Board.
- 15 (3) Upon making application pursuant to section 60-4,144
- any applicant who operates or expects to operate a 16
- 17 commercial motor vehicle solely in intrastate commerce and who is subject
- to 49 C.F.R. part 391 adopted pursuant to section 75-363 shall certify 18
- that the applicant meets the qualification requirements of 49 C.F.R. part 19
- 20 391.
- 21 (4) Upon making application for a CLP-commercial learner's permit or
- 22 commercial driver's license, any applicant who operates or expects to
- 23 operate a commercial motor vehicle solely in intrastate commerce and who
- 24 is not subject to 49 C.F.R. part 391 adopted pursuant to section 75-363
- shall certify that he or she is not subject to 49 C.F.R. part 391. Any 25
- 26 applicant making certification pursuant to this subsection shall meet the
- 27 physical and vision requirements established in section 60-4,118 and
- shall be subject to the provisions of such section—relating to the Health 28
- 29 Advisory Board.
- 30 (5) An applicant who certifies that he or she is not subject to 49
- C.F.R. part 391 under subsection (2) or (4) of this section shall answer 31

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- 1 the following questions on the application:
- 2 (a) Have you within the last three months (e.g. due to diabetes,
- 3 epilepsy, mental illness, head injury, stroke, heart condition,
- 4 neurological disease, etc.):
- 5 (i) lost voluntary control or consciousness ... yes ... no
- 6 (ii) experienced vertigo or multiple episodes of dizziness or
- 7 fainting ... yes ... no
- (iii) experienced disorientation ... yes ... no 8
- 9 (iv) experienced seizures ... yes ... no
- (v) experienced impairment of memory, memory loss ... yes ... no 10
- 11 Please explain:
- (b) Do you experience any condition which affects your ability to 12
- operate a motor vehicle? (e.g. due to loss of, or impairment of, foot, 13
- 14 leg, hand, arm; neurological or neuromuscular disease, etc.) ... yes ...
- 15 no
- 16 Please explain:
- 17 (c) Since the issuance of your last driver's license/permit has your
- health or medical condition changed or worsened? ... yes ... no 18
- Please explain, including how the above affects your ability to 19
- 20 drive:
- 21 Sec. 16. Section 68-908, Revised Statutes Cumulative Supplement,
- 22 2016, is amended to read:
- 23 68-908 (1) The department shall administer the medical assistance
- 24 program.
- 25 (2) The department may (a) enter into contracts and interagency
- 26 agreements, (b) adopt and promulgate rules and regulations, (c) adopt fee
- 27 schedules, (d) apply for and implement waivers and managed care plans for
- services for eligible recipients, including services under the Nebraska 28
- 29 Behavioral Health Services Act, and (e) perform such other activities as
- 30 necessary and appropriate to carry out its duties under the Medical
- Assistance Act. A covered item or service as described in section 68-911 31

- 1 that is furnished through a school-based health center, furnished by a
- 2 provider, and furnished under a managed care plan pursuant to a waiver
- 3 does not require prior consultation or referral by a patient's primary
- 4 care physician to be covered. Any federally qualified health center
- 5 providing services as a sponsoring facility of a school-based health
- 6 center shall be reimbursed for such services provided at a school-based
- 7 health center at the federally qualified health center reimbursement
- 8 rate.
- 9 (3) The department shall maintain the confidentiality of information
- 10 regarding applicants for or recipients of medical assistance and such
- 11 information shall only be used for purposes related to administration of
- 12 the medical assistance program and the provision of such assistance or as
- 13 otherwise permitted by federal law.
- 14 (4)(a) The department shall prepare an annual summary and analysis
- 15 of the medical assistance program for legislative and public review,
- 16 including, but not limited to, a description of eligible recipients,
- 17 covered services, provider reimbursement, program trends and projections,
- 18 program budget and expenditures, the status of implementation of the
- 19 Medicaid Reform Plan, and recommendations for program changes.
- 20 (b) The department shall provide a draft report of such summary and
- 21 analysis to the Medicaid Reform Council no later than September 15 of
- 22 each year. The <u>department</u> council shall conduct a public meeting no later
- 23 than October 1 of each year to discuss and receive public comment
- 24 regarding such report. The <u>department</u> council shall <u>include</u> provide any
- 25 comments and recommendations regarding such report in writing in a final
- 26 report to the department no later than November 1 of each year. The
- 27 department shall submit the α final report of such summary and analysis
- 28 to the Governor, and the Legislature, and the council no later than
- 29 December 1 of each year. The report submitted to the Legislature shall be
- 30 submitted electronically. Such final report shall include a response to
- 31 each written recommendation provided by the council.

Sec. 17. Section 68-909, Revised Statutes Cumulative Supplement, 1

- 2 2016, is amended to read:
- 3 68-909 (1) All contracts, agreements, rules, and regulations
- relating to the medical assistance program as entered into or adopted and 4
- 5 promulgated by the department prior to July 1, 2006, and all provisions
- 6 of the medicaid state plan and waivers adopted by the department prior to
- 7 July 1, 2006, shall remain in effect until revised, amended, repealed, or
- nullified pursuant to law. 8
- 9 (2) Prior to the adoption and promulgation of proposed rules and
- regulations under section 68-912 or relating to the implementation of 10
- 11 medicaid state plan amendments or waivers, the department shall provide a
- 12 report to the Governor, and the Legislature, and the Medicaid Reform
- Council no later than December 1 before the next regular session of the 13
- 14 Legislature summarizing the purpose and content of such proposed rules
- 15 and regulations and the projected impact of such proposed rules and
- regulations on recipients of medical assistance and medical assistance 16
- 17 expenditures. The report submitted to the Legislature shall be submitted
- 18 electronically. Any changes in medicaid copayments in fiscal year 2011-12
- are exempt from the reporting requirement of this subsection and the 19
- 20 requirements of section 68-912.
- 21 (3) The Medicaid Reform Council, no later than thirty days after the
- 22 date of receipt of any report under subsection (2) of this section, may
- 23 conduct a public meeting to receive public comment regarding such report.
- 24 The council shall promptly provide any comments and recommendations
- 25 regarding such report in writing to the department. Such comments and
- 26 recommendations shall be advisory only and shall not be binding on the
- 27 department, but the department shall promptly provide a written response
- to such comments or recommendations to the council. 28
- 29 (3) (4) The department shall monitor and shall periodically, as
- 30 necessary, but no less than biennially, report to the Governor, and the
- Legislature, and the Medicaid Reform Council on the implementation of 31

rules and regulations, medicaid state plan amendments, and waivers 1

- 2 adopted under the Medical Assistance Act and the effect of such rules and
- 3 regulations, amendments, or waivers on eligible recipients of medical
- assistance and medical assistance expenditures. The report submitted to 4
- 5 the Legislature shall be submitted electronically.
- 6 Sec. 18. Section 68-949, Reissue Revised Statutes of Nebraska, is
- 7 amended to read:
- 68-949 (1) It is the intent of the Legislature that the department 8
- 9 implement reforms to the medical assistance program such as those
- contained in the Medicaid Reform Plan, including (a) an incremental 10
- 11 expansion of home and community-based services for aged persons and
- 12 persons with disabilities consistent with such plan, (b) an increase in
- care coordination or disease management initiatives to better manage 13
- 14 medical assistance expenditures on behalf of high-cost recipients with
- 15 multiple or chronic medical conditions, and (c) other reforms as deemed
- necessary and appropriate by the department, in consultation with the 16
- 17 committee and the Medicaid Reform Council.
- 18 (2) (2) (a) The department shall develop recommendations based on a
- comprehensive analysis of various options available to the state under 19
- 20 applicable federal law for the provision of medical assistance to persons
- 21 with disabilities who are employed, including persons with a medically
- 22 disability, to enhance and replace current eligibility
- 23 provisions contained in subdivision (8) of section 68-915.
- 24 (b) The department shall provide a draft report of such
- 25 recommendations to the committee and the Medicaid Reform Council no later
- 26 than October 1, 2008. The council shall conduct a public meeting no later
- 27 than October 15, 2008, to discuss and receive public comment regarding
- such report. The council shall provide any comments and recommendations 28
- 29 regarding such report in writing to the department and the committee no
- 30 later than November 1, 2008. The department shall provide a final report
- of such recommendations to the Governor, the committee, and the council 31

1 no later than December 1, 2008.

- (3) (3)(a) The department shall develop recommendations for further 2 3 modification or replacement of the defined benefit structure of the medical assistance program. Such recommendations shall be consistent with 4 5 the public policy in section 68-905 and shall consider the needs and 6 resources of low-income Nebraska residents who are eligible or may become 7 eligible for medical assistance, the experience and outcomes of other 8 states that have developed and implemented such changes, and other 9 relevant factors as determined by the department.
- 10 (b) The department shall provide a draft report of such 11 recommendations to the committee and the Medicaid Reform Council no later 12 than October 1, 2008. The council shall conduct a public meeting no later 13 than October 15, 2008, to discuss and receive public comment regarding 14 such report. The council shall provide any comments and recommendations 15 regarding such report in writing to the department and the committee no 16 later than November 1, 2008. The department shall provide a final report 17 of such recommendations to the Governor, the committee, and the council no later than December 1, 2008. 18
- 19 Sec. 19. Section 68-1108, Revised Statutes Cumulative Supplement, 20 2016, is amended to read:
- 21 (1) On or before December 15, 2014, the Aging Nebraskans 68-1108 22 Task Force shall present electronically to the Legislature a report of 23 recommendations for the statewide strategic plan described in section 24 68-1107. The Department of Health and Human Services shall also annually report electronically to the Legislature the percentage growth of 25 26 medicaid spending for people over sixty-five years of age for no fewer 27 than five years following acceptance of the application to the State 28 Balancing Incentive Payments Program pursuant to section 81-3138.
- (2) The task force shall develop a state plan as provided in section

 68-1110 and electronically deliver the state plan to the Governor and the

 Legislature on or before December 15, 2016. The task force shall make a

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1 presentation of the state plan to the Health and Human Services Committee

- 2 of the Legislature on or before December 15, 2016.
- 3 Sec. 20. Section 71-457, Reissue Revised Statutes of Nebraska, is
- 4 amended to read:
- 5 71-457 (1) To protect the health, safety, and welfare of the public
- 6 and to insure to the greatest extent possible the efficient, adequate,
- 7 and safe practice of health care in any health care facility or health
- 8 care service licensed under the Health Care Facility Licensure Act, the
- 9 department shall adopt, promulgate, and enforce rules, regulations, and
- standards with respect to the different types of health care facilities 10
- 11 and health care services, except nursing facilities and skilled nursing
- 12 facilities, designed to further the accomplishment of the purposes of the
- act. Such rules, regulations, and standards shall be modified, amended, 13
- 14 or rescinded from time to time in the public interest by the department.
- 15 (2) The department, with the advice of the Nursing Home Advisory
- Council, shall adopt, promulgate, and enforce rules, regulations, and 16
- 17 standards with respect to nursing facilities and skilled nursing
- facilities. Such rules, regulations, and standards shall be in compliance 18
- with the Nebraska Nursing Home Act. Such rules, regulations, 19
- 20 standards shall be modified, amended, or rescinded from time to time in
- 21 the public interest by the department—with the advice of the Nursing Home
- 22 Advisory Council.
- Original sections 2-3815, 32-204, 38-2701, 38-2703, 23 Sec. 21.
- 24 44-5230, 44-5255, 44-5258, 44-5266, 60-4,105, 44-5224, 60-4,118,
- 60-4,118.03, 68-949, and 71-457, Reissue Revised Statutes of Nebraska, 25
- 26 and sections 2-301, 60-4,114, 60-4,146, 68-908, 68-909, and 68-1108,
- 27 Revised Statutes Cumulative Supplement, 2016, are repealed.
- The following sections are outright repealed: Sections 28 Sec. 22.
- 29 2-5301, 2-5302, 2-5303, 2-5305, 2-5306, 38-2712, 44-5231, 44-5246,
- 30 44-5248, 44-5251, 44-5261, 44-5263, 60-4,118.02, 60-4,118.04, 68-948,
- 71-6043, 71-6044, 71-6045, 71-6046, 71-6047, 71-6048, 71-6049, 71-6050, 31

71-6051, 71-6052, and 84-1205.01, Reissue Revised Statutes of Nebraska, 1

2 and sections 2-305, 44-8701, 44-8702, 44-8703, 44-8704, 44-8705, 44-8706,

- 3 50-429, 50-430, 50-431, 50-432, 50-433, 68-1107, 68-1109, 68-1110,
- 71-9201, 71-9202, 71-9203, and 71-9204, Revised Statutes Cumulative 4
- 5 Supplement, 2016.
- 6 2. On page 1, strike beginning with "2-945.02" in line 1 through
- 7 line 22 and insert "2-3815, 32-204, 38-2701, 38-2703, 44-5224, 44-5230,
- 8 44-5255, 44-5258, 44-5266, 60-4,105, 60-4,118, 60-4,118.03, 68-949, and
- 9 71-457, Reissue Revised Statutes of Nebraska, and sections 2-301,
- 68-909, and 68-1108, 10 60-4,114, 60-4,146, 68-908, Revised Statutes
- 11 Cumulative Supplement, 2016; to provide, change, and eliminate powers and
- 12 duties relating to the Department of Agriculture, the Department of
- Health and Human Services, the Department of Insurance, the Department of 13
- 14 Motor Vehicles, and the Director of Natural Resources; to provide for a
- 15 transfer of funds; to eliminate the community gardens task force, the
- value-added 16 advisory committee for agricultural promotion
- 17 development, the Carbon Sequestration Advisory Committee, the
- Perfusionist Committee, the Nebraska Small Employer Health Reinsurance 18
- Program, the Nebraska Exchange Stakeholder Commission, the Nebraska 19
- 20 Exchange Transparency Act, the Intergenerational Poverty Task Force, the
- 21 Health Advisory Board, the Medicaid Reform Council, the Aging Nebraskans
- 22 Task Force, the Nursing Home Advisory Council, the Health Care
- 23 Transparency Act, the Health Care Data Base Advisory Committee, and a
- 24 technical advisory committee to the State Records Board; to change and
- eliminate definitions; to change provisions relating to certain appeals 25
- 26 under the Motor Vehicle Operator's License Act; to eliminate programs,
- 27 councils, committees, and cash funds; to eliminate obsolete provisions;
- to harmonize provisions; to repeal the original sections; and to outright 28
- 29 repeal sections 2-5301, 2-5302, 2-5303, 2-5305, 2-5306, 38-2712, 44-5231,
- 30 44-5246, 44-5248, 44-5251, 44-5261, 44-5263, 60-4,118.02, 60-4,118.04,
- 68-948, 71-6043, 71-6044, 71-6045, 71-6046, 71-6047, 71-6048, 71-6049, 31

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1 71-6050, 71-6051, 71-6052, and 84-1205.01, Reissue Revised Statutes of

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- Nebraska, and sections 2-305, 44-8701, 44-8702, 44-8703, 44-8704, 2
- 44-8705, 44-8706, 50-429, 50-430, 50-431, 50-432, 50-433, 68-1107, 3
- 68-1109, 68-1110, 71-9201, 71-9202, 71-9203, and 71-9204, Revised 4
- 5 Statutes Cumulative Supplement, 2016.".
- 6 3. On page 2, strike lines 1 through 25.