LEGISLATIVE BILL 273

Approved by the Governor May 24, 2021

Introduced by Lowe, 37.

A BILL FOR AN ACT relating to youth rehabilitation and treatment centers; to A BILL FOR AN ACT relating to youth renabilitation and treatment centers; to amend section 83-364, Reissue Revised Statutes of Nebraska, and sections 28-934, 43-403, 43-407, 43-408, 48-101.01, 81-1316, 83-104, and 83-107.01, Revised Statutes Cumulative Supplement, 2020; to redefine terms; to change provisions relating to youth rehabilitation and treatment centers; to provide for motions for immediate change in placement; to harmonize provisions; and to repeal the original sections.
 Be it enacted by the people of the State of Nebraska,

Section 1. Section 28-934, Revised Statutes Cumulative Supplement, 2020, is amended to read:

28-934 (1) Any person who knowingly and intentionally strikes any public safety officer with any bodily fluid is guilty of assault with a bodily fluid against a public safety officer.

(2) Except as provided in subsection (3) of this section, assault with a bodily fluid against a public safety officer is a Class I misdemeanor.

(3) Assault with a bodily fluid against a public safety officer is a Class IIIA felony if the person committing the offense strikes with a bodily fluid the eyes, mouth, or skin of a public safety officer and knew the source of the bodily fluid was infected with the human immunodeficiency virus, hepatitis B, or hepatitis C at the time the offense was committed. (4) Upon a showing of probable cause by affidavit to a judge of this state

that an offense as defined in subsection (1) of this section has been committed and that identifies the probable source of the bodily fluid or bodily fluids used to commit the offense, the judge shall grant an order or issue a search warrant authorizing the collection of any evidence, including any bodily fluid or medical records or the performance of any medical or scientific testing or analysis, that may assist with the determination of whether or not the person committing the offense or the person from whom the person committing the offense obtained the bodily fluid or bodily fluids is infected with the human immunodeficiency virus, hepatitis B, or hepatitis C.

(5) As used in this section:

(a) Bodily fluid means any naturally produced secretion or waste product generated by the human body and shall include, but not be limited to, any quantity of human blood, urine, saliva, mucus, vomitus, seminal fluid, or feces: and

(b) Public safety officer includes any of the following persons who are engaged in the performance of their official duties at the time of the offense: A peace officer; a probation officer; a firefighter; an emergency care provider as defined in section 28-929.01; a health care professional as defined in section 28-929.01; an employee of a county, city, or village jail; an employee of the Department of Correctional Services; an employee of the secure youth confinement facility operated by the Department of Correctional Services, if the person committing the offense is committed to such facility; an employee of a youth rebabilitation and treatment center the Youth Pehabilitation and a youth rehabilitation and treatment center the Youth Rehabilitation and Treatment Center-Geneva or the Youth Rehabilitation and Treatment Center-Kearney; or an employee of the Department of Health and Human Services if the person committing the offense is committed as a dangerous sex offender under the Sex Offender Commitment Act.

Sec. 2. Section 43-403, Revised Statutes Cumulative Supplement, 2020, is amended to read:

43-403 For purposes of the Health and Human Services, Office of Juvenile Services Act:

(1) Aftercare means the control, supervision, and care exercised over juveniles who have been discharged from commitment;

(2) Committed means an order by a court committing a juvenile to the care and custody of the Office of Juvenile Services for treatment at a youth rehabilitation and treatment center identified in the court order;

(3) Community supervision means the control, supervision, and care exercised over juveniles when a commitment to the level of treatment of a youth rehabilitation and treatment center has not been ordered by the court;

(4) Emergency, for purposes of sections 43-427 to 43-430, means a public health emergency or a situation, including fire, flood, tornado, natural disaster, or damage to a youth rehabilitation and treatment center, that renders the youth rehabilitation and treatment center uninhabitable. Emergency does not include inadequate staffing;

(5) Evaluation means assessment of the juvenile's social, psychological, and educational development and needs, increcommendation as to an appropriate treatment plan; and physical, including а

(6) Treatment means the type of supervision, care, and rehabilitative services provided for the juvenile at a youth rehabilitation and treatment center operated by the Office of Juvenile Services.

Sec. 3. Section 43-407, Revised Statutes Cumulative Supplement, 2020, is

43-407 (1) The Office of Juvenile Services shall design and make available programs and treatment services through youth rehabilitation and treatment centers. The programs and treatment services through youth renabilitation and treatment centers. The programs and treatment services shall be evidence-based and based upon the individual or family evaluation process using evidence-based, validated risk and needs assessments to create an individualized treatment plan. The treatment plan shall be developed within fourteen days after admission and provided to the committing court and interested parties. The court may, on its own motion or upon the motion of an interested party, set a hearing to review the treatment plan.

(2) A juvenile may be committed by a court to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center operated and utilized in compliance with state law pursuant to a hearing described in subdivision (1)(b)(iii) of section 43-286. The office shall not change a juvenile's placement except as provided in this section. If a juvenile placed at a youth rehabilitation and treatment center is assessed as needing inpatient at a youth rehabilitation and treatment center is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the Office of Juvenile Services may arrange for such treatment to be provided at the Hastings Regional Center or may transition the juvenile to another inpatient or subacute residential treatment facility licensed as a treatment facility in the State of Nebraska and shall provide notice of the change in placement pursuant to subsection (3) of this section. Except in a case requiring emergency admission to an inpatient facility, the juvenile shall not be discharged by the Office of Juvenile Services until the juvenile has been returned to the court for a review of his or her conditions of probation and the juvenile has been transitioned to the clinically appropriate level of care the juvenile has been transitioned to the clinically appropriate level of care. Programs and treatment services shall address:

(a) Behavioral impairments, severe emotional disturbances, sex offender behaviors, and other mental health or psychiatric disorders;

(b) Drug and alcohol addiction;(c) Health and medical needs;

 (d) Education, special education, and related services;
 (e) Individual, group, and family counseling services as appropriate with any treatment plan related to subdivisions (a) through (d) of this subsection. Services shall also be made available for juveniles who have been physically or sexually abused;

(f) A case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community. This process shall follow individualized planning which shall begin at intake and evaluation. Structured programming shall be scheduled for all juveniles. This programming shall include a strong academic program as well as classes in health education, living skills, vocational training, behavior management and modification money management find management and modification, money management, family and parent responsibilities, substance abuse awareness, physical education, job skills training, and job placement assistance. Participation shall be required of all juveniles if such programming is determined to be age and developmentally appropriate. The goal of such structured programming shall be to provide the academic and life skills necessary for a juvenile to successfully return to his

academic and life skills necessary for a juvenile to successfully return to his or her home and community upon release; and (g) The design and delivery of treatment programs through the youth rehabilitation and treatment centers as well as any licensing or certification requirements, and the office shall follow the requirements as stated within Title XIX and Title IV-E of the federal Social Security Act, as such act existed on January 1, 2020, the Special Education Act, or other funding guidelines as appropriate. It is the intent of the Legislature that these funding sources shall be utilized to support service needs of eligible iuveniles. juveniles.

(3) When the Office of Juvenile Services has arranged for treatment of a juvenile as provided in subsection (2) of this section, the office shall file a report and notice of placement change with the court and shall send copies of the notice to all interested parties, including any parent or guardian of the juvenile, at least seven days before the placement of the juvenile is changed from the order of the committing court. The court, on its own motion or upon the filing of an objection to the change by an interested party, may order a hearing to review such change in placement and may order the change be stayed until the completion of the hearing. <u>When filing a report and notice of</u> placement change pursuant to this subsection, or upon a court order to set a

placement change pursuant to this subsection, or upon a court order to set a hearing to review a change in placement or stay a change in placement pursuant to this subsection, the office may file a motion for immediate change of placement pursuant to subsection (4) of section 43-408. (4)(a) The Office of Juvenile Services shall provide evidence-based services and operate the youth rehabilitation and treatment centers in accordance with evidence-based policies, practices, and procedures. On December 15 of each year, the office shall electronically submit to the Governor, the Legislature, and the Chief Justice of the Supreme Court, a comprehensive report of the evidence-based services policies practices and procedures by which of the evidence-based services, policies, practices, and procedures by which such centers operate, and efforts the office has taken to ensure fidelity to evidence-based models. The report may be attached to preexisting reporting duties. The report shall include at a minimum:

(i) The percentage of juveniles being supervised in accordance with evidence-based practices;

(ii) The percentage of state funds expended by each respective department for programs that are evidence-based, and a list of all programs which are

evidence-based;

 (iii) Specification of supervision policies, procedures, programs, and practices that were created, modified, or eliminated; and
 (iv) Recommendations of the office for any additional collaboration with other state, regional, or local public agencies, private entities, or faithbased and community organizations.

(b) Each report and executive summary shall be available to the general

public on the web site of the office. (c) The Executive Board of the Legislative Council may request the Consortium for Crime and Justice Research and Juvenile Justice Institute at the University of Nebraska at Omaha to review, study, an recommendations on the reports assigned by the executive board. and make policy

Sec. 4. Section 43-408, Revised Statutes Cumulative Supplement, 2020, is amended to read:

43-408 (1) Whenever any juvenile is committed to the Office of Juvenile Services, the juvenile shall also be considered committed to the care and custody of the Department of Health and Human Services for the purpose of obtaining health care and treatment services.

(2) The committing court may order placement at a youth rehabilitation and treatment center for a juvenile committed to the Office of Juvenile Services following a commitment hearing pursuant to subdivision (1)(b)(iii) of section 43-286. The court shall continue to maintain jurisdiction over any juvenile committed to the Office of Juvenile Services, and the office shall provide the court and parties of record with the initial treatment plan and monthly updates

regarding the progress of the juvenile. (3) In addition to the hearings set forth in section 43-285, during a juvenile's term of commitment, any party may file a motion for commitment review to bring the case before the court for consideration of the juvenile's commitment to a youth rehabilitation and treatment center. A hearing shall be commitment to a youth rehabilitation and treatment center. A hearing shall be scheduled no later than thirty days after the filing of such motion. No later than five days prior to the hearing, the office shall provide information to the parties regarding the juvenile's individualized treatment plan and progress. A representative of the office or facility shall be physically present at the hearing to provide information to the court unless the court allows the representative to appear telephonically or by video. The juvenile and the juvenile's parent or guardian shall have the right to be physically present at the hearing. The court may enter such orders regarding the juvenile's care and treatment as are necessary and in the best interests of the juvenile, including an order for early discharge from commitment when appropriate. In entering an order for early discharge from commitment to intensive supervised probation in the community, the court shall consider to intensive supervised probation in the community, the court shall consider to what extent:

(a) The juvenile has completed the goals of the juvenile's individualized treatment plan or received maximum benefit from institutional treatment;
 (b) The juvenile would benefit from continued services under community

supervision;

 (c) The juvenile can function in a community setting with appropriate supports; and
 (d) There is reason to believe that the juvenile will not commit further violations of law and will comply with the terms of intensive supervised probation.

(4) When filing a motion pursuant to subsection (3) of this section, the office may also file a motion for immediate change of placement to another the youth rehabilitation and treatment center operated and utilized in compliance with state law. When filing a report and notice of placement change pursuant to subsection (3) of section 43-407, or upon a court order to set a hearing to review a change in placement or stay a change in placement pursuant to subsection (3) of section 43-407, the office may file a motion for immediate change of placement to the inpatient or subacute residential treatment facility <u>licensed as a treatment facility in the State of Nebraska. The motion shall set</u> forth with reasonable particularity the grounds for an immediate change of placement. A motion for immediate change of placement under this subsection shall be heard within twenty-four hours, excluding nonjudicial days, and may be heard telephonically or by videoconferencing. Prior to filing a motion for immediate change of placement, the office shall make a reasonable attempt to provide notice of the motion to the juvenile's parent or guardian, including notice that the motion will be set for hearing within twenty-four hours. The court shall promptly provide the notice of hearing to all parties of record. In advance of the hearing, the office shall provide to the other parties of record any exhibits it intends to offer, if any, and the identity of its witnesses. The office shall provide the juvenile an opportunity before the hearing to consult with the juvenile's counsel and review the motion and the exhibits and witnesses. The court shall order the immediate change of placement pending an order pursuant to subsection (3) of this section or subsection (3) of section 43-407 if the court determines that an immediate change is in the best interests of the juvenile and further delay would be contrary to the juvenile's

well-being, physical health, emotional health, or mental health. (5) (4) Each juvenile committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center shall also be entitled to an annual review of such commitment and placement for as long as the juvenile remains so committed and placed. At an annual review hearing, the court shall consider the factors described in subsection (3) of this section to assess the juvenile's progress and determine whether commitment remains in the

best interests of the juvenile.

(6) (5) If a juvenile is placed in detention while awaiting placement at a youth rehabilitation and treatment center and the placement has not occurred within fourteen days, the committing court shall hold a hearing every fourteen days to review the status of the juvenile. Placement of a juvenile in detention shall not be considered a treatment service.

Sec. 5. Section 48-101.01, Revised Statutes Cumulative Supplement, 2020, is amended to read:

48-101.01 (1) The Legislature finds and declares:

(a) The occupations of first responders are recognized as stressful occupations. Only our nation's combat soldiers endure more stress. Similar to military personnel, first responders face unique and uniquely dangerous risks in their sworn mission to keep the public safe. They rely on each other for survival to protect the communities they serve;

(b) On any given day, first responders can be called on to make life and death decisions, witness a young child dying with the child's grief-stricken family, make a decision that will affect a community member for the rest of such person's life, or be exposed to a myriad of communicable diseases and known carcinogens;

(c) On any given day, first responders protect high-risk individuals from themselves and protect the community from such individuals;

(d) First responders are constantly at significant risk of bodily harm or physical assault while they perform their duties;

(e) Constant, cumulative exposure to horrific events make first responders uniquely susceptible to the emotional and behavioral impacts of job-related stressors;

(f) Trauma-related injuries can become overwhelming and manifest in posttraumatic stress, which may result in substance use disorders and even,

(g) It is imperative for society to recognize occupational injuries related to post-traumatic stress and to promptly seek diagnosis and treatment without stigma. This includes recognizing that mental injury and mental illness as a result of trauma is not disordered, but is a normal and natural human response to trauma, the negative effects of which can be ameliorated through diagnosis and effective treatment.

diagnosis and effective treatment.
 (2) Personal injury includes mental injuries and mental illness
unaccompanied by physical injury for an employee who is a first responder or
frontline state employee if such first responder or frontline state employee:
 (a) Establishes that the employee's employment conditions causing the
mental injury or mental illness were extraordinary and unusual in comparison to
the normal conditions of the particular employment; and
 (b) Establishes, through a mental health professional, the medical
causation between the mental injury or mental illness and the employment
conditions by medical evidence

conditions by medical evidence.

(3) The employee bears the burden of establishing the matters described in

subsection (2) of this section by a preponderance of the evidence.
(4) Until January 1, 2028, a first responder may establish prima facie
evidence of a personal injury that is a mental injury or mental illness if the first responder:

(a) Presents evidence that the first responder underwent a mental health examination by a mental health professional upon entry into such service or subsequent to such entry and before the onset of the mental injury or mental illness and such examination did not reveal the mental injury or mental illness for which the first responder seeks compensation;

(b) Presents testimony or an affidavit from a mental health professional stating the first responder suffers from a mental injury or mental illness caused by one or more events or series of events which cumulatively produced the mental injury or mental illness which brought about the need for medical attention and the interruption of employment;

(c) Presents evidence that such events or series of events arose out of

 (c) Presents evidence that such events of series of events arose out of and in the course of the first responder's employment; and
 (d) Presents evidence that, prior to the employment conditions which caused the mental injury or mental illness, the first responder had participated in resilience training and updated the training at least annually thereafter.

(5) For purposes of this section, mental injuries and mental illness arising out of and in the course of employment unaccompanied by physical injury are not considered compensable if they result from any event or series of events which are incidental to normal employer and employee relations, including, but not limited to, personnel actions by the employer such as disciplinary actions, work evaluations, transfers, promotions, demotions, salary reviews, or terminations. (6)(a) The Department of Health and Human Services shall reimburse a first

responder for the cost of annual resilience training not reimbursed by the first responder's employer. The department shall pay reimbursement at a rate determined by the Critical Incident Stress Management Program under section 71-7104. Reimbursement shall be subject to the annual limit set by such program under section 71-7104.

(b) To obtain reimbursement under this subsection, a first responder shall submit an application to the Department of Health and Human Services on a form

and in a manner prescribed by the department. (7) The Department of Health and Human Services shall maintain and annually undate records of first responders who have completed annual annually update records of first responders who have completed annual

(8) For purposes of this section:

(a) First responder means a sheriff, a deputy sheriff, a police officer, an officer of the Nebraska State Patrol, a volunteer or paid firefighter, or a volunteer or paid individual licensed under a licensure classification in subdivision (1) of section 38-1217 who provides medical care in order to prevent loss of life or aggravation of physiological or psychological illness or injury;

(b) Frontline state employee means an employee of the Department of Correctional Services or the Department of Health and Human Services whose duties involve regular and direct interaction with high-risk individuals;

(c) High-risk individual means an individual in state custody for whom violent or physically intimidating behavior is common, including, but not limited to, a committed offender as defined in section 83-170, a patient at a regional center as defined in section 71-911, and a juvenile committed to <u>a</u> <u>youth relabilitation and treatment center</u> the Youth Rehabilitation and Treatment Center-Kearney or the Youth Rehabilitation and Treatment Center-Geneva;

(d) Mental health professional means:

(i) A practicing physician licensed to practice medicine in this state under the Medicine and Surgery Practice Act;

(ii) A practicing psychologist licensed to engage in the practice of psychology in this state as provided in section 38-3111 or as provided in similar provisions of the Psychology Interjurisdictional Compact; or

(iii) A person licensed as an independent mental health practitioner under the Mental Health Practice Act;

(e) Resilience training means training that meets the guidelines established by the Critical Incident Stress Management Program under section 71-7104 and that teaches how to adapt to, manage, and recover from adversity, trauma, tragedy, threats, or significant sources of stress; and (f) State custody means under the charge or control of a state institution

or state agency and includes time spent outside of the state institution or state agency.
 (9) All other provisions of the Nebraska Workers' Compensation Act apply

to this section.

Sec. 6. Section 81-1316, Revised Statutes Cumulative Supplement, 2020, is amended to read:

81-1316 (1) All agencies and personnel of state government shall be covered by sections 81-1301 to 81-1319 and shall be considered subject to the State Personnel System, except the following:

(a) All personnel of the office of the Governor;(b) All personnel of the office of the Lieutenant Governor;

(c) All personnel of the office of the Secretary of State;

(d) All personnel of the office of the State Treasurer;(e) All personnel of the office of the Attorney General;

(f) All personnel of the office of the Auditor of Public Accounts;

(g) All personnel of the Legislature;(h) All personnel of the court systems;

(i) All personnel of the Board of Educational Lands and Funds;

(j) All personnel of the Public Service Commission;(k) All personnel of the Nebraska Brand Committee;

(1) All personnel of the Commission of Industrial Relations;(m) All personnel of the State Department of Education;

(n) All personnel of the Nebraska state colleges and the Board of Trustees of the Nebraska State Colleges;

(o) All personnel of the University of Nebraska;

(p) All personnel of the Coordinating Commission for Postsecondary Education;

(q) All personnel of the Governor's Policy Research Office;

(r) All personnel of the Commission on Public Advocacy;

(s) All agency heads;

(t)(i) The Director of Behavioral Health of the Division of Behavioral Health; (ii) the Director of Children and Family Services of the Division of Children and Family Services; (iii) the Director of Developmental Disabilities of the Division of Developmental Disabilities; (iv) the Director of Medicaid and Long-Term Care of the Division of Medicaid and Long-Term Care; and (v) the Director of Public Health of the Division of Public Health;

(u) The chief medical officer established under section 81-3115, the Administrator of the Office of Juvenile Services, and the chief executive officers of the Beatrice State Developmental Center, Lincoln Regional Center, Norfolk Regional Center, Hastings Regional Center, Grand Island Veterans' Home, Norfolk Veterans' Home, Eastern Nebraska Veterans' Home, Western Nebraska Veterans' Home, <u>and each youth rehabilitation and treatment center</u> Youth Rehabilitation and Treatment Center-Kearney, and Youth Rehabilitation and Treatment Center-Geneva;

(v) The chief executive officers of all facilities operated by the Department of Correctional Services and the medical director for the department appointed pursuant to section 83-4,156;

 (w) All personnel employed as pharmacists, physicians, psychiatrists, or psychologists by the Department of Correctional Services;
 (x) All personnel employed as pharmacists, physicians, psychiatrists, psychologists, service area administrators, or facility operating officers of the Department of Vaterane. the Department of Health and Human Services or the Department of Veterans'

Affairs:

(y) Deputies and examiners of the Department of Banking and Finance and the Department of Insurance as set forth in sections 8-105 and 44-119, except for those deputies and examiners who remain in the State Personnel System;

(z) All personnel of the Tax Equalization and Review Commission; and (aa) The associate director of the Conservation Division of the Nebraska State Historical Society and all personnel employed as a Conservator I or Conservator II of the Conservation Division of the Nebraska State Historical Society.

(2) At each agency head's discretion, up to the following number of additional positions may be exempted from the State Personnel System, based on the following agency size categories:

Number of Agency	Number of Noncovered
Employees	Positions
less than 25	Θ
25 to 100	1
101 to 250	2
251 to 500	3
501 to 1000	4
1001 to 2000	5
2001 to 3000	8
3001 to 4000	11
4001 to 5000	40
over 5000	50

The purpose of having such noncovered positions shall be to allow agency heads the opportunity to recruit, hire, and supervise critical, confidential, or policymaking personnel without restrictions from selection procedures, compensation rules, career protections, and grievance privileges. Persons holding the noncovered positions shall serve at the pleasure of the agency head and shall be paid salaries set by the agency head. An agency with over five thousand employees shall provide notice in writing to the Health and Human Services Committee of the Legislature when forty noncovered positions have been

services committee of the Legislature when forty honcovered positions have been filled by the agency head pursuant to this subsection. (3) No changes to this section or to the number of noncovered positions within an agency shall affect the status of personnel employed on the date the changes become operative without their prior written agreement. A state employee's career protections or coverage by personnel rules and regulations shall not be revoked by redesignation of the employee's position as a noncovered position without the prior written agreement of such employee. Sec. 7 Section 83-104 Revised Statutes Cumulative Supplement 2020 is

Sec. 7. Section 83-104, Revised Statutes Cumulative Supplement, 2020, is amended to read:

83-104 (1)(a) The office of Public Counsel shall conduct an annual physical review of the following state institutions:

(i) The Youth Rehabilitation and Treatment Center-Geneva;

(ii) The Youth Rehabilitation and Treatment Center-Kearney;

(iii) Any other facility operated and utilized as a youth rehabilitation and treatment center under state law;

(iv) The Hastings Regional Center;

(v) The Lincoln Regional Center;

(ví) The Norfolk Regional Center; and

(vii) The Beatrice State Developmental Center.

(b) Such physical review may include a review of the condition of buildings and grounds and the physical wear and tear of buildings, fixtures,

equipment, furniture, security systems, and any improvements to the facility. (2) The office of Public Counsel shall report to the Legislature on the condition of such state institutions. The report shall be due on or before March 15, 2021, for the 2020 calendar year, and on or before December 15 of each year beginning in 2021, for the period beginning with December 1 of the prior year through November 30 of the then current year. Such report shall include, for each state institution listed in subdivision (1)(a) of this section: section:

(a) The findings and observations from the annual physical review;

(b) Recent inspection reports regarding the facility;

(c) Staffing information, listed separately for each state institution, including, but not limited to:

(i) The number of assaults on staff;(ii) Staffing levels;

(iii) Staff retention rates; and

(iv) Staff turnover rates, including unfilled and vacant positions; and (d) The number of reports received by the office of Public Counsel for

each institution and any systemic issues identified as a result of such physical review.

Sec. 8. Section 83-107.01, Revised Statutes Cumulative Supplement, 2020, is amended to read:

83-107.01 (1) The official names of the state institutions under the supervision of the Department of Health and Human Services shall be as follows: (a) Beatrice State Developmental Center, (b) Lincoln Regional Center, (c) Norfolk Regional Center, (d) Hastings Regional Center, (e) Youth Rehabilitation and Treatment Center-Kearney, and (f) Youth Rehabilitation and Treatment Center-Geneva.

(2)(a) This subsection applies beginning July 1, 2021.
(b) Except as provided in subdivision (2)(e) of this section, so long as the department operates the Youth Rehabilitation and Treatment Center-Kearney, such institution shall be used for the treatment of boys only.

(c) Except as provided in subdivision (2)(e) of this section, so long as the department operates the Youth Rehabilitation and Treatment Center-Geneva, such institution shall be used for the treatment of girls only.

(d) For any other facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law, the department shall ensure safe and appropriate gender separation.

(e) In the event of an emergency, the department may use either the Youth Rehabilitation and Treatment Center-Kearney, or the Youth Rehabilitation and Treatment Center-Geneva, or another facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law for the treatment of juveniles of both genders for up to seven days. During any such use the department shall ensure safe and appropriate gender separation.

(f) For purposes of this section, emergency means a public health emergency or a situation including fire, flood, tornado, natural disaster, or damage to the institution that renders an institution uninhabitable. Emergency does not include inadequate staffing.

Sec. 9. Section 83-364, Reissue Revised Statutes of Nebraska, is amended to read:

83-364 When any person is admitted to a state institution or other inpatient treatment facility pursuant to an order of a mental health board under the Nebraska Mental Health Commitment Act or the Sex Offender Commitment Act or receives treatment prescribed by such institution or facility following release or without being admitted as a resident patient, the patient and <u>the</u> <u>patient's</u> his or her relatives shall be liable for the cost of the care, support, maintenance, and treatment of such person to the extent and in the manner provided by sections 83-227.01, 83-227.02, 83-350, and 83-363 to 83-380. Such The provisions of such sections also shall apply to persons admitted to a state institution as transferees from any state penal institution or youth rehabilitation and treatment center the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva but only after the expiration of the time for which the transferees were originally sentenced or committed.

Sec. 10. Original section 83-364, Reissue Revised Statutes of Nebraska, and sections 28-934, 43-403, 43-407, 43-408, 48-101.01, 81-1316, 83-104, and 83-107.01, Revised Statutes Cumulative Supplement, 2020, are repealed.