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HARDIN: Welcome to the Health and Human Services Committee. I'm Senator Brian Hardin, representing Legislative District 48, and I serve as chair of the committee. The committee will take up the bills in the order posted. This public hearing today is your opportunity to be part of the legislative process and to express your position on the proposed legislation before us. On that note, I'm going to back up just a moment. Senator Riepe, we've got them set up in LB82, LB160, LB110, LB87. Senator Riepe has volunteered—he, he doesn't have any or many folks testifying that he knows of. Is that right?

RIEPE: A few, but--

HARDIN: A, a few. OK.

RIEPE: --not-- certainly not this number.

HARDIN: OK. And so we may move LB160 to the end today, since thatthat way, it doesn't keep everybody here. And so if you're planning to testify today, please fill out one of the green testifier sheets on the table in the back. Be sure to print clearly and fill it out completely. Please move to the front row and be ready to testify when it's your turn, and then give that testifier sheet to the page. If you don't wish to testify but would like to indicate your position on a bill, there are also yellow sign-in sheets in the back table for each bill. These sheets will be included as an exhibit in the official hearing record. When you come up to testify, please speak clearly into the microphone. Tell us your name. Spell your first and last name to ensure we get an accurate record. We will begin each bill hearing today with the Introducer's opening statement, followed by proponents of the bill, then opponents, and finally, by anyone speaking in the neutral. We will finish with a closing statement by the introducer if they wish to give one. We'll be using a three-minute light system for all testifiers. Today, we have some friends with us, and we will give you an audible cue when there's a minute left on your testifying time. When the yellow light comes on, you have one minute remaining. And when the red light comes on, you need to wrap up your final thoughts, and we'll help you with verbal cues on that one. Questions from the committee may follow, which do not count against your time. Also, committee members may come and go during the hearing. This has nothing to do with the importance of the bills being heard. It's just part of

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the process. The senators may have bills to introduce in other committees. A few final items to facilitate today's hearing. If you have handouts or copies of your testimony, please bring up at least 12 copies and give them to the page. Please silence or turn off your cell phones. Verbal outbursts or applause are not permitted in the hearing room. Such behavior may be cause for you to be asked to leave the hearing. Finally, committee procedures for all committees state that written position comments on a bill to be included in the record must be submitted by 8 a.m. the day of the hearing. The only acceptable method of submission is via the Legislature's website at nebraskalegislature.gov. Written position letters will be included in the official hearing record, but only those testifying in person before the committee will be included on the committee statement. We're going to have the committee members introduce themselves, starting on my left with Senator Riepe.

RIEPE: Thank you, Chairman. Merv Riepe. Welcome for being here. And I represent District 12, which is Omaha and the fine little town of Ralston.

HANSEN: Senator Ben Hansen, District 16, which I represent Washington, Burt, Cuming, and parts of Stanton County.

HARDIN: And Senator Fredrickson.

FREDRICKSON: John Fredrickson. I represent District 20, which is in central west Omaha.

MEYER: Glen Meyer. I represent District 17, which is Dakota, Thurston, Wayne, and the southern part of Dixon County in northeast Nebraska.

QUICK: Dan Quick, District 35, Grand Island.

HARDIN: Also assisting the committee today, to my left is our legal counsel, John Duggar. To my far left is our committee clerk, Barb Dorn. Our pages for the committee today are Sydney Cochran and Demet Gedik of Unl. Today's agenda is posted outside the hearing room. And with that, we will begin today's hearings with LB82, Senator Rountree.

ROUNTREE: Good afternoon, Chair Hardin and members of the Health and Human Services Committee. My name is Victor Rountree, V-i-c-t-o-r R-o-u-n-t-r-e-e, and I represent District 3, which is made up of

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Bellevue and Papillion. Today I'm here to introduce LB82, which will have Nebraska join the Cosmetology Licensure Compact. LB82 is very similar to LB83 and LB84, which we heard yesterday. LB82 would have Nebraska join the Cosmetology Licensure Compact. Under this compact, licensed cosmetologists in a member state would be able to apply for a license to practice in all states participating in the compact. As I said with the previous bills, higher mobility with licensure is one way to attract additional workforce into our state. In my district, military families frequently move in and out of our state, and reducing the number of barriers for trained professionals to work in our state is a priority of mine. Military spouses experience an unemployment rate of nearly 21%, according to the most recent surveys. Allowing trained professionals who want to work to practice in our state is a small step in addressing this issue. There are currently eight states included in the Cosmetology Licensure Compact, including Colorado, Alabama, Kentucky, Arizona, and Ohio. Ten additional states currently have bills proposed to join the compact as well, including Kansas, Texas, Georgia, and Indiana. Yesterday, there was a question from the committee on fees related to the compact. My understanding is that those applying for a license will be required to pay a \$45 fee to Nebraska State Patrol for background checks. Member states also have the ability to charge licensing fees as needed. I appreciate your time and consideration for this bill. There will be testifiers behind me who are industry experts and a testifier from the Council of State Governments, who can give more specifics on the operation of the compact. With that being said, I would be happy to take any questions that you may have.

HARDIN: Thank you. Questions? Senator Riepe.

RIEPE: Thank you, Chairman. Thank you, Senator, for being here.

ROUNTREE: Yes, sir.

RIEPE: One other question, I had a little bit of experience in-- with cosmetology that my question gets to be are the Nebraska cosmetologists accepting because some other states have lower requirements for training? And that became a hot issue. And I think Nebraska was one of the higher ones. We were trying to move it to compare to Iowa, and that did not go over so well. So I'm just curious

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whether maybe some of them will be here in the audience even. I don't know. Did they approach you on this?

ROUNTREE: We have not been approached with opposition on it-

RIEPE: OK.

ROUNTREE: --that. So.

RIEPE: Well, you may.

ROUNTREE: That's not to say there won't be any.

RIEPE: That's right.

ROUNTREE: But there hasn't been any that has been approached to me.

RIEPE: OK. OK. Just curiosity as we go forward. Thank you very much.

ROUNTREE: Thank you, sir.

RIEPE: Thank you, Chairman.

HARDIN: Other questions? Seeing none, will you be with us later to close?

ROUNTREE: Yes, sir. I will.

HARDIN: Great. Thank you. Proponents, LB82. Proponents. Don't be shy. Welcome.

LESLIE ROSTE: Welcome. How are you?

HARDIN: I'm well. Thank you.

LESLIE ROSTE: Thanks for the sunny day. Drove here from Kansas City in the rain. So, thank you. Thank you, Chair Hardin and committee members. My name is Leslie Roste with the Future of the Beauty Industry Coalition in support of LB82. I forgot to spell my name. L-e-s-l-i-e R-o-s-t-e. I represent many employers in your state who hire cosmetologists. And this legislation that is considered the gold standard for license mobility allows employers to draw from a larger pool of employees, allows cosmetologists who come to your state to get

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to work immediately, and reduces workload related to reciprocity applications in your regulatory agency. In addition, the compact's use of a required comprehensive database may also reduce license fraud and therefore improve health and public safety for your consumers. I understand there may be concerns about the standards in Nebraska being upheld. I am a nurse by training and worked as an infection control nurse prior to coming to this profession 15 years ago. Since that time, I have worked as a subject-matter expert on health and public safety in the professional beauty industry, during which I have helped over 30 states evaluate and update health and public safety rules and curriculum. I also have served as an item writer and evaluator for national licensure exams and wrote science content, including infection control, for both major textbooks used in cosmetology theory education. My experience across the states can attest to the fact that all states have similar curriculum and, in fact, rules when it comes to health and public safety. For example, infection control in this industry has almost no variance from state to state because the options for how to properly clean and disinfect in a professional beauty setting are extremely limited. This narrow focus means that the exams taken across the country address and assess health and public safety, including infection control, in a very similar manner. While there is variance in educational requirements across the states, there is not variance in the exams required for licensure. Currently, to move to Nebraska as a licensee from another state, you must complete an application, pay a \$95 fee, and provide proof of 1,800 hours of training. 47 states require 1,500 hours or less, so proof of work hours must be submitted as well as proof of lawful presence. In addition, each state in which you hold a license must complete a form confirming you have a license in good standing from that state. In many states, this proof of good standing form can take months to be sent, something neither the licensee nor Nebraska can expedite. So while these lengthy delays are the responsibility of the previous state's regulatory office, it still creates a situation where someone needing to work is unable to, something employers in Nebraska struggle with regularly. If this law were passed, you would enact the only form of license mobility that is bi-directional and is considered the gold standard for mobility by the military. Finally, it is the only form of mobility that would benefit your actual constituents, allowing them the same benefits you currently give to licensees coming into your state. While no state likes their citizens to leave, there are simply

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times when it must happen, and this compact would benefit those residents tremendously. In addition, it offers benefits to domest—survivors of domestic violence and licensees displaced by natural disasters. For survivors of domestic violence, the ability to move quickly and anonymously may be lifesaving. In an industry which is 85% female, the compact would provide the ability to work today, and with tips, have money in your pocket tonight, which can provide groceries, a meal or a hotel room while they get on their feet. In addition, as we've all seen lately with natural disasters like Hurricane Helene and the fires in California, displaced workers who may have family in the state of Nebraska who need to move here and continue working would be able to. The compact approach to license mobility provides clear benefits to licensees moving to your state, businesses in your state, and even the state itself, but most importantly to your own constituents. And I'm happy to answer any questions.

HARDIN: Thank you for being here. Questions?

LESLIE ROSTE: Thank you.

HARDIN: Thank you.

MEYER: I had one.

HARDIN: Actually, we do have one. I'm sorry. Ms. Roste, would you mind coming on back? And Senator Meyer has one of those for you.

MEYER: I'm short-armed. I'll have to [INAUDIBLE].

HARDIN: You'll have to reach further. Yes. Thank you.

MEYER: --wave the flag, so-- and this is just for my educational purposes. Just, just what does cosmetology entail? What is the scope of cosmetology?

LESLIE ROSTE: The scope of cosmetology in general, it's-- if you think of it like an umbrella license over hair, skin, and nails. So those, those licensees that get a license in cosmetology can perform all three of those. I will say that the compact allows each state to define cosmetology however they see fit. The, the compact was written by-- I-- I've sat on the document-writing committee, and we wrote with professionals from all around the country. We had subject matter

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experts who sat at the table, and we left it— it was important to us that states retain their sovereignty, right? That you— we are not in any way telling you how to define a cosmetologist. We're saying whatever you call a cosmetology license, that's what the cosmetology license is in your state and anyone coming to your state has to operate within those rules. So if somebody were trained to do something in another state that is not allowed in the scope in your state, they can't do it here. Right? So.

MEYER: Just one other question, if I may. I see where Nebraska requires 1,600 hours of training. Too many hours? Is that discouraging to hiring additional cosmetologists or attracting more to the profession?

LESLIE ROSTE: Yeah. So you have 1,800 hours. I included a map in all of your packets. It shows what all the states around you-- all the states in the country, what they require. You'll notice there's only two other states that require the same number of hours. Everybody else is beneath that. I can't speak to whether it discourages people. I mean, you know, if you live in a state and, you know, you want to go to cosmetology school, my guess is you stay at home and you go to cosmetology school. So I can't, I can't say whether that discourages people. And really, this bill has nothing -- I think it'll get mixed -hours will get mixed into it. And it really doesn't have anything to do with hours. It has to do with mobility. And, you know, I used the example of a driver's license. You get your driver's license at all different ways in all different states, you know, by age. I-sometimes I'm in a state where you can't get a driver's license until you're 18. Well, I'm from Kansas. I got my driver's license when I was 15. Right. And-- but once Kansas said I was safe enough to drive, I can drive in any other state. So it's really about states trusting each other that nobody wants an unsafe cosmetologist, right. No one's willing to turn out somebody who isn't safe. And I'm constantly in the position of remind-- reminding people that that is the responsibility of the state to make sure that they're safe, and they all take the same exams to, to cover that, you know, health and public safety aspect. So.

MEYER: Just for clarification purposes, I, I have a-- where I get my hair cut, she also fixes lady's hair. Just-- I just want to-- I get a,

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I get a haircut. I do not get my hair fixed , so I don't, don't want anybody to--

LESLIE ROSTE: You don't get your hair done?

MEYER: Yeah. I'm secure in my masculinity that, that I could get my hair fixed, but I'm getting a haircut. So.

HARDIN: Any other questions? Thank you for driving all the way from Kansas City.

LESLIE ROSTE: Well, it was actually lovely once I got to the Nebraska border.

HARDIN: Thanks. Anyone else? Proponents of LB82. Proponents, going once, going twice-- opponents, LB82. In the neutral, LB82.

____: Opponents. Are opponents first?

HARDIN: Well, opponents, if you're an opponent, come on up. Welcome.

STEPHANIE MOSS: Hello. Thank you. All right.

HARDIN: Take it away.

STEPHANIE MOSS: OK. My name is Stephanie Moss, S-t-e-p-h-a-n-i-e M-o-s-s. I am a licensed cosmetologist, a cosmetology instructor, I'm also the owner of Stephanie Moss Salon here in Omaha, Nebraska, and I have two beauty schools, Xenon Academy. We have one here in Omaha, Nebraska, and we also have a location in Grand Island. So I wanted to express how compacting states that require fewer hours, like was brought up a little bit ago, to become a licensed cosmetologist will undermine the integrity of the licensed professionals in Nebraska. Our state requires 1,800 hours of education and training to become a licensed cosmetologist, where most of the states that are already in this compact or that are seeking to enact legislation require between 1,000 and 1,500 hours. If Nebraska becomes one of these states, I feel it will allow someone from another state that requires fewer hours to obtain their license here. With Nebraska already requiring 1,800 hours like ours, cosmetologists really can seek reciprocity into another state with little to no problem. We need to remember that we're also surrounded by other states with lesser hours, which makes it possible

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for licensed cosmetologists to obtain their licensure elsewhere and return back to our state. It will deprive Nebraska of the pride that we carry for higher education and business-- businesses. As stated in the bill below, cosmetologists who meet uniform requirements can obtain multistate licensure. I don't know how that's possible when there's a large gap between the hours and probably a variety in the curriculum. Joining the compact, I don't believe, is the right answer. We're expected to move forward in this cosmetology industry while we're regularly, I feel like, under attack. So I feel like we can't do that. I find it difficult to move forward when cosmetologists, I feel like, are being targeted. And if that's not the case, then the barbers and the estheticians are held to the same standard, but they're not present in this conversation or this bill. The state of Nebraska already has systems in place to accommodate military families and seeking licensure in Nebraska that have graduated from a state with fewer hours. If this bill was addressed for that specifically, I think we need to look at the people as individuals and approach that situation as needed. I also attached -- on the back of this, there is the reciprocity form, and it's highlighted for all the military personnel and what that would look like. I'm also a member of the American Association of Cosmetology Schools. Since owning a school, I have met with others in our industry who have a passion for education, and we've all wondered how lowering the hours in our states is adequately apparing -- preparing the students to work on the public at the time of graduation, where places like Texas, who's in this bill, New York are struggling to find time in their states that require just 1,000 hours to train freshly graduated students to fully prepare them for-- to work on the public. A lot of times, New York and Texas, states like that, they will tell you 100% that their students, when they graduate, must go do in some sort of apprenticeship after they graduate because they're not fully ready to work with the public. While the continuous work to lower the hours and deregulate parts of the licensure continues happening, we as industry professionals want to understand how lowering the standards of Nebraska is beneficial to the residents and business owners like myself. So thank you so much for your time and attention. If you have any questions, let me know.

HARDIN: Thank you.

STEPHANIE MOSS: Yes.

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HARDIN: Questions? Senator Hansen.

HANSEN: Thank you, Chair. Did you say-- so is there a Nebraska cosmetology association?

STEPHANIE MOSS: There's the-- so our beauty schools, we are accredited body. There's two accreditation bodies. You can either be a part of NACCAS or the American Beauty-- AACS, the American Beauty Association. Our schools are members of both of them.

HANSEN: And not so much an accreditation association, more like just an association made up of cosmetologists. You know, we have the American Medical Association and American Chiropractors Association—

STEPHANIE MOSS: Not that I'm aware of.

HANSEN: OK. Because typically, I always like to lean on what the association of that profession recommends their hours should be.

STEPHANIE MOSS: For sure.

HANSEN: Because I think they're the ones who know the profession better than we do, we tend to lean on. So whenever we talk about a scope of practice change or hours change or training change, we say, OK, the American Medical Association come to us. What do you guys think? But I, I would assume you guys, because of required hours of training you need, and the extent of your interaction with the public in what you guys actually do, I would-- maybe you should start the Nebraska cosmetology association?

STEPHANIE MOSS: I like the idea.

HANSEN: I know. I just, just a thought, because I think the communication lends itself a lot better if, if we have like, an association to talk to.

STEPHANIE MOSS: Right.

HANSEN: I mean-- and between us and legislators, I don't know. Sometimes that helps out.

STEPHANIE MOSS: I agree.

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HANSEN: OK. It's just a thought.

STEPHANIE MOSS: No, I appreciate that. I like that. Thank you.

HARDIN: Senator Fredrickson.

FREDRICKSON: Thank you, Chair Hardin. Thank you for being here today, taking the time to testify. You, you mentioned in your testimony— I was curious. You mentioned barbers and estheticians as well. Are they— would they not be covered under this compact or that's— those are separate?

STEPHANIE MOSS: As this bill is written, no, it's just for cosmetologists.

FREDRICKSON: OK.

STEPHANIE MOSS: So for Nebraska-- and states are different, right? Some boards-- some states that the boards are conjoined for barbers and cosmetologists, our state is separate.

FREDRICKSON: Sure. Sure.

STEPHANIE MOSS: And I know this was presented, I think, a couple of years ago. And I do believe the aesthetics were in it. And one of the big points that we really talked about is the difference in the schooling, right? Some states, to be just a what we call our estheticians here, they-- some states like California, you don't even have to go to school to be an esthetician. So then if they came into our state, they could do anything. But then in their state, they have an advanced esthetics, where they're able to use lasers and aggressive treatments, microneedling, and stuff like that. And so then our students, they-- yes, as an esthetician, could they go into that state and then do that? So I know where the conversation was but prior to me, about people being able to go to one state, but if they don't offer that in that state or you're not licensed to be able to do that, no, you can't do that. I want to know who's going to regulate all of those things, one, because I think that's a lot for the cosmetology board to be able to have to do. But just put it on the other side of it.

FREDRICKSON: Sure.

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STEPHANIE MOSS: We have students that come into our school-- prime example one, she had to come and do 300 hours in our state because that state didn't teach, teach skin and nails under the cosmetology scope of practice, right? So there's a lot of things that, yes, with 1,800 hours, we're able to train our students on everything and give them a lot of extra time on the floor, just working with the general public.

FREDRICKSON: Sure.

STEPHANIE MOSS: From a point of sanitation, I think sanitation is sanitation. I think every school probably hits that pretty well and hits it hard. I don't feel that that's as big of a hiccup for this--

FREDRICKSON: OK.

STEPHANIE MOSS: -- as much as what are you actually even trained to do?

FREDRICKSON: Got it.

STEPHANIE MOSS: And then how much time have you had to even practice it on the general public before you're actually going for licensure?

FREDRICKSON: Right. That— so that's helpful. So you're— so—because, you know, I, I can certainly appreciate the sanitation piece, but what I'm hearing you say is that there is a pretty wide discrepancy of what's actually trained from state to state.

STEPHANIE MOSS: From state to state, there absolutely can. Some do nails. Some don't do nails— offer it in the curriculum. A lot of skin things, are a lot of different things that happen in there, too.

FREDRICKSON: Thank you.

STEPHANIE MOSS: Yes. Thank you.

HARDIN: So at this point, when someone comes in and because I'm just looking at something that the previous testifier showed, which is most of the country has a 1,500 to, you know, a, a 1,600.

STEPHANIE MOSS: Most of them are about 1,500, 1,550 to 1,600 hours.

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HARDIN: Is there a way in which someone coming here from one of those inferior states, like that, for example, can make up that 200, 300 hours, or are they always starting from scratch, just to kind of dovetail off what Senator Fredrickson said.

STEPHANIE MOSS: So pretty much in another state, let's just say-- and I think it is in that paperwork I gave you in that other packet.

HARDIN: OK.

STEPHANIE MOSS: Someone who is coming from another state, after they've been licensed in that state for every month that they work, they get 100 hours towards the difference, right? So if they work three, four months, then they already qualify for it. For the military personnel, they can already have one year to have a temporary license that they can come and automatically come to work. So that's already been in place. We've already had that. We-- I feel like we've already met those requirements and that way we know what's happening. So I think-- I feel like those things have already been taken care of.

HARDIN: So let, let me ask an obvious question to me.

STEPHANIE MOSS: OK.

HARDIN: So what does the compact do for us, given the fact that Nebraska is at the top of what the requirements are, you have to make up those requirements, so the compact doesn't actually accomplish anything.

STEPHANIE MOSS: For the state of Nebraska, with what we already have in place to help other states already that want to-- there's ways for them-- I think it does nothing for Nebraska. I think we've always been able-- I mean, we were just-- Senator Riepe, I know, was there for it. But we were at 2,100 hours. So was Iowa. We've always held a higher standard for those things. And I can tell you, as someone who's a school owner and watching these students, all 1,800 hours are wisely used. As an owner, would it be beneficial for me to say, yeah, let's go to 1,000 hours? Sure. We could have more students go through there. It's not in the benefit of the students. We've had a lot of students that have had to come from other states-- and I don't want to say a lot. Actually, my campus director will speak here shortly. I think

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we've had three seek reciprocity in the last couple of years that have had, have had to go through some form of training. So you're not seeing it a lot. It's not necessary. And I don't even think all of the schools in town really kind of assist these students, so a lot of them do come through our doors for this. So I just don't feel like us being a part of this, it would probably hurt us more. It could send other students to go to other states for their schooling and then just come right back into this state and work, once they seek that, when you have someone like Texas on there that's only 1,000 hours, you know? We have an educator in our school who used to be a campus director for a school in Texas. And before coming here, I was talking to him about it and he's like, there's such a difference, Stephanie. You know? So I think, I think it would only hurt us at this point, because we're still just comparing apples to oranges. We're not all on the same playing field. Like, I feel like you're in nursing programs and everything, those are more national tests. The curriculum is all going to be the same. Our curriculum is not the same state-to-state yet.

HARDIN: I see. Senator Riepe.

RIEPE: Thank you, Chairman. Being an Omaha senator, my question would be is, is there a school of cosmetology in Council Bluffs which might make it easier then, to go over to Iowa--

STEPHANIE MOSS: There's one right over the river.

RIEPE: --to do the training and then come back over the river?

STEPHANIE MOSS: Yes. There's one right there. Yeah.

RIEPE: OK. There is one there.

STEPHANIE MOSS: Yep. Right in Council Bluffs.

RIEPE: OK. Thank you.

STEPHANIE MOSS: Yes. Thank you.

RIEPE: That complicates it.

HARDIN: Other questions? Seeing none, thank you.

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STEPHANIE MOSS: Thank you, guys. Appreciate your time.

HARDIN: Others in opposition to LB82? Welcome.

LINDA POCHOP: Hello. A little bit of Groundhog Day here. We've been here a couple times over this stuff.

HARDIN: Nice to see you.

LINDA POCHOP: I am Linda Pochop, L-i-n-d-a P-o-c-h-o-p, and I am the director of education at Xenon that Ms. Moss owns, and I've been a licensed cosmetologist and cosmetology instructor for over 30 years. In the past two years, we've only had three people attend our school for additional hours to achieve reciprocity. And so when somebody is coming in to get reciprocity into our state, I get their school transcripts, I get what the rules and regs are of that state, and I compare them to what we have. And so, then I go through -- say they're missing the section of their program that we're allowed to do. And I think, like when we talk about those deficiencies from one state to another, those are the things that we're most concerned about. I am not concerned about, again, the sanitation stuff. And when we look at those differences between the programs, let's say for Colorado, for instance, which is also in the compact, they have a hairstylist licensing that has no chemicals. So they are not trained to do, perming, hair coloring, any of those skills. So when those people come to our state and if they're allowed to work within our parameters, they would be legally okayed to do that, even though they've had no training on the circumstance, because then their license is, again, is just passing from one to another. And so I think, you know, those are our biggest things. We had recently -- one of those students that came, came from Canada. In her entire training, all of her work was done on mannequin heads. She had never touched a person to do a skill on before she came to our school. So it's important that, you know, we have that understanding that everything is not the same in those trainings. So our state currently has 8,291 active cosmetology licenses, and there are 1,821 salons with an additional 226 right now that are in consideration to become licensed. This bill again being presented for military spouses, the reality is that this is an allowance for all states and individuals to freely enter into our state, no matter what the criteria of their home state is. I'm also, again, questioning, too, why is this only about cosmetology and not

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the barbering and the esthetician licenses? During the 2018, when we did the LB343, and we already talked about that, that we've already addressed those issues that we had for the military spouses and we've already kind of made those. So I don't feel like there's really anything to gain here. What we do tend to see, like when we were working—you know, the Platte Institute, they're working for large corporation salons that are looking for us to burn and turn people to put into their salons. And that was, you know, one thing that we kind of were fighting against.

HARDIN: OK. Any questions? Senator Riepe.

RIEPE: Thank you, Chairman. I want to run this back so I can get it in my head, is that the absolute hours of training is one thing, but what those hours are, say you-- you're mentioning Colorado, if they don't get any of those X number of hours in chemist-- the chemical sides. So eight-- the hours are-- is one thing, but it's not the ultimate thing.

LINDA POCHOP: It's not at all. Because even from the hours that are 1,500 hours to 1,600 hours, the 1,800 hour ones, it's about how many hours in each of those subject matters are put. So for a lot of the lower states, who especially have better licensing for like nails, and there's a separate nail license that is a little stricter than what ours currently is. Because right now in this state of Nebraska, you don't even have to be licensed to work on natural nails. And we've, you know, discussed that previously. So for someone who's had no training, they—— you know, coming in—— and under a cosmetology license, we can do acrylic nails. I can do dermaplaning. I can do microneedling. I can do lots of things with my license that other states don't touch any of that scope of practice, because they don't involve any skin or nails in their subject matter.

RIEPE: Yes.

HARDIN: Yes.

RIEPE: Let me just make an assumption here that out of all of the training, 300 hours might be in a particular--

LINDA POCHOP: Yes.

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RIEPE: --section. If the student fails in that, are they afforded the opportunity to repeat that? And if so, how many times can they repeat it before they say, you know, you're really not-- you better find a new career.

LINDA POCHOP: So in all of our training that we do with our students, they have a minimum standard and proof of competency, essentially, that they have to do for each of our classes. So while our students are clocked in, they're supervised on the clients that they work on. They are in class, where we're doing book work and hand on-- hands-on work. And then, they do work on clients to get us to where they need to be. So in that time frame, if we have a student who has not successfully completed, like, that module of it, they are rescheduled to repeat it the next time that's taught. And in our program, we teach our classes approximately every 9-10 weeks that class will come around again. So by the time they're through at school, there's an opportunity for them to have taken it 3-4 times if necessary to-- you know, because they may have missed it because they were absent or, you know, they've had an illness and something's happened. So we keep track of all of the skills that they do.

RIEPE: Is that a strictly written proof or do they have to exhibit that under a supervisor?

LINDA POCHOP: So they have to do-- so for hair coloring, perming, blow drying, styling, haircutting, waxing, skin, makeup, hair extension, all of the stuff that we are allowed to do, we have a certain number of skills that those students have to have signed off by their educator. So.

RIEPE: OK.

LINDA POCHOP: --they had to have performed them and the educators have signed off on those.

RIEPE: OK. Thank you. Thank you, Chairman.

HARDIN: Other questions? Seeing none, thank you.

LINDA POCHOP: Thank you.

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HARDIN: Others in opposition to LB82? Opposition. Those in the neutral, LB82. Welcome.

SIOBHAN KOZISEK: Hello. Good afternoon. My name is Siobhan Kozisek. It's S-i-o-b-h-a-n, and the last name is K-o-z-i-s-e-k. Everybody just calls me Chevy. I am here-- I am the licensed esthetician that sits on our Nebraska State Boards of Cosmetology, Esthetics, Nail Technology, Electrology, and Body Art. The Nebraska Board of Cosmetology is taking a neutral stance in our opinion of LB82. The state's Cosmetology Board is responsible for regulating and overseeing the practice of cosmetology within our state, ensuring that individuals provide services that meet the necessary licensing, training, and standards to protect the health and consumers. The board recognizes that the exchange of information between compact member states and relating licensure, investigations, discipline, and practice of cosmetology would prevent fraud, unlicensed activity, thus, thus protecting the public. We also recognize the compact we provide license cosmetologists from other states, another expedited option to work in Nebraska. An interstate compact would allow Nebraska-licensed cosmetologists access to live and work in, in Nebraska without reciprocity requirements, which differ greatly between the states. The current reciprocity system works quite well, especially for military personnel. We would love to keep young professionals here while attracting professionals from other states, and believe a compact license could assist in helping in making that happen. However, Nebraska is not quite ready to enter a compact licensure with our current statutes. We have valid concerns regarding the licensing requirements and scope of practice with the participating states already in the cosmetology compact and the ones that are proposed to join. Nebraska allows cosmetologists to practice and perform esthetics and nail technology service. In Virginia, you may not practice esthetics with a cosmetology license, which would indicate esthetics is not within the cosmetology curriculum. Ohio requires extra hours for advanced cosmetology license to practice the esthetics, which would also indicate esthetics is not part of the basic cosmetology curriculum. With the current proposal of LB82, a licensed cosmetologist from these states would be allowed to practice esthetics, nail technology services in Nebraska without any training. How do we ensure licensed cosmetologists retain the access to these services while protecting consumers? Another subject that should be

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discussed is the requirements of age and education to become a cosmetologist. Nebraska requires licensees to be 17 years old and have completed a formal education equivalent of a high school diploma. In Ohio and Tennessee, the age requirement is 16, with the completion of at least the 10th grade. These are only two subjects. There are gray areas and archaic rules in the requirements, license-- licensing, and scope of practice here in Nebraska that we would very much like to address and clean up. But we can't accomplish this without legislative assistance. We need a seat at the table.

HARDIN: If I could encourage you to, to help us. Con-- conclude your thoughts, please.

SIOBHAN KOZISEK: We, we need a seat at the table when we're discussing these matters. As a member of the Health and Human Services Board, we invite you to join our meetings. We meet every other month, the first Monday. We look forward to working together to discuss these matters to help ensure a successful union in an interstate compact, which will benefit the correct—current professionals working within our state while attracting professionals from across the country. The board agrees that an interstate compact would strengthen consumer safety, professional accessibility and economic growth. The question is, are we ready? We should be addressing the current statutes before adding additional laws, which is why we submit a neutral stance on LB82.

HARDIN: Thank you. Senator Riepe.

RIEPE: Thank you. Thank you for being here. I'm going to as politely as I can challenge your position of being neutral.

SIOBHAN KOZISEK: Yes.

RIEPE: Because in your testimony, you say, and I quote, Nebraska is not yet ready to enter a compact license with our current statutes. So you're saying, you're saying we're not ready, so to me, that puts you in an opposition position.

SIOBHAN KOZISEK: We had a meeting on Monday and we definitely see the benefits of joining a compact. But we also have our concerns that may overwhelm the board when we do join the compact. Because if we have a cosmetologist that comes in without having trained in, say, esthetic

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services, and they microneedle someone of the general public without knowing the laws and how that procedure works, we're going to see that complaint first.

RIEPE: Our experience in hearings is walking the narrow line of being neutral is very difficult, and so we listen very intently. And not only did I listen, but your language here says we're not supportive. That's what, that's what the language says.

SIOBHAN KOZISEK: OK. I, I think what we would like to do is work together to make this happen.

RIEPE: OK. Fair enough. Thank you. Thank you, Chairman.

HARDIN: Other questions? Senator Ballard.

BALLARD: Chair. Thank you for being here. Can you walk me through the reciprocity for military spouses? So is it as simple as showing identification and then following the 100 hours per month? Isn't it that— is it that— I think Ms. Moss [INAUDIBLE] a little different.

SIOBHAN KOZISEK: Sorry. I wasn't able to [INAUDIBLE] look this up, but we, we did--

BALLARD: So can you kind of walk me through? Yeah. Yeah. Can you walk me through?

SIOBHAN KOZISEK: I literally just joined the boys-- the boards--

BALLARD: Oh, OK.

SIOBHAN KOZISEK: --in July. But I do remember that we had a hearing about this a few years ago, where we created concessions with the military. It was the Reciprocity Act that other states kind of recognize, as well, to allow the military spouses concessions as far as our licensing situation. I can't pull them up right now.

BALLARD: That's OK. That's OK.

SIOBHAN KOZISEK: I'm not getting any-- but yes. We, we--

BALLARD: Yeah, I can follow up with you later.

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SIOBHAN KOZISEK: Yeah, we--

BALLARD: But I, I appreciate it.

SIOBHAN KOZISEK: --we definitely you know, we recognize. And, you know, when you when you're talking about, you know, people that may have been displaced by some of the things that have happened, I-- that was something I hadn't thought of either, and I'd like to take back to boards to kind of say that, you know, we see the benefits. But what needs to happen is first and foremost, Nebraska needs to protect its consumers. And that's what our position is. And to do that, we need to sit with some senators and discuss some things that have not been addressed since 2011. You know, there's a-- there's some messiness and some gray areas that we would like to clear up that would help us work towards this--

BALLARD: OK. Thank you.

SIOBHAN KOZISEK: --if that makes sense.

HANSEN: Other questions? Senator Hansen.

HANSEN: Thank you, Chair. Sounds like our state is messed up when it comes to cosmetology, electrology, esthetics, body art. Are we too confusing, or convoluted, or we have too much going on with our licensing? Is there another state that you see that you're like, I wish Nebraska was like that, that, that maybe put them all together in-- under one?

SIOBHAN KOZISEK: Again, it, it, it would, it would depend on the license. There are, there are states that have like great esthetics licensing, and then there are other states that have excellent body art licensing. And—but like I said, we haven't addressed a lot of these things in, in quite a long time. You know, I am a licensed body brander here in the state of Nebraska. I've never trained in body branding. But I was able to qualify by taking a blood-borne pathogen class, by taking a first aid class, and submitting my high school transcripts. So I am now licensed to burn a design into someone's skin, according to the state of Nebraska. And that was, you know, when I went to interview with state boards, you know, I kind of got that license to present we've got some things that need to be cleaned up.

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HANSEN: It, it would sure be nice, I think, from our aspect, because as much as we love having you guys come here every year--

SIOBHAN KOZISEK: Mm-hmm.

HANSEN: --we wish you wouldn't.

SIOBHAN KOZISEK: Well, if, if, if we could work on--

HANSEN: We love hearing from you.

SIOBHAN KOZISEK: If, if we could work on some of these situations, you would probably hear less from us.

HANSEN: I'd rather have you here more in support of something-

SIOBHAN KOZISEK: Mm-hmm.

HANSEN: --than opposition. You know what I mean? And so usually, from my understanding from being on HHS for six years and being the former chair of it, typically the associations or the, or the, the boards all get together and they say, you know, this is the platform we want to put together--

SIOBHAN KOZISEK: Mm-hmm.

HANSEN: --for the state, when it comes to licensing, when it comes to regulation.

SIOBHAN KOZISEK: Mm-hmm.

HANSEN: And a lot of times, it's not so much about quantity of hours, it's about quality. Right.

SIOBHAN KOZISEK: Mm-hmm.

HANSEN: And so, sometimes being more specific-- so maybe not 1,800 hours, maybe 1,800 hours. Maybe-- like you were just saying. Some states do it this way that we really like, some states do it this way that we really like. And so if some way there-- you know-- because it seems like every time we have testimony when it comes to, you know, people on this industry, it's a common theme it seems like that we hear, of like, well, our state is just different and we can't do it.

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Maybe it's, maybe it's a federal thing that needs to happen, right, or a-- you know, a new [INAUDIBLE] association that needs to happen.

SIOBHAN KOZISEK: You know, it's-- with my esthetics license, I could go and get reciprocity in Colorado and work a laser, or some estheticians are able to do injectables under doctors. It's-- it'd be great to have federal standards.

HANSEN: Well, I don't, I don't--

SIOBHAN KOZISEK: What we are doing, as your state boards-- because you've seen me here a few times.

HANSEN: Yeah.

SIOBHAN KOZISEK: What we are beginning to do is look at legislation in other states that has worked.

HANSEN: Good.

SIOBHAN KOZISEK: And bring something cohesive together as our state boards. And you have a very strong team developing on your state boards. Because again, I love this Friday afternoon off, but I would-you know, it is our job to protect the consumers.

HANSEN: Yep. Good. OK. Right. Yeah, just like you said. I, I, I like that. I'd be careful what you wish for. I wouldn't wish for a federal license agreement—standards.

SIOBHAN KOZISEK: It, it would be great.

HANSEN: It gets kind of— they get— it gets kind of dicey there, usually. I like the idea of a state determining what they feel is right, you know, like, like what you said.

SIOBHAN KOZISEK: Well, absolutely. And I do. I do. But it's-- you know, our industry is like herding cats. There's a lot of ego and a lot of--

HANSEN: Sounds like government.

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SIOBHAN KOZISEK: No, we are, we are trying to put some things together. But again, we cannot make these changes without legislators. And so what we're trying to do is put everything cohesively together, so we're not taking, you know, too much time and everything, but to be able to sit with legislators that can hear the issues that we feel all need to be addressed.

HANSEN: Yep. That would be good. I know Senator Beau Ballard is a great fighter for these kind of things. So if anybody has information, they can direct it towards him.

SIOBHAN KOZISEK: I have his number.

BALLARD: Thanks, Senator.

SIOBHAN KOZISEK: So.

HANSEN: All right. Thanks for coming, though, and giving us some information.

SIOBHAN KOZISEK: Thank you.

HANSEN: I appreciate it.

HARDIN: Other questions. Seeing none, thank you.

SIOBHAN KOZISEK: Thank you.

HARDIN: Others testifying in the neutral, LB82.

KEITH BUCKHOUT: I'm not sure I printed out enough copies.

HANSEN: Welcome.

KEITH BUCKHOUT: Good afternoon, Chair Hardin and committee members. My name is Keith Buckout, and I'm a policy analyst with the Council of State Governments. I appreciate the opportunity to be here today. Do I need to spell my name for the record?

HARDIN: Yes, please.

KEITH BUCKHOUT: Keith is K-e-i-t-h, Buckhout is B-u-c-k-h-o-u-t. I know this committee considered two of the other interstate compacts

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that CSG facilitated the development of yesterday. And so I won't choose to get into the specifics of interstate compacts or review the contents of this bill. And I can refer you to my written testimony. But there are a couple of things that I want to-- and I think are important to bring to the committee's attention, especially about the previous testimony. So there is a esthetics compact that is currently under development by the Council of State Governments in coop-- as part of our cooperative agreement with the Department of Defense. And then, there is also some questions about scope of practice and issues related to that. So scope of practice is left to the states. The intent of the development teams was to have -- leave the questions about that and leave the responsibility to the licensees, but to advise the Compact Commission to create a resource for licensees so that when they might choose to engage in multistate practice, they would have a resource that highlights the differences between scope of practice in the states. We obviously don't want any licensee ever to be practicing beyond the scope of their training and putting the public at risk. That's not something we would ever want to see in a compact or just in the public in general. To Senator Hansen, to your point about associations, there is a National Professional Beauty Association. They participated in the development process and they are in support of this bill. And then, I do want to also point-- I think this is important -- to, to highlight CSG's process for developing an interstate compact. So this took about 18 months. And we convened subject-matter experts, and that included 11 executive officers or executive directors or the equivalent of state licensure boards across the country, as well as cosmetology educators and attorneys, state board attorneys and people like that. And they came up with the policies that are found in the, in the compact before you today. I do also want to point out that while we don't anticipate substantial additional costs for states participating in this compact, there may be costs for IT and programming to connect the compact data system to the state's current licensure data system. And the current fiscal note includes an estimate for costs associated with the background check. The compact does not require a background check. Nebraska, with its current requirements, would already be in compliance by having a criminal history question, and a license disciplinary question on the-- as part of their application. And so that would not be necessary. You're obviously free to pursue that as a policy if you wish.

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HARDIN: If I could encourage you to--

KEITH BUCKHOUT: Yeah. And with that, I will just say thank you for the opportunity to be here today, and happy to answer any questions you have at this time.

HARDIN: Thank you. Questions? Senator Hansen.

HANSEN: Thank you, Chair. I know they have a National Professional Beauty Association. So do then-- do other states have like Iowa Beauty Association or-- like, the reason I bring that up is it makes sense why a national organization would have like compacts.

KEITH BUCKHOUT: Sure.

HANSEN: But then if we have a state association, they're looking at more-- individualistically for the state. And so-- but I didn't know if other states have associations.

KEITH BUCKHOUT: I don't know how many other states have something like that. I know that there are groups that advocate before their boards for certain policy changes or things like that, but I'm not-- I can't speak to how many other states or which states.

HANSEN: OK. Just curious [INAUDIBLE]. Thank you.

HARDIN: Senator Riepe.

RIEPE: Thank you, Chairman. I have-- I haven't had an opportunity to really read your handout, but it seems that as an organ-- organization that's based out in Lexington, you have more of an interest in a centralized, as Senator Hansen pointed out, more of a centralized piece as opposed to a-- what's traditionally maybe called a states' rights position. So we, we may have something that we need to clearly understand the implications of all of that.

KEITH BUCKHOUT: Sorry. I should have--

RIEPE: I don't know that I got a question in there.

KEITH BUCKHOUT: To, to your point, so, so the Council of State Governments, we're a membership association for every single elected

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and appointed state official in the country. So, Senator, I work for you, actually. Feel free to email me anytime if you have anything you'd like me to work on. But to--

RIEPE: I'm going to make a note of that.

KEITH BUCKHOUT: Well, I, I guess I-- you can hold, you can hold me to that promise. But to that end, so we do not lobby. We are-- I am neutral on HB82 [SIC] today because we believe in your-- the people entrusted you, the senators, to make the decisions that are the best for the state of Nebraska, and so we would never pretend to tell you that we know better than you. And so-- but we stand by our process. And other states have told us this is an issue that they would like to see us solve, and they directed us to work on creating these compacts in-- as part of our cooperative agreement with the Department of Defense. And so to your concern about centralization, I would basically just say we try to do what is best for our states and our members when-- all the states and members when they mentioned just something-- mentioned to us that there is a problem that multiple states are experiencing.

RIEPE: OK. Thank you. Thank you for the response. Thank you, Chairman.

HARDIN: Additional questions? Seeing none, thank you.

KEITH BUCKHOUT: Thank you.

HARDIN: Anyone else? LB82, testifying in the neutral. Seeing none of those, Senator Roundtree. We had 10 proponents online, zero opponents, and 3 testifying in the neutral.

ROUNTREE: Thank you, Chair Hardin and members of the Health and Human Services Committee. First, I want to thank everyone who came and testified today in the, in the affirmative, in the negative, and in the neutral. There are a lot of good comments that were put forth. And I think that's the purpose of our hearing, is to get down to the root of the matter and then to hear the whole conclusion of the matter. And I think that we're there. It was asked that seats be given at the table from our opponents, and even in our neutral. So we gathered a lot of information to date. This is still a good process going forward in cosmetology. While we certainly always want to maintain the high

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health standards that we have here in Nebraska and never compromise that-- either here nor in any other state-- but we also want to be able to facilitate the ability to work together and have this compact in place, so that we can have people that do come into the state, are able to practice according to the laws of our state. And if we have members that move outside of the state into neighboring states -- but yet, they'll still return back. So we're looking at workforce development, enabling all of our military spouses when they come into our area to have quick access to employment and just to do what's right for Nebraskans. So I am open to-- I know that-- the way that the compact is written and compacts in general, when we look at that, we can't substantially change that. But we could get to drafting that compact that would be across the states and include the information that's been given today. So as I close today, I want to leave the door open. You know, for those that wanted a seat at the table, they're here in the room. And so, I'd be willing to receive what they have to say and look at how we can best move forward and effect the compact. Thank you, sir.

HARDIN: Thank you. Questions? Seeing none, thank you.

ROUNTREE: Thank you so much, sir.

HARDIN: This concludes LB82. We're now going to skip over LB160. Senator Riepe graciously said, hey, let me go last. And so, the last shall be last. How's that? Let's go to LB110. Let's see, is Senator Hughes with us? She's not. She probably thinks she has more time, Senator Riepe.

RIEPE: If you need me to go ahead, I can.

HARDIN: You know-- OK. We're sending up a flare. Is that what we're doing? OK. We're, we're going to give them 60 seconds to come around, Senator Riepe.

RIEPE: That's fair.

HARDIN: And if they don't respond— so we'll, we'll take about a two-minute, three-minute break. They never pay attention to 60 seconds, just so you know. Let's be realistic about this. We're going to take a break for just about three minutes and we'll be back.

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RIEPE: OK. Thank you.

[BREAK].

HARDIN: So with that, let's begin LB110, and Senator Hughes.

HUGHES: Yes. Chairman Hardin, Hardin and members of the Health and Human Services Committee. I am Jana Hughes, J-a-n-a H-u-g-h-e-s, and I represent Legis-- Legislative District 24. I am here to introduce LB110, which would require healthcare providers to obtain consent before performing pelvic examinations on unconscious or anesthetized patients. I would like to state for the record that I have looked into this and have found no evidence that this has happened in our hospitals or care facilities here in Nebraska. That being said, if we can address this before it happens, prevent miscommunication or worse, then we should do that. Last year, the federal government, through the Department of Health and Human Services, issued guidance to our teaching hospitals about this very subject. This guidance clarified that what-- that providers and their medical students must obtain written con-- consent from patients before performing pelvic exams, including for unconscious or anesthetized patients. I'd also like to note that the DHHS guidance also applied to breast, prostate, and rectal examinations. I'll share more about that here later. LB110 would take that same concept and make this the standard for all healthcare providers in the state. There are 25 states that have already passed this. You can see a list on the second page of what our pages were handing out to you guys. What are we trying to achieve with LB110? Patients have a rational expect-- expectation of having control over their medical decisions. This is especially important for patients undergoing anesthesia. They have the expectation that their provider would inform them and get their consent for any examination of intimate areas of the body before they go under anesthesia. The ethical principle of informed consent is critical to the trust patients have in their healthcare providers. Both of those conditions are especially critical to survivors of sexual assault when a violation of that trust can prevent a patient from seeking the medical care they need out of fear. Taking a minute to obtain consent can avoid a terrible situation. I cannot put this into better words than what a victim of a sexual assault testified to when our neighbors in Missouri were considering similar legislation, and which there, passed unanimous-- unanimously in 2023. I've shared that on the first page of

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what I've handed out. You can read this later after the hearing, but it's an unfortunate situation that can be largely avoided if we make consent a requirement for these sensitive exams. LB110 does allow healthcare providers the ability to perform these examinations without consent if it is immediately necessary-- excuse you-- for emergency purposes. LB110 imposes no criminal penalties on providers. It only subjects providers who violate this bill with professional discipline. LB110 provides the ability of someone with the healthcare power of attorney to provide this consent, and it allows court-ordered examinations for the collection of evidence. Since its, since its introduction, I've received some constructive feedback on the language of the bill and have put that together in an amendment that I've also shared with you. We decided from this feedback not to restrict the consent requirement only to pelvic examination. AM63 devine-- defines intimate examinations to include breast, prostate, and rectal examinations along with pelvic examination. Written consent would be required for intimate examinations. Intimate examinations would not include a visual examination. It only applies to a manual or internal examination of these sensitive parts of the body. I also included some findings to lay out the intent of this bill to provide direction to the courts if a violation of the statute were to end up in the courts. Again, patients have a rational expectation of having control over their medical decisions. Informed consent provides communication between the patient and their provider. We protect these areas of the body in other laws-- we protect these areas of the body and other laws we have in Nebraska, and they deserve similar protections in our healthcare system. If obtaining a signature on a document can avoid imposing the trauma described in the printed testimony that I shared with you, it's worth our time to make that possible. I thank you for your time and consideration, and I welcome any questions that you have.

HARDIN: Thank you. Questions? Senator Hansen.

HANSEN: Thank you, Chairman. And if you can't answer some of these questions, do we have testimony behind you from medical professionals or anybody?

HUGHES: I, I know the one testifier behind is not a true-- a medical person. But-- is there any--

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HANSEN: Oh, yeah. OK. No, I know, I know who it is now, so I totally understand. That's fine.

HUGHES: OK.

HANSEN: So, personal opinion--

HUGHES: OK.

HANSEN: --being a state legislator, there, there are probably a lot of diseases or conditions that can be caught early or preventatively from doing pelvic exams, right?

HUGHES: I would-- yes. Sure.

HANSEN: And so it's appropriate to make sure that we get informed consent from the individual before doing these exams to catch these diseases proactively, correct?

HUGHES: Yes.

HANSEN: Which is what you're trying to do.

HUGHES: Yes. Right.

HANSEN: OK. I just wanted to verify it with you. Thank you.

HUGHES: OK.

HARDIN: Senator Riepe.

RIEPE: Thank you. Thank you for being here.

HUGHES: Yes. Thank you.

RIEPE: You. I want to run a little scenario--

HUGHES: Thank you on this all-male panel. That's great. It's not uncomfortable at all.

RIEPE: Very sensitive males.

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HUGHES: It is a very sensitive-- but I am including you with this amendment, so we got that covered.

RIEPE: OK. My scenario is this: There's a mother in having a normal delivery. All of a sudden, things turn bad. The baby's coming breech, so you have to go to a C-section, which means you probably have to go under anesthetic.

HUGHES: Yes.

RIEPE: How-- that's, that's a very split-second kind of thing. How do you-- you don't want to pull them. You want to take the time, actually, to get a authorization.

HUGHES: Right.

RIEPE: And say their partner, who's out in the waiting room or maybe they're in the room, is not eligible to authorize the treatment on that particular mother-to-be. How, how does that, how does that split-second decision going to work?

HUGHES: I guess I would-- OK. So I would think-- and this is weird, but my first baby was a C-section emergency. By going in and giving birth in a hospital, you know that there are intimate areas that are going to be exam-- I mean, touched, and-- so I guess then when you go, go in for your C-section, you've already probably done that consent because you're going in to give birth. Do you know what I'm saying?

RIEPE: So that blanket--

HUGHES: It's like the same--

RIEPE: Yeah. That blank-- blanket consent would cover this?

HUGHES: Yeah.

RIEPE: OK.

HUGHES: That-- like, that's-- and we leave out if there's-- let's say I've had a car accident and I am unconscious. I wasn't put under, but I was-- I'm unconscious. And for some-- I don't know. For some reason they need to go in there because--

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RIEPE: Well, it might be bleeding.

HUGHES: --there might be some metal. Yeah, or I'm bleeding or whatever. In an emergency situation, you can. I mean, you're not going to have consent from me if I'm laying there unconscious. So it, it has in there, emergency situations, you can do these things.

RIEPE: Which is then kind of judgmental, but OK.

HUGHES: Which would be some [INAUDIBLE]. Right.

RIEPE: OK. Thank you. Thank you, Chairman.

HARDIN: Senator Fredrickson.

FREDRICKSON: Thank you, Chair Hardin.

HUGHES: And I should say, I am not a doctor. I have an engineering degree, so to be clear on these things. OK. Sorry. Go ahead.

FREDRICKSON: Thank you, thank you, Senator Hughes for being here and for bringing this bill. I think it's certainly an important bill. And I'm a [INAUDIBLE] but I will certainly read the testimony you provided with us later.

HUGHES: Sure.

FREDRICKSON: I think that that's helpful. I was also happy to hear that to your knowledge, this isn't necessarily happening per se in the state of Nebraska. That's, that's a relief.

HUGHES: This was-- yes. Correct. And that's why I was pretty clear at the beginning. This was not-- I mean, I've had other bills that someone in Nebraska has brought this to my attention, and then you pursue it that way. This was not anything happening in Nebraska. It was, it was brought to my attention by a friend, but mostly from reading others-- like some cases, this has happened in other states.

FREDRICKSON: Sure. Yeah. Yeah.

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HUGHES: And this person had done some of that research and found that, you know, half the other states have already passed something like this. And so, it's just like, oh, this is kind of preventative so--

FREDRICKSON: Like a proactive approach. Yep. Yep.

HUGHES: --that it won't happen in Nebraska.

FREDRICKSON: That's great.

HUGHES: And clearly, the -- our teaching hospitals have addressed it.

FREDRICKSON: Yes.

HUGHES: So why should that not reach out to any of the institutions?

FREDRICKSON: Great. My, my question is, I, I see in the bill that it requires written consent. I'm wondering if you might be open to changing it to informed consent. And what I mean when I say that is—

HUGHES: You mean like verbal informed or like an electronic signature?

FREDRICKSON: Or just informed in general. That's a typical term used in--

HUGHES: OK.

FREDRICKSON: --in medicine. But, you know, the idea there being there might be situations where an actual written consent might not be possible, but informed consent would certainly imply that the patient was of sound mind.

HUGHES: I would, I would definitely be interest-- I, I would definitely be working with the committee and--

FREDRICKSON: Sure.

HUGHES: --if that-- if it-- on the, on the hospital side, if that makes more sense. And it's a common practice. Yes, I would be open with something like that.

FREDRICKSON: Thank you.

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HUGHES: Yeah.

HARDIN: Are there amendments underway with this bill?

HUGHES: So, so-- OK. We have the one that would ex-- so the bill as written was just the pelvic exam.

HARDIN: OK.

HUGHES: And then we had some kind of legal advice and, and other-- not just the legal advice reached out, but I had two other people email me that maybe we should change that to intimate exam. So not just pelvic, but rectal and things like that. So we have that amendment ready.

HARDIN: OK.

HUGHES: But I will-- I was going to mention this in the closing. We also, just last night, got an email from DHHS. And they, they feel like this statue perhaps should fall under-- I want to make sure I say it-- uniformal credent-- how do you say that-- credentialing act, the Uniform Credentialing Act. You guys probably are very familiar with that. I'm not.

HARDIN: Yeah.

HUGHES: And so we may, we may as a, as a committee, if, if you decide to go with this, we may need-- this needs to fall under that. And there might be a couple definitions that, that need to be-- a couple words that still need to be defined. So there might be another possible amendment change.

HARDIN: I'm looking at AM63 right now and it, it seems to at least reference the Uniform Credentialing Act. Then-- so I don't know--

HUGHES: Yes. So then we need to move it under that statute.

HARDIN: So-- OK.

HUGHES: Yes. OK.

HARDIN: Very good. Any other questions? Will you be with us at the close?

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HUGHES: I absolutely will be with you at the close.

HARDIN: Well, wonderful.

HUGHES: Great.

HARDIN: Very good.

HUGHES: Good.

HARDIN: Proponents of LB110. Welcome.

ERIN FEICHTINGER: Thanks for having me. Great way to spend a Friday afternoon. Chair Hardin, members of the Health and Human Services Committee, my name is Dr. Erin Feichtinger, though as we've established, not that kind of doctor. E-r-i-n F-e-i-c-h-t-i-n-g-e-r, and I am the policy director for the Women's Fund of Omaha. We offer our support of LB110 because it codifies a valuable protection for patients, reiterates the necessity of consent and agency, and protects survivors of sexual assault. The American College of Obstetricians and Gynecologists stated in 2011 and reaffirmed again in 2019 that examinations on an anestheti-- oh, my gosh. We're going to struggle through this testimony-- on an anesthetized woman that offer her no personal benefit and are performed solely for teaching purposes should be performed only with her specific informed consent. Of course, healthcare providers in Nebraska are already requiring informed consent before these exams because they recognize the critical importance of informed consent in protecting the sanctity of trust in the doctor-patient relationship. And to your question earlier, Senator Riepe, I've spoken to several, several OB-GYNs about this bill, and every single one of them has said that before, undergoing anesthesia in an OB-GYN context, you would be giving this consent or be asked to provide that consent or withdraw it. So.

RIEPE: Thank you.

ERIN FEICHTINGER: The possibility that this could happen to a patient in Nebraska is concerning for what should be hopefully obvious reasons, namely that a medically unnecessary intimate exam without consent that has no medical benefit to the patient would be performed without their awareness or permission. Additionally, a patient who has experienced sexual violence in their past would be retraumatised by

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even the idea that this could happen, and in turn, would decrease the likelihood that a survivor might access necessary healthcare. I know that we care deeply about victims in the state of Nebraska, and this Nebraska Legislature has said that time and again. And we want to do what we can, I know, to avoid retraumatizing someone if we can avoid it. Requiring informed consent for intimate exams across the board is already best practice and will improve the quality of every patient's interaction with the medical field and maintain a person's agency over their body during medical interactions. Especially for survivors of sexual assault, ensuring that medical interactions are transparent and safe protects against retrauma -- traumatization and helps make sure they are not avoiding healthcare out of fear. Similarly, giving those survivors a mechanism to restore agency over their bodies and affirm their choice in the event this ever were to happen is also important. And I am happy to answer any questions you may have to the best of my abilities stating, once again, I am not a medical doctor.

HARDIN: Senator Hansen.

HANSEN: Thank you, Chair. In the instance that a minor might have to be-- have an examination, the parental consent would suffice, I'm assuming, in something like this?

ERIN FEICHTINGER: In the way that I read the bill, it would be whoever has medical authorization over that person.

HANSEN: OK. Thank you.

HARDIN: Additional questions? Seeing none, thank you.

ERIN FEICHTINGER: Have a great Friday.

HARDIN: Proponents, LB110. Welcome.

SOPHIA STOCKHAM: Thank you, Chairman Hardin, members of the Health and Human Services Committee and Senator Hughes for bringing forward today's legislation. My name is Sophia Stockham, spelled So-p-h-i-a S-t-o-c-k-h-a-m. I am also not a medical doctor, but I am a political science Ph.D. candidate at the University of Nebraska, as well as a graduate research fellow at the National Science Foundation. I would like to state for the record that the opinions expressed herein are my own and do not necessarily reflect the views or positions of the NSF

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or UNL. My research, though, focuses on the passage of informed consent laws for pelvic examinations, including the publication of my master's thesis last spring. As previously stated, nonconsensual sensitive examinations have persisted despite recommendations by the American College of Obstetricians and Gynecologists. However, they've also persisted despite recommendations by the Association of Professors of Gynecology and Obstetrics. This has affected over 3.5 million Americans. Media reports have highlighted cases of medical trauma, including bleeding, pain, waking up during the procedure, the false information that a procedure did not occur when it had, as well as the formation of scar tissue. Ultimately, this practice discourages patients from seeking out future care. Additionally, as mentioned, the Federal government issued new guidelines of April 1, 2024, requiring that hospitals receiving Medicare and Medicaid funding obtain informed consent for sensitive examinations, with the risk of losing their funding if they do not comply. However, this only applies to these hospitals receiving this funding. And additionally, while the principles of informed consent are outlined in Tri-Care, the military's insurance program, there is no formal policy for military personnel regarding this protection. Medical institutions in Nebraska are already on board as well. Nebraska Medicine required written consent starting in April of 2021. Additionally, regarding the ability of individuals to get the practice that they need to, for our future doctors, most individuals consent to pelvic examinations when informed consent is provided, with the most often cited reason for opting out being religious reasons. As of January of 2025, in fact, yesterday, 27 states have actually adopted informed consent laws, including Texas, Iowa, and Missouri, with five additional states, including Nebraska, currently entertaining the idea of it. Over 50% of laws include exceptions for rape kits. I also agree with the proposal of an amendment to include rectal, breast, prostate examinations and other sensitive examinations. This is in line with both federal policy, as well as the majority of states that have passed legislation. Passing legislation for LB110 would ensure that all Nebraskans are treated with the dignity that they deserve, while broadening the definition would insure that both men and women are protected. I urge the committee to advance LB110 to be heard by the legislator [SIC], and I'm happy to answer any questions here.

HARDIN: Questions? Seeing none, thank you.

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SOPHIA STOCKHAM: If I just may, as well--

HARDIN: Please.

SOPHIA STOCKHAM: Senator Hansen, regarding medical sources, those are listed in my end notes if you would like to view them later.

HARDIN: Thank you. Proponents, LB110.

*AMBER SCHUTTE: Women should not have to worry about having their bodies violated to be given an exam they didn't consent to.

HARDIN: Opponents, LB110. Those in the neutral on LB110. Seeing none, Senator Hughes, would you mind coming back? Online, we had 27 proponents, 2 opponents, 4 in the neutral.

HUGHES: All right. Chairman Hardin and committee, thank you for having me today. I had no idea that our current student at UNL was researching this. So, awesome. Thank you for coming in. And thank you for— 27 states. So I do want to, since you've mentioned comments, if you guys— 29 proponent, 2 opponent. I just want to mention the 2 opponent ones. When you read the one, I think the person clicked wrong. I think they meant to click proponent because when you read what they wrote, that makes sense. And, and the other opponent, it just made me laugh and I want to share it because they think my bill does the opposite, that I'm making a bill to— well, I can't find right now— that I'm making a bill that says that you should, with no consent, be able to do, to do these exams. So in my opinion, we really don't have any opponent on the online comments, but go ahead and read through them and that will make sense.

HARDIN: Thank you for the clarification.

HUGHES: Yes, it's actually-- find it. It's, it's-- she says my name. Senator Hughes, I can't believe you're doing this. And anyway, OK. So I appreciate your time. Oh, I wanted to mention this, too. Let's see, who had asked-- oh, Senator Fredrickson, why if written or if a verbal would work. We did put written just as-- feel like that's a little bit of a protection for the doctor and the patient, where sometimes if you are put under anesthesia, you may not remember even the right before time, and didn't want it to become a case of he said, she-- or she said, she said, whatever. He said, she said. So we just thought that

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lends itself to protecting both patient and doctor. But if it's industry practice-- I mean, something we can discuss. All our human institutions are built on a foundation of trust, whether it's our governments, our financial institutions, these are based on trust. Healthcare is no different. Informed consent is the basis for the trust in healthcare. And all I'm requesting is that informed consent for examinations of intimate areas of the patient's bodies and-- would be reaffirmed with the advancement of LB110 with the AM63. Communication between providers and patients is very critical. Clear communication serves to manage expectations and assures a patient their control for their health decisions impacting their bodies. LB110 with AM63 ensures this communication happens by requiring that written consent before examinations of intimate areas of the person's body. Again-- and I think I mentioned-- I'm going to mention just one more time-- this might need to go under the Uniform Credentialality [SIC] Act statute, so that might require another amendment to the amendments, but willing to work with you guys on that. And I thank you for your time, and if you have any other questions.

HARDIN: Senator Riepe.

RIEPE: Thank you. For the record, in the hospital industry, if you didn't write it, you didn't do it, if you didn't document it. So verbals are--

HUGHES: Verbals are verbal probably, right? Yeah. She's--

RIEPE: Verbals are the love of trial attorneys.

HARDIN: OK.

HUGHES: You said that so well, Senator Riepe.

HARDIN: Other questions? Seeing none, thank you.

HUGHES: Thank you. Thanks for your time.

HARDIN: This concludes LB110.

HUGHES: Happy Friday.

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HARDIN: Next up would be LB87. And here comes Senator Dorn even now. We'll take a moment to transition here to LB87.

DORN: Maybe if I'm sitting in the back of the room it seems less darker back there than up here. These lights are right.

FREDRICKSON: There is a bright spotlight on that chair.

DORN: They're right.

FREDRICKSON: It's true. It's the hot seat.

MEYER: This is an interrogation.

HARDIN: Very good. Thank you. Welcome, Senator Dorn.

DORN: Thank you. Thank you very much. And I would be remiss before I start if I didn't say you have one of my former staff members here as your clerk, so.

HARDIN: We are honored.

DORN: I just wanted to mention that.

HARDIN: And she is doing an amazing job. So thank you for allowing us to borrow her for this season of life.

DORN: Been trying to get a hold of her and move myself up on the list, but that's going to take a little time.

HARDIN: Can you help him, Barb?

DORN: No. We're giving her a bad time. Good, good afternoon, Senator Hardin and members of the Health and Human Services Committee. My name is Myron Dorn, M-y-r-o-n D-o-r-n. I represent District 30, which is all of Gage County and southeastern Lancaster County. I'm here to introduce LB87. The executive director for the Commission for the Blind and Visually Impaired, Impaired, Carlos Servan, came to me and discussed the success, success of a pilot program in Omaha for deaf and blind persons, a dual disability. The pilot program offers support services providers, referred to as SSPs, help those with vision and hearing impairment. The commission would like to see this program

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expanded to help more people across the state. In the bill, you'll see that the program is straightforward. Support service providers offer a variety of assistance services, which may include providing visual situations and environmental information, acting as a guide, helping with daily living activities like reading and sorting mail, travel to and from appointments and et cetera. The bill allows the commission to offer the services directly or to contract with a private provider. It is my intent to seek a General Fund appropriations of \$100,000 for this coming fiscal year, 2025-26, and the following fiscal year, '26-27. I know it may be difficult to get an appropriation this year, but I also wanted to educate this committee and the Legislature on the import-- the importance of this program. The stricken language is Revisor clean-up of language no longer active since the date has passed. Mr. Servan is here to give you more details on the specifics of the program, and I know there are several others behind him who also be-- wish to testify. With that, I'll be glad to answer any questions.

HARDIN: Questions? Senator Fredrickson.

FREDRICKSON: Thank you, Chair Hardin. Thank you, Senator Dorn, for being here and for bringing this piece of legislation. So I, I, I, I believe we'll get some more clarity from some of the testifiers as well. But— so if I understood you correctly, so this is a pilot program that's currently active in Omaha. Is that correct?

DORN: They've been doing this program, and, and Carlos will give you a better idea. It's the last year or two in Omaha. And with that success they've had up there, their goal is to, I call it make that more available across the state. Part of what— when we sent this up to the Bill Drafters then, there's not a program. And that's part of why you see the word mentioned in here, program. If that was successful and they were to receive some funding for that program as they expand out—of—state, it now has to have a new program here in our, I call it accounting department. And that's why there is some language referred to in here. The Bill Drafters said, you need a program, but we understood after a while, too, that we did. And that's why that part of the discussion is in here, is to set that out.

FREDRICKSON: And was the pilot program initiated by the Legislature?

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DORN: No. It was by-- and Carlos will be able to tell you. My understanding, it was initiated by them. It was something that they wanted to try, and because of some things that it worked better to try it just an Omaha. And because of the success there, then-- now they wish to expand it to other areas.

FREDRICKSON: Great. Thank you.

HARDIN: Senator Riepe.

RIEPE: Thank you, Chairman. And thank you for being here, Senator. My question is, you're a longstanding member of the Appropriations Committee, so you know where every penny is at in this building. Are there other options other than the General Fund for this \$100,000 for two years?

DORN: There, there might be some other, you know, options as far as are there are accounts that I call it, we can kind of raid out of or some of those things. That I, I have not dwelled in and looked at those. If you're thinking, could we take some interest off of some other accounts and use those? Generally speaking, the governor's been really good at, I call it acquiring a lot of those interests, because we--

RIEPE: Yes.

DORN: --special session, we-- there were several of those programs that we automatically now transfer the interest in and stuff. So, haven't really looked at that. We did have the discussion, though, with him about our current situation here, with appropriations in the state

RIEPE: I think we're both aware-- everybody on this committee is aware that the Kiewit Foundation has \$500 million they are going to disperse before-- it sounds like a program they might be interested, plus a lot of other Omaha foundations that might step up, or statewide foundations even. But yeah. Good luck to you. Thank you. Thank you, Chairman.

HARDIN: Other questions. Seeing none, will you stick around for closing?

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DORN: Yes. We will stick around.

HARDIN: Wonderful. The first proponent for LB87. Welcome.

CARLOS SERVAN: OK. Can you all hear OK from here?

HARDIN: We can hear you fine.

CARLOS SERVAN: OK. Well, good afternoon, Senators. My name is Carlos Servan, C-a-r-l-o-s S-e-r-v-a-n. I'm the executive director of the Nebraska Commission for the Blind and Visually Impaired. My address is 3800 C Street, Lincoln, Nebraska, 68510. Deaf-blind individuals have profound hearing and vision loss which lead-- face unique challenges in accessing essential services such as information, transportation, and community involvement. Although friends and family may want to help, they often have their own commitments and may not, may not always be available. Furthermore, deaf-blind individuals might feel guilty [INAUDIBLE] another's time. They may be also reluctant to share sensitive personal information. As a result, these individuals may remain isolated at home, neglecting necessary medical attention, missing important mail, failing to pay bills, or ignoring needing repairs at home. Basic needs as food, clothing, physical activities, and human interactions may go unmet, leading to loneliness, depression, and a decline in self-worth. Without proper support, many deaf-blind individuals may ultimately end in institutional care. It is important to remember that the Olmsted federal, federal decision, along with state law, mandates that states do everything they can to support people with severe disabilities to lead integrated life in the community. Support service providers, SSPs, are crucial in enabling deaf-blind individuals to live, integrating life in our community. SSPs help with providing access to visual, situational, and environmental information, serve as a guide, and facilitate conversational English talking or sign language, empowering deaf-blind individuals to make informed decisions and live independent. With a, with a SSP, deaf-blind individuals can live healthy, confident, and self-sufficient lives, manage personal business, maintain sa-maintain safe at home, and engage with the community, and reduce isolation. In Nebraska--

HARDIN: Our light is red. Please continue. Mr Servan.

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CARLOS SERVAN: --approximately 261 individuals are deaf-blind. This state does not have a dedicated program for this population, unlike 31 other states plus the District of Columbia. We started an SSP program a year ago and it already showed success, and so we would like to expand this program statewide. I thank you for listening, and I will be glad to answer any questions.

HARDIN: Thank you. Senator Riepe.

RIEPE: Thank you, Chairman. My question would be this. I see that you have a number of people. I assume most of these are from Lincoln. God bless them. Would this be your next location if you've-- if you have the one operation in Omaha at this time, would Lincoln be your next step?

CARLOS SERVAN: Potentially, yes.

RIEPE: OK. Thank you.

CARLOS SERVAN: But the main thing also is the rural areas. There are a lot of need in the rural areas.

RIEPE: And the Lincoln-- assuming you came into the Lincoln market, does that displace another service for the blind in Lincoln or does it complement it?

CARLOS SERVAN: Would you rephrase your question again because I'm missing something there?

RIEPE: My question would be, is you bring your program, the one that you have, I think you've modeled out in Omaha.

CARLOS SERVAN: Yeah.

RIEPE: So you bring that to Lincoln. I assume there are some services for the blind here in Lincoln. Would your program complement or compete with those existing services?

CARLOS SERVAN: No, we will complement. We, we are the-- a vocational rehabilitation and the defending leading agency for the blind, so we receive federal and state funds. And the purpose is to provide services so eventually they can get employed or live independently,

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and then we close their cases. This request is mainly to start a program for most of those who are already close and need our assistance. So we do have offices statewide. We have counselors, staff members, and, and a [INAUDIBLE] to, to work on that.

RIEPE: OK. Thank you. Thank you, Chairman.

HARDIN: Other questions? Senator Fredrickson.

FREDRICKSON: Thank you, Chair Hardin. Thank you for being here, and for sharing your testimony. How many individuals are served currently in Omaha with this pilot?

CARLOS SERVAN: 15.

FREDRICKSON: 15? OK.

CARLOS SERVAN: I'm going to have more. There is a waiting list, but at this point, 15.

FREDRICKSON: And how long is the wait list?

CARLOS SERVAN: How long is the waiting list? In Omaha, I believe there are another 8, but we haven't make efforts to recruit more because, again, it's just a pilot program.

FREDRICKSON: Sure.

CARLOS SERVAN: But statewide, we have 261 individuals identified.

FREDRICKSON: OK. And of those 261, how do-- with-- if-- should this pass into the law and should we find the appropriation for this, how many of those individuals do you think we would be able to serve?

CARLOS SERVAN: I think all of them. That's what we are asking for. In the beginning, it was \$300,000, because that's what it would take to support the program. But we want to train the SSP providers first, and it takes time to recruit, train the new folks. And we cannot use the money right away, so it will be \$100,000 this year, \$100,000 next year, and hopefully, 1,000-- \$100,000 the third year. Because the, the funds that we are using for the pilot project, it's some extra funds

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that we have been affording-- savings on staff vacancies. But now, we have all fully staff.

FREDRICKSON: Thank you.

CARLOS SERVAN: Thank you. Oh, and I want to clarify, too. I've been working on the-- a business of blindness for the last three, four, five years. And it-- so for service provider is the number one need that the blind individuals identify nationwide. And Nebraska didn't have one. So we've been talking about that for years, and that's why we decided to have a pilot project.

FREDRICKSON: Thank you.

HARDIN: You mentioned 261 statewide.

CARLOS SERVAN: That we identify very easily, but we haven't, again, recruit.

HARDIN: OK. Just a question. Is there an area that seems to have more than others, outside of the Lincoln area, for example? Is there a, a next place that might make sense?

CARLOS SERVAN: Besides Omaha, you mean?

HARDIN: Besides Omaha, besides Lincoln. Since I'm from a rural area, it's a loaded question, of course.

CARLOS SERVAN: Oh, no. Yeah. We, we understand. And that's why I'm emphasizing that we provide services statewide, and we have counselors statewide. The next one, logically, will be in the area of Grand Island--

HARDIN: Grand Island.

CARLOS SERVAN: --Kearney. But again, we, we have to make that mean something, which, when we start the western part of Nebraska, I start in Grand Island, all the way through the western--

HARDIN: OK.

CARLOS SERVAN: --Scottsbluff. Yeah.

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HARDIN: OK. Very good. Other questions? Senator Riepe.

RIEPE: Thank you, Chairman. I do represent a district in Omaha, and I think you and I had this discussion. I did also serve as chairman of Outlook Nebraska, which is a blind organization, a production of, quite frankly, papers there in the Omaha area. And my question would be is, I'm always interested in like agencies, like constituents relating to others to see if there's opportunities for cooperation together. So I don't know whether you've had some working relationships or explored the opportunity of working with Outlook Nebraska there in Omaha.

CARLOS SERVAN: We work with them. We have a memorandum of understanding.

RIEPE: OK.

CARLOS SERVAN: And we provide training. They provide some training to our clients because we are short of staff. And then we participate also in the programs— make some tools for some folks were interested from working there could work there, too.

RIEPE: Yeah. OK. Thank you. Thank you, Chairman.

FREDRICKSON: Thank you, Senator Riepe. Any other questions? Seeing none, thank you for your testimony.

CARLOS SERVAN: Thank you.

FREDRICKSON: Next proponent. And while we are waiting for the record, there were online comments for LB87. There were 7 proponents, 1 opponent, and zero in the neutral capacity.

KATIE PETRY: Is there a second chair we could borrow?

BALLARD: I have one right here.

KATIE PETRY: Oh, you do have one right there.

FREDRICKSON: Good afternoon.

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ALESE JONES: Good afternoon. My name is Alese Jones. It's spelled A-l-e-s-e J-o-n-e-s, and I have a testimony to share. But I'm not from any organization. I'm just-- it's on behalf of myself in support of this. And actually, my SSP person brought me here. I'm from Omaha. And so, she's going to help me read the testimony that I wrote.

KATIE PETRY: Can you all hear me OK?

FREDRICKSON: Yes.

KATIE PETRY: OK. Hi. My name is Alese Jones, and I just want to say how lifesaving it is to have the SSP service. In 2021, I suddenly had severe vision and hearing loss and it felt like my life was over. I came a long way after learning how to walk again and everything but life-- or sorry-- and everything, but life is still very isolating. I was used to being a very social, outgoing, and independent single mom. But now, not being able to drive, get out at night, or doing important things for and with my 12-year-old son. I'm in the best place I've been since my stroke, as now I am transitioning out of homelessness and going back to school for a new career since I can no longer be a bus driver. Having an SSP improves my quality of life so much. It is a support I can depend on and doesn't make me feel like a burden. It allows me to get out and I can talk to people who understand and help me with my unique needs to overcome barriers my limitations were causing. It's so refreshing having a caring person who understands my invisible disability and supports me, and makes me feel more hopeful. It makes me be able to be more social and achieve my goals. Also, for me, personally, it's helpful, because as a single mom, I was not able to go to my son's football games or conferences. I don't drive, but I also can't see him very well in the football field and I can't get around on the bleachers and all that, so having someone help me is life-changing for me and him, also. For me, as I am coming out of homelessness, I'm able to have someone to support me achieve my goals, like looking for employment, shopping for clothes, shopping at the grocery store. It just really improves my life, and I know that it can help many others who are blind and deaf. Vision and hearing loss come in all ages and backgrounds, and I would just love for everybody everywhere to have this wonderful opportunity. Sincerely, Alese Jones.

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FREDRICKSON: Thank you for your testimony. Any questions from the committee? Seeing none, thank you for being here. Next proponent. Good afternoon.

LEE MOORE: OK. My name is Lee Moore, L-e-e M-o-o-r-e. I could tell you a lot about the SSP program, but we don't have a lot of time, so I'm going to get to the nitty-gritty of things. My husband is a disabled vet and it is difficult for him to take me places and have to sit while I'm at an appointment or something. It's horribly painful for him. So the SSP program is able to take a lot of the, the workload off of him, and it also gives me a chance to have other people to talk to besides just my husband, even though I love him. As you can see, I have more disabilities than just vision and hearing loss. After my accident, I was a prisoner in my own home. For the first three years, all I could do is go to the doctor and PT. Three years took a toll on me. When my vision started getting worse, worse than I expected, I sat in the dark and I cried. I told my husband the biggest fear was being isolated. I have to get out of the house. I have to be able to do things on my own. I can't go back to what it was right after my accident. It was horribly, horribly destructive. I believe-- I realized that if I couldn't see what was in front of me, I would never be able to leave the house. It's not safe. With me pushing my wheelchair-- I can't use a cane. I can't tell what's in front of me. My SSP tells me where I can go. This is 12:00, 1:00, 2:00, sharp right, 11:00, 10:00, sharp left. So that I know where I'm going. This person has to tell me where there are obstacles in front of me. If a sidewalk is raised, would I bump into it and my chair hit, it would knock me out because of the forward momentum. It would knock me right out of my chair. If there's a hole in the, in the street, am I going to fall into it? I can't tell these things because I can't use a cane. So without the SSP, I can't leave the house. Some people dread running errands. They have to go here, they have to go there, they have to do something else. I don't feel that way. I get to go places. I get to go out. I get to do my own shopping and do things on my own because of the SSP program. Many people think that disabled people are not able to do a lot of things. And we can do a lot, we just do it differently. With help, I'm normal. I'm not defective. I'm not different. Everyone needs help. My SSP takes me to doctor's appointments, helps me read paperwork that I need to fill out, and shows me where to sign my name. Because of my hearing loss, Nancy is there to help me when I can't

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hear and understand other people. And just so you know, the SSP doesn't take over and do things for us. They're there to help us do what we want to do. She helps me go groc-- grocery shopping, check prices, tell me what the different options are on the shelf, reads labels and ingredients for me, and that way I'm allowed to decide what I want to purchase. We've gone ice skating. Yes, on wheels. We've gone to comedy clubs. Everything is described for me. Being independent is a huge thing. Not being isolated makes a difference with your mental, emotional, and spiritual health. There are loads of people who need these assistants, and it would improve their quality of life more than you can imagine. Thank you for your time.

FREDRICKSON: Thank you. Any questions from the committee? Senator Riepe.

RIEPE: Thank you, Chairman. My question would be, is, is your helper-I'm trying to look at your letter here, and I appreciate that very much. I appreciate you being here. Is your helper for every day, all day, five days a week, or how's that?

LEE MOORE: No. Just when I need, I call and make an appointment. And she-- I can work with her first. And then if she says she's available, that I contact Vancro and they set up an appointment. It might be an hour, it might be three hours on a day. We're allowed 15 hours per month that they can work with us.

RIEPE: I'm trying to be sensitive here, but I see at least today that you're in a wheelchair.

LEE MOORE: Yes.

RIEPE: Does she have transportation that can transport a wheelchair?

LEE MOORE: Yes. And my wheelchair's rigid, so it comes apart. So it will fit into anybody's car.

RIEPE: So she can do that, too?

LEE MOORE: Yes.

RIEPE: OK. Thank you very much. Thank you for being here.

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LEE MOORE: Sure.

RIEPE: Thank you, Chairman.

FREDRICKSON: Any other questions? Seeing none, thank you for being here.

LEE MOORE: Thank you.

FREDRICKSON: Next proponent.

SYDNEY COCHRAN: Let me grab the chair back for you. Now I'll grab your green sheet. Thank you.

FREDRICKSON: Welcome.

MARC BUCKMINSTER: Is the microphone around here?

FREDRICKSON: Just to your right of it. There you go. Perfect.

MARC BUCKMINSTER: My name is Mark Buckminster. I'm from Wahoo, Nebraska. I'm going to the Commission of the BlindTraining Center right now.

FREDRICKSON: Excuse me. If you could just spell your name for us.

MARC BUCKMINSTER: M-a-r-c B-u-c-k-m-i-n-s-t-e-r.

FREDRICKSON: Thank you.

MARC BUCKMINSTER: And then Aug-- August 5, 2022, I was on vacation on my motorcycle, about the middle of South Dakota. And I-- it was severely hot that day and I think I had a heat stroke and went off the road. Ended up getting life-flighted to Sioux Falls, South Dakota. I was there for three days waiting for a room with Bergan Mercy Trauma Center in Omaha, to be a little closer to home. And I was in there for about five weeks and I don't remember any of it. I got-- when I came to, I was in Madonna Rehabilitation Hospital in Omaha. And I was laying there all of a sudden looking around-- I thought I was looking around, and it was dark. I thought, well, it must be nighttime. And then my wife and my daughter were there by me and they realized I was awake, and that's when I realized I was totally blind and I couldn't

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hear out of my left ear. But I was in-- ended up getting home about October 5, back to my house in Wahoo, which is a small town. And then I was there, my wife would work-- go to work and I was just sitting in my house. And it's like I say, I felt like I was in prison because there-- I could not do nothing about somebody help-- helping me, because there was nobody available. I did have a very close friend of mine that would come get me most afternoons and just get me out of the house, just to help my sanity. But then the -- a counselor from the Coalition of the Blind started calling on me, and they had a program once a month for training. And I said, well, I'd love to come there, but there's no way I can get there. And they says well-- they said, well, we'll come and get you and take you home. So that's how that started. That's how I got into the Coalition of the Blind. But I live in a small town and we get no transit, no Uber, no Lyft, and a situation like this would be life-changing for me. And I guess that's about all I got to say. Thank you.

FREDRICKSON: Thank you for your testimony. Any questions from the committee? Senator Riepe.

RIEPE: Thank you, Chairman. I'm, I'm going to ask a rather personal question. You were riding your bike and you said you had heat stroke?

MARC BUCKMINSTER: Yeah, we stopped in Winner, South Dakota, ate at a restaurant, and I don't think the air conditioning was keeping up or wasn't working at all. It was really hot in there, and we got going down the road and it was about 107 or 8 that day. And I think I had a heat stroke, because I don't-- I just-- my wife was-- and her friend was following me in a car. My buddy was ahead of me on his bike, and they said I just went across traffic and went off the road and I don't remember nothing of-- nothing, nothing about it.

RIEPE: May I ask, were you wearing a helmet at the time?

MARC BUCKMINSTER: No, because it was in South Dakota and it was not required.

RIEPE: OK. And what are you currently training for, or do you have a direction yet on that?

MARC BUCKMINSTER: What's that?

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RIEPE: Yeah, I think you said that you were-- they were coming to pick you up and you were going-- doing some training.

MARC BUCKMINSTER: Oh, I, I went down to the Coalition of the Blind once a month. But she had— when she came to my house, she informed me that they had a school that you had to go and live in these apartments in Lincoln and ride a bus. And that's what I'm doing right now. I've been there almost a month come February 6. But I probably wouldn't ever have got involved in that if they wouldn't have [INAUDIBLE]— wouldn't have come and hauled me down to Lincoln and took me back home. Having somebody like that in my world would be— I'm, I'm, I'm kind of a small town guy and I always have been. And I'm starting to wonder if I'm going to have to move to a bigger city to be independent for transit, because there's nothing available in Wahoo—

RIEPE: Sure.

MARC BUCKMINSTER: --which is Saunders County.

RIEPE: OK. Well, we appreciate you being here today. Thank you, Mr. Chairman.

FREDRICKSON: Thank you, Senator Riepe. Any other questions? And it was interesting, you— when you spoke about being from Wahoo, one thought that went through my mind was the possible benefit. I know we have this in Omaha currently. But to your point, without necessarily access to Uber, Lyft, et cetera, this seems like this could be a real, a real benefit in other parts of the state, where the infrastructure might not be there that we have in the urban environments. So, thank you for being here.

MARC BUCKMINSTER: Thank you.

FREDRICKSON: Seeing no more questions, thank you so much.

MARC BUCKMINSTER: OK, thanks.

FREDRICKSON: Next proponent.

FREDRICKSON: Good afternoon.

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NANCY FLEARL: Good aft-- good afternoon. My name's Nancy Flearl, N-a-n-c-y F-l-e-a-r-l. And I already submitted my comments online, but one of the people who had planned on testifying had to leave. Their SSP had to get back, and she asked that I read her testimony. And, and, you know, I'll go ahead and read it, and I want to address some comments that Senator Fredrickson mentioned about rural Nebraska, you know. So my name's Cheryl Poff, and I have been deaf-blind most of my entire life. I'm speaking from the heart today, not reading a testimony, as I really can't read print unless extremely large and it would not allow me to complete my testimony in a timely manner. I had an SSP type this up for me. I worked at the Commission for the Blind during my years-- for the Commission for the Blind, and during my years at NCBVI as a deaf-blind coordinator and older blind counselor, we started to develop the concept of starting a support service provider prior to my retirement. I saw the need firsthand for this program across the state. As I retired a number of years ago, we had not been able to make this valuable program a reality. I found that individuals were dependent on family, friends, and even neighbors, but it was always when-- it-- when they were available. The reality is, is that having family is nice, but they can't do everything for you. And you don't want them to, as you want to be able to do things for yourself. You want to be involved and active in your community, church, shop, and handle appointments. Family members have their own responsibilities and it's hard for them to live their lives and to assist you in those things that impact communication, hearing, and vision. They, they have work and lives of their own. But not everyone has a family to depend on. I have only my brother, and he is in assisted living. During my career, this is often the case with individuals. They live alone or have had no one. I say this as this program that I worked alongside others to conceptualize for us in Nebraska is one that I use myself. I can now visit my brother by using an SSP, go shopping, have lunch with friends, and go to doctor's appointments. I know it would have been helpful when I was employed and made my life easier and more efficient. Deaf-blindness is isolating, as people do not know sign language. They don't understand why I can't-- you can't see what they're trying to show you or hear what you're saying to them. The lack of effective public transportation across Nebraska also impacts that isolation. Living in Omaha, I live on a bus line. Even in a major city like Omaha, there are many parts of the city that do not have transit services. Someone

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that is deaf-blind would need to use paratransit, which is not effective and only goes where the bus route goes. Then think about being in rural areas, experiencing deaf-blindness. This program helps individuals to be independent in their homes and active members of their community. I hope that you will give every consideration to funding this program statewide. The other comment she made before she left, is she said for the first time-- she's had some really bad experiences to be able to go vote. And people have intimidated her by trying to have somebody read the ballot for her. And she said this year, for the first time, she was able to take an SSP in, vote, felt comfortable--

So we're at a red light.

NANCY FLEARL: --and strong, and she wanted you to see her "I voted today" sticker. So just to understand the impact.

FREDRICKSON: So we're at our red light. But if you have some final thoughts, please feel free to share.

NANCY FLEARL: But that's it.

FREDRICKSON: Oh. OK. All right.

NANCY FLEARL: That's it. I-- can I do-- I do want to-- Senator Riepe, I just wanted to share. There's a whole interagency committee that has worked on developing this program with the Commission for the Blind. And that is, you know, looking at all the state agencies, from intellectual disabilities to-- Outlook Nebraska has been a part of this committee, and the Commission for the Deaf and Hard of Hearing, Helen Keller National Center. So, you know, it's all about not duplicating services to be the most efficient, but meeting the needs and providing this valuable program.

RIEPE: That's great. Thank you.

FREDRICKSON: Thank you for being here. Please tell Cheryl we're happy she's able to vote. That's great.

NANCY FLEARL: OK. Thanks.

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FREDRICKSON: Thank you. Next proponent. Any other proponents for LB87? Seeing none, anyone here to testify as an opponent to LB87? Seeing none, anyone in the neutral capacity? Seeing none, Senator Dorn, you're welcome to close.

DORN: Really want to take this opportunity to thank the committee for having the hearing and listening to all of this. I want to thank Carlos and everybody else that was here to be part of this bill— in this bill introduction. I think you heard today how important that—this program is and, and that. And Senator Riepe, we do have some other ideas, too, that— we'll look for some funding for this, beyond the General Fund and stuff. So we will see what we can do. And, and I thank you for some of your comments, everybody, and taking attention to do this. So, so ask— if there's any more questions, I'll try to answer those. If not, thank you very much.

FREDRICKSON: Any questions from the committee? Seeing none, I'll just say, Senator [INAUDIBLE], I'm glad that you're on Appropriations. I, I think it would be great if we could find some way to make this happen. So, yeah. Thank you for being here.

DORN: Thank you.

DORN: That will close our hearing for LB-- I-- that will close our hearing for LB87.

FREDRICKSON: And we'll give a couple of minutes to transition here, before we get into LB160. In the interest of time, we'll maybe get started.

RIEPE: Not a problem.

FREDRICKSON: All right. We're going to go ahead and get started on LB160. Senator Riepe, you are recognized to open.

RIEPE: Thank you, acting Chairman Fredrickson. You're getting a lot of experience as a chairman. Again, I appreciate the opportunity to speak with all of you today regarding LB160. For the record, my name is Merv Riepe, and it's M-e-r-v R-i-e-p-e, and I represent District 12, which includes southwest Omaha and this small town of Ralston. LB160 proposes to-- a modification to the requirements for applicants taking the barber examination. Under current law, a graduate from a school of

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barbering who fails the exam may take it again at the next available opportunity without any additional coursework. However, if the application -- applicant fails a second time, they must complete 500 additional hours of study before being permitted to take the exam a third time. This bill maintains that structure, but introduces a provision allowing applicants to test out of the required additional coursework after completing 250 hours, with approval of the Board of Barber Examiners. If the applicant successfully passes this evaluation, they would not be required to complete the remaining 250 hours before retaking the exam. However, if the applicant does not pass the evaluation, they must fulfill the full 500-hour requirement before attempting the examination again. The intent behind 160-- LB160 is to provide a more efficient pathway for barbering students who demonstrate competency before completing the entire remedial coursework required. By allowing an early testing opportunity, this legislation reduces unnecessary barriers to licensure while maintaining the integrity of the barbering profession. LB160 ensures that barbering students who have the skills and knowledge necessary to pass the exam can do so without incurring additional time and financial burdens. At the same time, it upholds the high standards of Nebraska's barbering industry by requiring those who need additional instruction to complete it before retesting. And I think it's important to note that there is no fiscal note. I think that's particularly important this legislative session. I thank you for your time and your consideration. And I will answer the questions that I can, but we have some very talented barbers behind me, or people that are more knowledgeable. And they will be able to maybe drill down and get to what you-- your real-- if you have deep concerns, they will be able to address those.

FREDRICKSON: Thank you, Senator Riepe. Any questions from the committee? Seeing none, I have one. Well, first of all, I know I'm not going to let you get off that easy. I appreciate your fiscal hawkness on this. My, my question for you is— so I, I think— I, I can certainly appreciate the opportunity to take the exam sooner than the 500 hours. How does that compare to what other states do in similar circumstances?

RIEPE: I don't know how that compares to other states, but I'm sure the talent that will come behind me will know.

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FREDRICKSON: Perfect. Look forward to it.

RIEPE: Did I dodge that question?

FREDRICKSON: Sounds good.

RIEPE: OK. Thank you, Senator.

FREDRICKSON: Thank you, Senator Riepe. Seeing no other questions, will you stick around to close?

RIEPE: Oh, absolutely.

FREDRICKSON: All right. Wouldn't miss it.

RIEPE: Thank you.

FREDRICKSON: All right. We will now listen to proponents for LB160. Good afternoon.

KEN ALLEN: Good afternoon, Vice Chair Fredrickson and members of the committee. My name is Ken Allen, K-e-n A-l-l-e-n. I am the director of the Nebraska Board of Barber Examiners. I want you to think about this: When you hear the term barber, what's the first thing that comes to your mind? I'm, I'm not asking you a question. Just-- I want you to think about it. What is the first thing that you think of when you hear the term barber? Most people, it is somebody that does men's haircuts. Right? OK. That being said, a Nebraska-licensed barber is trained to do more than just cutting men's hair. To earn a barber license in Nebraska, you must have the training of scalp and facial massage, chemical services, including permanent waves, hair coloring and hair relaxing, braiding, shaving, and most importantly, sanitation. Barbers must know chemistry, electricity, circulatory, skeletal, and muscular structures. LB160 is amendment to Nebraska Ri--Revised Statute 71-216.01. This amendment-- or this, this-- yeah, this amendment will allow persons who have failed the barber examination the second time to become eligible to test out of the schooling after completing 250, or half, of the original 500 hours required now. So partially-- this, this bill, number-- or I'm sorry, this statute, 71-216.01, was last revised in 1983, so obviously, it needed some updating. And it's been a silent bill, OK? It's been a silent statute, until recently. Now what we're finding out is COVID was not good for

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learners, especially when they had to do distance learning, OK, via, via Zoom and other sources. We're finding that out. And these students now were probably in junior high and high school. We're seeing the effects of the downplay of COVID, how it didn't help learners. So that's the problem-- one of the problems we're seeing with students today. Another part of the problem is partially due to the rising number of examinees applying for license from other states and countries. It is difficult to determine the amount of education a person has when they apply for a barber license. Many times, the only method to determine the amount of training is through examination. OK. It's been our experience from the board that persons coming from other countries have little barber training, which directly impacts public safety if left unchecked. Therefore, the requirement for additional school training, it benefits those people. All of the applicants who have taken the additional training after failing the first two examinations have passed the next examination on the first try. OK. That's important to note. So what we're finding out, too, here recently, a lot of the students are not taking barbering seriously. They'll come to my office and do an exit interview, and the first thing they say is I should have studied harder. OK. So that being said, this test-out program allows those people to buckle up, keep their attendance up, keep their GPA up. This bill was partially drafted by barber instructors who will follow me. It's got the approval of the board in October of 2024. And I'll answer any questions if you have more.

HARDIN: Thank you.

KEN ALLEN: You're welcome.

HARDIN: Questions? Senator Meyer.

MEYER: Thank you, Mr. Chair. How many hours initially— if, if they fail init— the initial tests, they have to do 500 hours. What— how many hours in their original barber training are they doing?

KEN ALLEN: Currently, by statute, which was changed a few years ago, it's 1,800 hours.

MEYER: 1,800 hours?

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KEN ALLEN: Correct.

MEYER: Thank you.

HARDIN: Other questions? Senator Quick.

QUICK: Thank you, Chairman. So that 1,800 is—— I mean, they have to do that——

KEN ALLEN: Regardless.

QUICK: --to, to even apply to take the test, right--

KEN ALLEN: Correct.

QUICK: --or to graduate? So they do have to graduate from barber school, then or?

KEN ALLEN: Correct.

QUICK: OK.

KEN ALLEN: We must see a barber diploma.

QUICK: OK.

KEN ALLEN: Yes.

QUICK: All right. Thank you.

HARDIN: Senator Fredrickson.

FREDRICKSON: Thank you, Chair. A similar question I had for Senator Riepe. How, how does that compare to other states with a--

KEN ALLEN: Valid question. I don't track that, just via other vehicles that I've used. Not a lot of people have this particular bill. Not sure why. This bill has been around since 1983. I don't question it. It's worked. We've never used it for the last 40 years or 35 years. And bang, here it is.

FREDRICKSON: OK. Thank you.

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HARDIN: Senator Ballard.

BALLARD: Thank you, Chair. Thank you for being here.

KEN ALLEN: Yes.

BALLARD: What's included on the test? What, what are you testing? Is it—like, I'm thinking a test like multiple choice? That's not what you're test—not, not what you're testing.

KEN ALLEN: It is a multiple-- the written test is a multiple choice exam. And it covers all the things mentioned in the first part of my testimony, what--could-- massages, it includes diseases, it includes circulatory, it includes skeletal, it's-- it includes all the things I mentioned earlier. So it's not just cutting hair, OK? And it's not just shaving. So it's-- the test is pretty-- I mean, I can't say it's strenuous because we have people getting very good scores. Then we have people-- not so well.

BALLARD: OK. Is there only a-- is it only a written or is there a--

KEN ALLEN: Another valid question. There is a two-part. It is a written exam. And we're-- to help this situation, we're allowing students to take the written exam prior to the practical. We know they know how to do the practical. It's the written exam that we're seeing the downplay of grades.

BALLARD: And do you have a fail-- did you know the fail rate? Is there a--

KEN ALLEN: It used to be zero prior to 2020. This last year, there was 10 double fails out of 70-- 74, 75 examinees. So it's higher than it should be, yes.

BALLARD: Should be? OK. Thank you.

KEN ALLEN: Thank you.

HARDIN: Senator Meyer.

MEYER: Thank you, Mr. Chair. Appreciate you coming in today. We had heard testimony on a previous bill somewhat similar, dealing with some

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of the similar subjects. How does 1,800 hours in Nebraska compare to out of state? Is that comparable to the cosmetology testimony we heard, in comp-- comparison with surrounding states.

KEN ALLEN: Correct. In all fairness, a barber license in Nebraska has more value than a barber license in Colorado. And, and, and as mentioned before in the earlier testimony, our license allows them to do permanent waving, hair coloring, those kind of things, where you can get a restrictive barber license in Florida for 1,000 hours. And that's restricted, meaning no chemicals, no services like that. So our—ours has many folds to it because we want a person going out to Scottsbluff and Gering to be able to do all facets of barbering. We want that toolbox to be full of tools, so that they can do the grandmothers, the mothers, the fathers, the grandkids, everybody. We don't want just haircuts.

MEYER: Thank you.

KEN ALLEN: Let me answer that question, though. 1,800 hours, probably 1,500, I think was mentioned earlier. That's pretty much the norm. I mean, are there less? Yes. There's a few more. But, yeah. Let me-- did that answer your question better?

MEYER: Yes.

KEN ALLEN: Thank you.

MEYER: Just, just curious how it compared, as far as what the requirements were. And just, just to elaborate a little bit, I, I get my hair cut by a lady that can fix hair, but she's also considered a barber. I don't think she was trained in Nebraska. And she has staff in her office that are simply barbers. And so I, I didn't know if, if being trained to also do hair in, I would assume, cosmetology and barbering, if there was some different qualifications or additional training or something that—

KEN ALLEN: I don't know about additional. What barbers can do that cosmetologists are not trained in is shaving-- facial, facial. Let me be explicit-- facial-- shaving. So to your point, it depends on which city you're in, because I probably-- I would know all--

MEYER: I think she may have taken her training in Iowa.

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KEN ALLEN: OK.

MEYER: And I know her very, very well, but I don't--

KEN ALLEN: But are you in Pender? Is it Pender?

MEYER: Pardon?

KEN ALLEN: Is it--

MEYER: In, in Pender. Yes.

KEN ALLEN: Yeah, Yeah. We've got, actually, three barbers in Pender.

MEYER: Yeah. Yeah. And a, and a-- yeah. She does a good job. I'm due for one now, and--

KEN ALLEN: There you go.

MEYER: It's almost impossible for us, us to be on the same schedule.

HARDIN: We think you look amazing.

KEN ALLEN: He does.

MEYER: I, I appreciate that very much. And yeah. Let's, let's go with that.

HARDIN: Any other questions? Seeing none, thank you.

KEN ALLEN: I appreciate you. Thank you.

HARDIN: Other proponents, LB160. Welcome.

LINDSEY YATES: Hi. Hello, Committee. My name is Lindsey Yates, L-i-n-d-s-e-y Y-a-t-e-s. I'm a licensed cosmetologist, licensed barber, and licensed barber instructor in the state of Nebraska. I got-- received all my formal training at College of Hair Design, and have been employed at College of Hair Design a couple of times over the course of years. I lived in a different state for a period of time, but for a decade. And one thing that I can truly say about College of Hair Design is the standard of education has always been high. The expectations of our students has been high. We provide

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practical preparation testing for their practical final to graduate the school, and they do do a school final. However, over the course of even 10 years within training, I've seen a different standard of education in students. A lot of it has to do with the introduction of technology in the classrooms. Brain-- brains are formulated a little bit differently, especially from the younger ages. During COVID, definitely, there were some pushthroughs, and some of the students that we have had not pass our written examination or the state written examination have said that they didn't probably take it as serious as they could have. And, and there was also a change from a written to a standardized test, so again, some changes that have been made. Offering 250 hours does not eliminate the importance of the education. It actually reinforces it, by giving them the opportunity to take ownership in their education in ways that they did not prior to. And the success rate that we've had has proven to be substantial. The people who have taken the test that -- they went through the 500 as it was written in, in compliance with Nebraska state law. They've passed it and become licensed barbers, and are now doing successful. So the goal is not to eliminate or to discourage, but to actually encourage students in their educational process. I don't know if you have any questions.

HARDIN: Senator Quick.

QUICK: Thank you, Chairman. So, like-- so you have a license in both then. Right?

LINDSEY YATES: Correct.

QUICK: And what's-- did-- I'm going to guess some of the classes crossover. So did you have to do extra hours to get one or the--

LINDSEY YATES: Correct. So I became a cosmetologist first and then moved into barbering. I had to do what we call the dual-licensing program, which is something that we offer at the school. You get your cosmetology license first, and then you do additional hours to obtain your barber license. That's what I did.

QUICK: How many hour-- extra hours?

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LINDSEY YATES: I went under when we were at 2,100 hours. So I did 2,100 hours of cosmetology and did 1,100 hours of barbering. Now, as the law is, it is 1,800 hours and then 826 hours of continuing education.

QUICK: OK. Yeah. Thank you.

HARDIN: Other questions? Seeing none, thank you. Next proponent, LB160. Welcome.

PIA McWILLIAMS: Hello. All right. Thank you, Chairperson Hardin and committee. My name is Pia McWilliams, P-i-a M-c-W-i-l-l-i-a-m-s. I have been teaching barber theory and practical at College of Hair Design for going on 10 years. I am here supporting LB160. The 500-hour course we are-- already offer in compliance with the law has such a high standard within. We are equipped with the students to be able to test out at 250 hours. The attendance percentage for this course that we teach is 93% and the GPA that we require is 90% or higher. This holds the students accountable and allows them to be able to test out at the 250-hour mark. If failure of the state test does happen, they are required to complete the remaining 500 hours before testing again. This is our passion and we want to make sure that we are providing the best education to our current and returning students. Do you have any questions for me?

HARDIN: Senator Fredrickson.

FREDRICKSON: Thank you, Chairman. Thank you for being here, and for your testimony. So I just want to make sure I understood you correctly. So you had mentioned in the course, within that 250 hours, you meet all the requirements set out by the state. They are—those are all covered in that first 250 hours. Is that correct?

PIA McWILLIAMS: We do.

FREDRICKSON: We do. Great. Thank you.

HARDIN: Other questions? Seeing none, thank you. The next proponent, LB160. Hi there.

DANIEL MACKE: Hello. OK. Thank you, esteemed members of this committee for listening to my testimony. My name is Daniel Macke, D-a-n-i-e-l

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M-a-c-k-e. I am here as an instructor at the College of Hair Design, currently executing the curriculum for this 500-hour course. We-- I have three barber students currently involved in this course at the time-- at this time. And I have found that they are very eager, focused, and committed to completing this course. Though they are slightly inconvenienced to attend these extra hours, they are grateful they have out-- they are grateful they have a chance to prepare for an additional testing opportunity. And to finalize my testimony today, to say that the students currently participating in the 500-hour class are dedicated, enthusiastic, and willing to execute this program to become respected barbers throughout the great state of Nebraska.

HARDIN: Thank you. Any questions? Seeing none, thank you.

DANIEL MACKE: OK. Thank you.

HARDIN: The next proponent, LB160. Any more proponents? How about opponents, LB160? Anyone in the neutral for LB160? Hi.

STEPHANIE MOSS: Hello, again. I'm ready. My name is Stephanie Moss, S-t-e-p-h-a-n-i-e M-o-s-s. Again, I'm a licensed cosmetologist, cosmetology instructor, and owner of a salon in Omaha, and then have two schools. The Omaha campus for Xenon Academy does have a barber program. Our Grand Island campus currently does not. I am appreciative that we are looking to make adjustments to some of these. So, Senator Riepe, thank you. I do appreciate you bringing this some light. And for the people that spoke before, I know you guys are for this as well. So I, I have a neutral on there and I'll explain kind of why. So I think I am, I am for this current bill, if we're not available to change any language or make any adjustments to it. Is it better than how it was? Absolutely. Will probably be more beneficial to some of our students. Absolutely, it would. But I think there needs to be a bigger conversation. I think-- I will be honest. My academies were not brought into this conversation. We weren't asked kind of our opinions on it, as well, before this was addressed. So I'm going to just do that now. I don't believe that restricting barber students to only be able to sit for the exam twice is honestly in their best interest. As a school owner, I've watched multiple talented and qualified barbers not fully receive their licensure in the state because they're nervous not to pass that exam in two attempts. This would then require to attend and pay up to an additional five [SIC] hours in fees for

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schooling. Again, not because we're not qualified, but more so that they're not a strong test taker. And that was kind of discussed in some of the reviews earlier. This is causing an issue that the students are graduating and not going on to fully get licensed. Either they are doing nothing with their education or they're actually working illegally without a license. And I can tell you right now, both of those things are happening. Cost is another big issue that I have for these students to have to come back to school for potentially another 500 hours. This could potentially cost that student up to 6,000 hours [SIC]. As a business owner, that sounds lovely, right? But that's not in the best interest of these students. Most of our students rely on Title IV funds, NOG, Pell assistance to attend, attend school, and this would most likely have to be a cash-pay program. As an accredited school that I've-- offers Title IV funding, there are many reporting requirements that we must meet, such as licensure and placement. With the tight restriction from the Barber Board, this has the potential to jeopardize funding for future students. For a cosmetologist that also has 1,800 hours to complete, there's absolutely no restrictions on how many attempts that can be made to pass this exam. It has worked for the Cosmetology Board and for our field for many years, so I don't see why our barbers should really have to be treated any differently. Thank you for your time. If you have any questions--

HARDIN: Thank you. Any questions? Senator Quick.

QUICK: Thank you, Chairman. So for a barber who would be-- or someone who's practicing outside the license, is that like someone doing it from their home, or how did it-- because you, you probably have to have that license posted in your--

STEPHANIE MOSS: They need to have it posted. And I know our Barber Board does work-- and we work with the board, as well. If we hear someone, we do report them, unfortunately. But yes, through either working from home or they are working in shops and they are not licensed.

QUICK: Sorry, can I ask another question?

HARDIN: Certainly.

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QUICK: So like with that then, if they're working in a shop under someone else, I mean, they, they would have to present their license, right, to work there?

STEPHANIE MOSS: You would think.

QUICK: OK.

STEPHANIE MOSS: But it's not happening.

QUICK: It's not hap-- OK. All right. All right.

STEPHANIE MOSS: Yeah.

QUICK: Thank you.

STEPHANIE MOSS: Yeah.

HARDIN: Other questions? Seeing none, thank you.

STEPHANIE MOSS: Thank you.

HARDIN: Anyone else in the neutral capacity for LB160? Welcome back.

LINDA POCHOP: Hi, there. Get my glasses back on. My name is Linda Pochop, L-i-n-d-a P-o-c-h-o-p, and I'm the director of education at the Xenon Academy in Omaha. And we currently have 21 barber students enrolled in our barber program. And while I appreciate the possibility of reducing the number of hours a graduate of the program would have to complete if they have failed the testing two times, I feel there is a need for more research into the statute, and is-- to see if it is necessary, if it could be further addressed in the best interest of the students. Again, as an educator for over 30 years, I have seen the struggle-- the students who are simply not great at taking tests. And we, again, have seen more students with ADHD, test anxiety, and other things that are hindering their ability to take tests and pass them. I would agree that since COVID, the-- I would say the overall reading capacity, basic language skills, those things have diminished greatly in what we see these students coming out at. I'd say we probably have several people that come into our program and we're maybe not getting the most scholary-- scholarly people that are, you know, coming into this type of industry. But some of them are maybe at a eighth-grade

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reading level and they've graduated high school. And I think, like, in the testing, because our terminology and those things are so, you know-- some of the vocabulary words that we have are, you know, 26 letters long. And so for them, even the understanding of the questions on the exams I think is difficult for some of the students that we have come across. And this is something that I would agree in the last 10 years, it has definitely -- that capacity has changed. Right now, with the 500 hours, going full time for those students at 35 hours a week, which is what full time is, that's an additional four months of training. And in the 1,800-hour program, it is 28% of the program that they are being asked to repeat. And again, because Title IV funding is something that most of our students are using to go to school-- and this is something that once a student has been given their credentials or their diploma, they are no longer eligible to use Title IV funding to pay for this because they have already received the diploma or credential in that, so it is not even an availability for someone. So for a student to come up with, we figured it's approximately \$6,000 at our hourly rate for 500 hours, you know, for somebody to have to come up with that money out of pocket is-- how long is it going to take them to, you know, necessarily save that up when these are-- they're not able to work in this industry at that point in time because we're, you know, sitting there. So I did do some research about comparison from state to state for licensure. Again, for most of the similar fields like cosmetology, there is no stipulation on how many times somebody can take the exam. For the ones that did, the minimums were 3 or 4 attempts, and that goes through bar exam for lawyers, medical exams for, you know, doctors. They're getting a minimum of like four attempts to take and pass their test. So I'm wondering, like, in our looking at this, if there wouldn't be a possibility to give them an additional time or two to take the test before they would have to go back to school.

HARDIN: OK.

LINDA POCHOP: That would be, you know, in conversations that maybe during this time we could have an-- a little bit of a change there, to make us that way.

HARDIN: OK. Well, question? Senator Meyer.

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MEYER: Thank you, Mr. Chair. This is probably less of a question than an observation on my part. I find it appalling that we have people graduating from high school and can't read in order to move on with their life and, and get a profession. Yeah, so maybe we should hold a joint Health and Human Services and Education Committee hearing, quite frankly.

LINDA POCHOP: It's--

MEYER: And-- once again, no question.

LINDA POCHOP: Yeah.

MEYER: But it's, it's a sad indictment--

LINDA POCHOP: It is.

MEYER: --on, on our educational system, especially in the state of Nebraska.

LINDA POCHOP: It is incredible to have and to witness an adult struggle with what should be basic reading skills, having them, you know-- their skill, I tell you, some of these people are so talented. They would give you the best haircut you've ever had in your life. They have thousands of people that follow them on social media in their postings because of the incredible work that they do. But when it comes time to sit down and read a test and do that -- we have -- I have a student right now who's in our program who is 27 years old that was never diagnosed with being dyslexic. But I know he's dyslexic, so he's not going to be able to get an accommodation because he has no formal IEP that says he was dyslexic. And as an adult, it's almost impossible to get that. So to be able to give this person an opportunity, do I worry that in two times this person is not going to be able to pass a test? We have students with IEPs that we have to read their tests to them. This is, you know, it is a big issue in our state when you have to understand that on a daily basis, I'm reading an adult a test because their IEP requires it, because they can't-they, they don't have the ability of their own. So I think we need to maybe make some other accommodations in this time while we're addressing this, and that's really what we're kind of asking for.

MEYER: Thank you.

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LINDA POCHOP: OK. Any other questions?

HARDIN: Seeing none--

LINDA POCHOP: Thank you.

HARDIN: Thank you. Anyone else in the neutral capacity for LB160? Seeing none of those, Senator Riepe, would you come back? Online, we have one proponent, zero opponents, zero in the neutral.

RIEPE: Thank you, Mr. Chairman. And I would like to thank everyone that's testified today and spent the time on a Friday afternoon with us. I would also echo what has been said that I find that many of the young people that I have worked with have a failure to be able to either interpret or write cursive, and that is a problem as well. And it's simply because of, I think, screen time as opposed to read and write time. And so that is a challenge. I also wanted to point out that, that the training and testing for barbers and cosmetologists, as well, becomes important critically. And coming from the medical field is oftentimes these individuals are the ones that will identify abnormalities that probably maybe overexposure to the skin and, and things that they can then refer you to the physician. So it's important that they be extremely well-trained and observant of what is going on with their, quote unquote, clientele. With that, I will also-- I think there was some valid questions raised here with the-in the neutral. And, and I will want to follow up with our people to find out before we would exec on this, to try to get some clarification on how that all fits or doesn't fit, to give us an opportunity as a committee when we get to exec that we will have some-- be able to make a, a good call. With that, I will be quiet and try to anticipate any calls-- or any questions.

HARDIN: Any other questions? Seeing none, thank you.

RIEPE: Thank you.

HARDIN: This concludes--

RIEPE: Thank you all very much.

 ${f HARDIN:}$ --the LB160 testimonies for the day. Thank you so much. We are going to go into exec at this time.

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