

AMENDMENTS TO LB 519

1 1. Strike the original sections and insert the following
2 new sections:

3 "Section 1. Sections 1 to 8 of this act shall be known
4 and may be cited as the Community-Based Neurobehavioral Action Plan
5 Act.

6 Sec. 2. It is the intent of the Legislature that the
7 planning and implementation of community-based neurobehavioral
8 rehabilitation programs which provide behavior management services,
9 associated neurobehavioral services, independent living services,
10 caregiver support services, activity and vocational services, and
11 psychosocial rehabilitation services for individuals with
12 disabilities whose primary disability results from brain or head
13 injuries, regardless of age, is necessary to promote the health and
14 welfare of such individuals and their families.

15 Sec. 3. For purposes of the Community-Based
16 Neurobehavioral Action Plan Act:

17 (1) Activity and vocational services means services which
18 are intended to provide routine structure and activity in a
19 vocational setting to enhance the adaptive behavioral capability of
20 individuals with disabilities whose primary disability results from
21 brain or head injuries and who as a consequence of the disabilities
22 are unable to pursue competitive employment. Activity and
23 vocational services shall include such services provided and
24 coordinated through appropriately structured adult day care, work

1 activity, vocational training, and sheltered employment settings
2 with an intended goal of enhancing the individual's long-term
3 potential for vocational activity;

4 (2) Associated neurobehavioral services means any service
5 necessary or essential to enhance the adaptive capability of a
6 person with a history of brain or head injuries. Examples of such
7 services include but are not limited to behavior management, visual
8 rehabilitation, occupational therapy, epilepsy treatment and
9 control, and use of assistive technology devices;

10 (3) Behavior management services means behavioral
11 manipulation or modification of the behavior of individuals with
12 disabilities whose primary disability results from brain or head
13 injuries which (a) enhances behavioral capabilities to acquire or
14 demonstrate psychosocial adaptive behavior, (b) teaches such
15 individuals to learn or acquire new skills or information, (c)
16 provides systematic observation and supervision to sustain the
17 safety, health, or well-being of such individuals, and (d) enhances
18 other sensory, cognitive, or behavioral capabilities which enable
19 such individuals to compensate for their functional limitations.
20 Behavior management services may be provided individually or to
21 groups. Assistive technology devices may be used;

22 (4) Community-based neurobehavioral rehabilitation means
23 the provision of behavior management and associated neurobehavioral
24 services to provide independent living services, activity and
25 vocational services, and psychosocial rehabilitation services in
26 community-based settings to individuals with disabilities whose
27 primary disability results from brain or head injuries;

1 (5) Department means the State Department of Education;

2 (6) Independent living services means the behavioral
3 manipulation or modification of the environment and includes the
4 use of assistive technology devices and assistive technology
5 services to enhance the independent living capability of
6 individuals with disabilities whose primary disability results from
7 brain or head injuries;

8 (7) Individuals with disabilities whose primary
9 disability results from brain or head injuries means individuals:

10 (a) Who have acquired brain or head injuries resulting
11 directly or indirectly from closed or penetrating brain or head
12 trauma, infection, febrile condition, anoxia, vascular lesion,
13 toxin, metabolic condition, or spinal cord injury and whose brain
14 or head injuries are not primarily related to congenital or
15 degenerative conditions, chemical dependency, or aging processes;
16 and

17 (b) Who have permanent or temporary impairment of mental,
18 cognitive, behavioral, or physical functioning which directly or
19 indirectly results in impairment in attention, cognition, language
20 function, memory, conduct, behavior, motor function, or any other
21 neuropsychological or cognitive behavioral function that did not
22 occur as a result of perinatal factors or developmental anomaly;

23 (8) Neurobehavioral rehabilitation case counselors means
24 credentialed individuals who have no less than a master's degree in
25 vocational rehabilitation counseling, counseling psychology, school
26 psychology, or guidance and counseling, who are responsible for
27 developing and implementing planned, systematic behavior management

1 services for individuals with disabilities whose primary disability
2 results from brain or head injuries, and who have received
3 additional specialized training for such responsibilities; and

4 (9) Psychosocial rehabilitation services means the
5 community-based psychosocial rehabilitation services intended (a)
6 to reduce the likelihood that individuals with disabilities whose
7 primary disability results from brain or head injuries will develop
8 aberrant or otherwise undesirable behavioral adaptations, (b) to
9 reduce inactivity, and (c) to provide age-appropriate psychosocial
10 interactions and activities.

11 Sec. 4. The Community-Based Neurobehavioral
12 Rehabilitation Advisory Board is created to provide, in an advisory
13 capacity, advice and recommendations to the State Department of
14 Education in applying for federal grants, the completion of a
15 statewide needs and resource assessment, and the development of a
16 statewide action plan and reports as required by the
17 Community-Based Neurobehavioral Action Plan Act. In developing
18 recommendations, the board shall consult with federal, state, and
19 local governmental agencies, with citizen groups, and with other
20 private entities. The board shall be composed of at least nine and
21 not more than fifteen members including:

22 (1) The Administrator of the Special Populations Office
23 of the State Department of Education or his or her designee;

24 (2) The director of the Division of Rehabilitation or his
25 or her designee;

26 (3) The Administrator of the Department of Health and
27 Human Services, maternal and child health, children with special

1 health care needs program;

2 (4) Representatives of public and nonprofit private
3 health-related organizations;

4 (5) Representatives of other disability advisory or
5 planning groups in the state;

6 (6) Members of an organization or foundation representing
7 traumatic brain injury survivors in the state;

8 (7) Representatives of injury control programs at the
9 state or local level if such programs exist; and

10 (8) A substantial number of individuals who are survivors
11 of traumatic brain injury or the family members of such
12 individuals.

13 The members of the board shall be appointed by the
14 Commissioner of Education within sixty days after the effective
15 date of this act. Any vacancy occurring on the board shall be
16 filled from the same category and in the same manner as the
17 original appointment was made.

18 Members of the board shall be reimbursed for their actual
19 and necessary expenses pursuant to sections 81-1174 to 81-1177 from
20 the funds appropriated under section 7 of this act. The board
21 shall select a chairperson and such other officers as it deems
22 necessary to perform its functions and shall establish rules and
23 regulations to govern its procedures.

24 Sec. 5. The statewide needs and resource assessment
25 shall include, but not be limited to, an assessment of the full
26 spectrum of care and services from initial acute treatment through
27 community reintegration for individuals of all ages having

1 traumatic brain injury. The statewide action plan shall include,
2 but not be limited to, the development of a comprehensive,
3 community-based system of care that encompasses physical,
4 psychological, educational, vocational, and social aspects of
5 traumatic brain injury services and addresses the needs of the
6 individual having traumatic brain injury as well as family members.
7 A report of the statewide needs and resources assessment and the
8 statewide action plan shall be made to the Legislature, the State
9 Department of Education, and the Department of Health and Human
10 Services by December 31, 1999.

11 Sec. 6. To carry out section 5 of this act, the
12 department shall have the power and authority to enter into
13 contract for the completion of the needs and resource assessment,
14 the development of the statewide action plan, and technical and
15 administrative assistance necessary to ensure the completion of
16 both. The department shall take into consideration the
17 recommendation of the advisory board prior to entering into
18 contract under this section. The total amount of funds expended
19 shall be limited to the total amount of federal grant and state
20 matching funds received under the Community-Based Neurobehavioral
21 Action Plan Act.

22 Sec. 7. It is the intent of the Legislature to make a
23 one-time appropriation of \$37,500 of general funds in FY1999-00 for
24 the completion of the statewide needs and resource assessment,
25 development of the statewide action plan, and technical and
26 administrative support for the completion of both, to be treated as
27 state funds for the purpose of applying for and accepting federal

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1 grant funds made available on a two-to-one, federal-to-state,
2 matching basis.

3 Sec. 8. The Community-Based Neurobehavioral Action Plan
4 Act terminates on July 31, 2000.

5 Sec. 9. Since an emergency exists, this act takes effect
6 when passed and approved according to law."