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FOLEY: (Recorder malfunction) --sixty-seventh day of the One Hundred Sixth Legislature, First Session. Senators, please record your presence. Roll call. Mr. Clerk, please record.

CLERK: I have a quorum present, Mr. President.

FOLEY: Thank you, Mr. Clerk. Are there any corrections for the Journal?

CLERK: I have no corrections.

FOLEY: Thank you, sir. Are there any messages, reports, or announcements?

CLERK: Mr. President, bills read on Final Reading last Friday were presented to the Governor on Friday at 12:15 p.m. (re LB23E, LB31E, LB31AE, LB180, LB222, and LB252.) Study Resolution: Senator Slama, LR95 and LR96. Those will be referred to the Executive Board. That's all that I have, Mr. President.

FOLEY: Thank you, Mr. Clerk. Speaker Scheer, you're recognized.

SCHEER: Thank you, Mr. President. Colleagues, I neglected on Friday to let you know that this week did have a schedule for late nights. We will not be utilizing any this week for late nights, so enjoy that. As well as we're looking forward, in talking with Senator Stinner and he is here, he can follow me if he'd wish, but we believe the budget will be out in printed form hopefully on Thursday. If that is the case, the Appropriations will be scheduling a briefing on next Tuesday morning. We'll start at 10:00 to allow them to have their briefing at 8:30 or 9:00, whatever they choose to utilize as far as time. And we'll let you have all day Tuesday then to disseminate the information, and Wednesday of next week will be a budget-- will be the mainline budget and I will schedule that for the portion of the day. So that will be our day's work on next Wednesday. So we very well may go a little later into the evening, past dinnertime, depending upon how many questions and discussions come up. You can bank on next Wednesday being discussion on

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the budget. It very well could last some time into the evening. So just a little heads-up on what we're looking at and as far as this week as far as nights. Thank you, Mr. President.

FOLEY: Thank you, Mr. Speaker. Members, you'll note on the agenda, the first bills are Final Reading bills. I'll need all of you to please be at your desk for Final Reading. Members, we are on Final Reading. Please proceed to your desks. Now commence Final Reading. The first bill is LB304. Mr. Clerk.

CLERK: Mr. President, I have a motion from Senator Chambers. Senator, he filed this motion last Friday, it's a return the bill for to strike the enacting.

FOLEY: Senator Chambers.

CLERK: Senator Chambers, I believe wishes to withdraw. Is that right, Senator?

CHAMBERS: Yes, withdraw.

FOLEY: The motion is withdrawn. Thank you, Senator Chambers. Mr. Clerk.

CLERK: (Read LB304 on Final Reading.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB304 pass? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 40 ayes, 0 nays, 2 present and not voting, 7 excused and not voting, Mr. President.

FOLEY: LB304 passes. Our next bill is LB428. Mr. Clerk.

CLERK: (Read LB428 on Final Reading.)

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FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB428 pass? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 42 ayes, 0 nays, 7 excused and not voting, Mr. President.

FOLEY: LB428 passes. Members, the treats being distributed on the floor are in celebration of the birthday of Senator John McCollister. Happy birthday, Senator McCollister. Our next bill, LB445. Mr. Clerk.

CLERK: (Read LB445 on Final Reading.)

FOLEY: All provision of law relative to procedure having been complied with, the question is, shall LB445 pass? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 42 ayes, 0 nays, 7 excused and not voting, Mr. President.

FOLEY: LB445 passes. (Doctor of the day and visitors introduced.) Our next bill is LB556E. Mr. Clerk, the first vote is to dispense with the at-large reading. Those in favor of dispensing with the reading vote aye; those opposed vote nay. Record, please.

CLERK: 33 ayes, 4 nays to dispense with the at-large reading.

FOLEY: The at-large reading is dispensed with. Mr. Clerk, please read the title.

CLERK: (Read title of LB556.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB556E pass with the emergency clause attached? Those in favor vote aye; those opposed vote nay. Record, please.

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CLERK: (Record vote read.) 44 ayes, 0 nays, 5 excused and not voting.

FOLEY: LB556E passes with the emergency clause attached. Our next bill is LB556AE. Mr. Clerk.

CLERK: Mr. President, Senator Hunt would move to return the bill for purposes of striking the enacting clause.

FOLEY: Senator Hunt, you're recognized to open on your motion.

HUNT: Thank you, Mr. Lieutenant Governor, and to my friend, Senator Howard, I don't intend to return your bill to Select. I just wanted to take a little time here and I will be withdrawing this motion. Last night, Senator McCollister and his wife, Deb, very kindly invited me and several others senators to join them at Abraham's Tent, which is a celebration of the Tri-Faith Initiative, which is a campus in Omaha with a Muslim mosque, a Christian church, and a Jewish temple, all on the same campus together and that's made up of congregations of these three Abrahamic faith and they're all committed to practicing respect and acceptance and trust with each other. This is the first undertaking of its kind in the country and I believe in the world. And I just had a really great time last night with Senator Lathrop and Senator DeBoer, Senator Cavanaugh, Senator Pansing Brooks, and many of our friends in celebrating the mission of acceptance and respect with these people of all different faiths. I was so dismayed and not surprised, but very dismayed by the news of another heartbreaking synagogue shooting on Saturday, especially on the last day of Passover. My colleagues know I have not made a secret of the fact that I'm not a person of faith but, of course, I believe in the right to worship in peace and safety and that that right belongs to everybody and that right was disturbed again this weekend. Our Muslim brothers and sisters were attacked in New Zealand at a mosque during Friday prayer. Our Catholic brothers and sisters were attacked in Sri Lanka at Easter mass. Our Jewish brothers and sisters were attacked in San Diego at a synagogue on Passover. So this continues to be a problem. This is not a problem just facing underrepresented groups. This is facing all of us; and as people in a position of power, we have got to decide what we're going to do about that. The rise of white nationalism and white supremacy in the United States is a reminder of how far we have to be willing to go in the struggle for freedom and the reminder that nobody has an excuse to stay

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silent. There are people living today for whom life under fascism was a reality. Many of those people are refugees who are immigrants, who are people who face persecution in their home countries who are trying to come here for a better life. But a lot of these people are also Americans who suffer today under the fascism of neo-Nazism and white supremacy, people who are followed out of their mosques by people carrying guns, people who fear going to temple because of the threat of gun violence that just continues to grow. It continues to become more realistic. People who are targeted because of the color of their skin or because of the faith that they practice. White supremacist terror attacks are the leading terror attacks in the United States, but the men who commit these atrocities are not monitored, they're not taken seriously by the FBI until it's too late. Poway synagogue, white supremacist; Christchurch mosque, white supremacist; Tree of Life synagogue, white supremacist; Mother Emanuel AME Church, white supremacist; Oak Creek Sikh Temple, white supremacist; Islamic Center of Quebec City, white supremacist. All of these murders committed with assault style rifles. There are also hate groups in Nebraska that we need to be aware of as a body-- as a legislative body. These are recognized by the Southern Poverty Law Center. ACOG which is racist skinheads, Great Millstone, Proud Boys, the Daily Stormer, Third Reich Books, National Socialist German Workers' Party, Global Faith Institute, Mission to Israel, these are all hate groups that are recognized by the Southern Poverty Law Center, but we need to know about in our own state here in Nebraska. Our nation's epidemic of white supremacy and gun violence is killing people. It's killing people. And people in positions of power need to agree on that and we need to decide collectively what we're going to do, not through, you know, doing a little game with our emotions and standing up on the mike and saying something about it, but what are we going to do through policy changes to combat that from the city council level to the school board level, to state Legislatures, to Congress. Legislators have got to see them themselves-- we have to stop seeing ourselves as separate from the problem and decide what we're going to do collectively about it because activists alone can't solve this. People, you know, doing the best to support the people in their own communities can't solve this alone. Good guys with a gun can't solve this. Vigilantes can't solve this. A wholesale cultural shift needs to occur including a firm and vocal, bright line drawn rejecting white supremacy. The victims of these shootings, these hate crimes are reminders of our violent history in the United States and we are witnesses today to our violent present in the United States. We are witnesses but we cannot also be bystanders. As Americans, those of you who are people of faith, elected officials, people who just want to be good people, we need to show courage

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whenever freedom is in danger because eventually the time comes to act and you're living in it now. This is the time to act. So please decide what you're going to do about protecting liberty and justice for all and then do a little bit more. It's like training for a marathon, you're out of breath, you think you can't work anymore and in these times you have to push yourself a little bit harder. We all need to go through some conditioning and we all need to be a little bit stronger and have more courage in speaking out against this. We are a nation in perpetual grief. We are a nation that needs to reckon with its future. All Nebraskans can agree. All Americans can agree that gun violence needs to stop and thoughts and prayers are not enough. And I stand, and I hope my colleagues stand with me, with victims and survivors and against the gun lobby and the NRA determining policy in Nebraska by putting them thumb on the scale. This is not a partisan thing. This cannot be a both sides thing. Many sides are not responsible for the violence, hate, and tragic deaths that are on the rise in this country. We need leaders to stand against the gun lobby and not only condemn but take actions against this rise and hateful targeted violence.

Institutionalized white supremacy does not care about your intentions. It doesn't care if you mean well. It doesn't care what you hold in your heart. If you have animosity for people, if you have racism in your soul, if you have prejudice against people of other faiths, all white supremacy sees is participation in these systems and complicity in these systems. And I want you all to think about how, and if, you have been a passive participant in these systems, how you can unlearn your biases that you've learned throughout your life. A lot of which you might not be responsible for learning but you are responsible for unlearning. Look at what is driving religious hatred in this country. Question whether your votes here contribute to that. Question whether you've done enough to speak out about it, not in your heart, not in your mind, not in your prayers before bedtime, but out loud when it counts. So I invite you to stand up and speak out against injustices, against these forces that divide us, that don't unite us. We say that we're a culture that protects our children, we're a culture that protects life, but when we fail to protect people from violence, from the effects of trauma, from media personalities who pray on these tragedies for ratings, we're failing to stand up for life, we're standing to fail up-- to stand up for what's right. Seventy percent of all Americans agree that we need stronger gun safety laws. This is not-- this does not have to be a partisan issue and we need to take some commonsense steps toward that end. I have been very preoccupied this weekend with some personal things in my life that I'm struggling with and, you know, preparing for a lot of bills that are coming up this week plus minding my own business about the job that I have to keep on the side in order to do this work.

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But I'll be bringing a legislative resolution against white supremacy similar to the one that was passed by both the House of Representatives and the U.S. Senate. And that's something that I hope all of you will consider signing on to it to say that in the meantime--

FOLEY: One minute.

HUNT: Thank you. --while we work on policy that addresses this in meaningful ways, we can do something symbolic as a state to say to these victims that we stand in solidarity with you, that we see you, that your lives matter, and that we are committed as a body to protecting you. Thank you, Mr. Lieutenant Governor.

FOLEY: Thank you, Senator Hunt. Senator Cavanaugh.

CAVANAUGH: Thank you, Mr. Lieutenant Governor. First, I'd like to wish happy birthday to our colleague, Senator McCollister. I hope you are having a wonderful day so far. And to that end, let's talk about systemic racism. You're welcome. That's my birthday present to you. I, too, was at Abraham's Tent last evening and it was an extremely moving event. And the gentleman who spoke, spoke so heartfelt about what it meant to grow up as a Muslim man in America. And he-- he's a little bit younger than me. I was out of college when September 11, 2001, happened and he was still in college and he said that there's before September 11 and after September 11. And so many people in this Chamber and in the world have that defining moment in their lives and September 11 was a defining moment in my life. My sister lived in New York at the time. I had been living with her over the summer, I had just graduated from college. I left New York on September 7, 2001. And it was only a few days later, I had come back to Omaha before I was going to settle in Washington, D.C., and cell phones didn't work and I couldn't reach my sister. Nobody could reach my sister and we didn't know where she was. We didn't know if she was in Manhattan that day or if she was in Brooklyn and it was terrifying. And then we found out that my uncles, who are airline pilots, were flying. And my Uncle Billy, Billy Barrett, was supposed to be flying-- he always flew the Boston flight. That was his flight. And we didn't know for a very long time that he did not have that flight that day. We were so blessed, so lucky that he was in Denver instead. My Uncle John was flying back from France, I believe, and he is one of the planes that had to land in Canada. And they had to stay in a church for about a week, I think, and

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my Uncle John had to clean the plane entirely by himself because they wouldn't allow anyone on there except for the captain, and we also didn't know where he was for a long time. So it was a terrifying day for my family. But it didn't change anything for us as far as caring about people of other faith backgrounds. We never thought that September 11 meant that Muslims were evil. We never thought that September 11 meant that we didn't have the same God as those of the Muslim faith. And so it's been disheartening to see our Muslim brothers and sisters treated the way that they've been treated in this country because they are also Americans, they love this country just as everyone else does. This is their home. Last night, the speaker talked about immigration and restricting immigration numbers and in the 1920s we tried to restrict immigration from Ireland. My family came to America in the late 19-teens from Ireland. They were fleeing persecution. My great-grandfather and great-grandmother got on the ship in the middle of the night. They got married right before they got on the ship because Anne Conroy was not going to go on a ship with a gentleman she was not married to.

FOLEY: One minute.

CAVANAUGH: Thank you. And they came to the U.S. and they were put on a train to Omaha, Nebraska. They bought a house on 39th and R Street in Omaha and they raised their family there. And their daughter and two sons raised their families there, next door to each other. My great-uncle, Jimmy Munnely, he bought the lot next to the house and he raised his family there and my grandmother and grandfather raised their family in my grandmother's childhood home. And it was-- my grandma used to tell us about south Omaha s-o-b. My dad is a south Omaha boy, he's an s-o-b. In South Omaha every church is a different ethnic saint attached to it because that's where all the immigrants ended up and they all started their own churches, but they're all Catholic churches so you got St. Mary's as the Irish church and it's a wonderful tribute to how we can cohabitate.

FOLEY: That's time, Senator.

CAVANAUGH: Thank you.

FOLEY: Thank you, Senator Cavanaugh. Senator Morfeld.



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MORFELD: Thank you, Mr. President. And colleagues, I also rise in support of LB556, Senator Howard's bill, but I do want to take the time to talk about some substantive action and steps that can be taken in light of Senator Hunt's comments today about white supremacy and gun violence. I introduced LB58 which is the Extreme Risk Protection Order Act, which would make it so that a court who finds that a person who poses a significant risk to themselves or others can temporarily take away their firearms for up to a year. And the debate is-- well, I shouldn't say the debate, it was a committee hearing. We obviously aren't going to have debate on that bill this year, but the committee hearing was interesting in that the opposition brought up, well, this is a violation of their due process rights, and Senator Morfeld you should spend more time on things like making sure that people have medical care and services and access to mental health treatment. So, a few things in response to that, yes, we should make sure that we have access to healthcare and mental health services, but it's not mutually exclusive to the fact that we need to take other actions. It's interesting to me that the same people that come in opposition to reasonable restrictions on firearms, particularly for people who pose a serious threat to their own life and particularly to other lives, that it's met with immediate opposition and a bunch of folks who say we should care more about mental health services, yet are completely silent when we have bills that would allow for mental health services. They fail to go to those hearings and I watch some of those hearing and I look at the proponents and the opponents on the committee statement when those bills come out. And yet it is silence when it comes to actually taking action to provide those mental health services by those same people that oppose reasonable restrictions on gun rights, the people who clearly pose a danger to themselves and others. The people best positioned to understand how important these red flag laws are, law enforcement came in and testified. I think I had two or three different law enforcement officers or representatives of law enforcement agencies that came in and talked about how incredibly important these types of laws were in order to ensure public safety. Reasonable laws that require due process. And a lot of folks said, well, hey, listen, I would love this bill but it just doesn't have due process. One, it does, it requires a court hearing shortly after the temporary emergency order is given by a court after hearing evidence from law enforcement and other individuals. But it seems to be that these folks want you to commit the crime first before doing anything about the dangerous firearms that are killing literally thousands of people in our country every year. They want them to commit the crime first, even though law enforcement and all kinds of other people have come out and said, before these shootings even took place that this person is going to do something horrible, they're

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going to do something bad. But yet, we have no tools for law enforcement in the courts to protect our communities and our society because of false arguments about due process and distractions about the need to look into mental healthcare. We can look into mental healthcare. I don't see any of those same people coming and testifying in opposition to my bill testifying in support of Medicaid expansion. And I pay attention to who testifies in support of Medicaid expansion. None of them were there. Medicaid expansion would actually make it so that about 90,000 Nebraskans would have access to mental health supports, medication, and other needs. We can take action on this. First by yes, standing up against white supremacy, but second and most importantly, by actually taking substantive action.

FOLEY: One minute.

MORFELD: Substantive action that takes dangerous firearms away from people who we know pose a significant risk, who have to go before a court and testify and show evidence that they pose a significant risk. We can do it by actually making it so that people have healthcare and not just talking about it. There is all kinds of action that we can take, but we fail to do it. And yet after each of these tragedies, we all get up and go, oh, wow, gosh, that's horrible. I'll pray for you. It rings hollow. It rings hollow to me, to the victims who will never have a voice, to the families, and then to an entire world that knows that there are commonsense solutions that we can take action on to prevent gun violence, to go after white supremacy and to ensure that people have the community support so that they never even get to that point.

FOLEY: That's time, Senator.

MORFELD: Thank you, Mr. President.

FOLEY: Thank you, Senator Morfeld. Senator Chambers.

CHAMBERS: Thank you. Mr. President and members of the Legislature, when these types of motions are offered, the field is open to discuss anything and everything. Senator Hunt gave a good direction for the discussion, not to limit it, but to focus it. I'm going to focus on what has been happening to black people ever since we've been in this country. You all talk about

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immigration and how immigrants are mistreated and everything you say is true. See, I'm black. Were I blacker, I could be prouder. We are the only people who were forced against our will to come to this country. We did not come here as immigrants. We came here as captives. Six million Jews were killed in Germany by the Germans, in Poland and other countries they had the death camps. Millions of black people died on what was called the Middle Passage. Thrown into the ocean, treated inhumanely, and that continues to this day. You all need to think sometimes about who you've got in your midst. I graduated from grade school, all white teachers. High school at Tech, all white teachers. Creighton University, all white teachers. Creighton Law School, all white teachers. Graduated from all of them. Everything I studied pertained to white people from the white people's perspective. When I make negative comments about that flag, and refer to it as a rag, you get more upset about the comment than you do about the factors that lead me to make that statement and you'll never come face to face with them and never address them. I don't like the pledge because it is a lie every time you tell it, every time you say it. You talk about one nation under God indivisible. Where is the under God? Muslims have been attacked. Jews have been attacked, and it's for religion. Where is the under God? This country has never been as divided as it is now and you all stand up to that piece of fabric and tell that lie every day. One nation indivisible and this country is fractured. You don't think about what you say, but I think about it. White people have everything their way. They don't have to think about anything. The handout I gave you today, me being arrested on a false charge. I was wearing a relatively tight t-shirt and I was charged with carrying a concealed weapon. Where could I conceal it? And the charges were dismissed, but in the meantime, the aggravation, the inconvenience, they thought it would embarrass me in front of my community, but black people knew how I stood for us. And they knew that the police were our enemy. So when our enemy attacked me in that fashion, that showed the impact that I must be having in our behalf, and I never backed off. There's another small article attached and it says another charge against Senator Chambers, or whatever the term was they used, had to be dismissed. Another means that there were others and there were others. I have an extensive arrest record. When I was a barber, there was a fish seller next to the shop. Cops would park in the bus zone, go in and get fish, so I was standing on the step looking at this cop and he arrested me and charged me with disturbing the peace. And when I went to court, he could not explain how I was disturbing the peace other than to say that when I looked at him, I disturbed his peace. That's what a white cop can do to a black man and you all wonder why I'm upset. It doesn't happen to you. What I get upset about is the fact that you don't

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believe it, but I'm not surprised. But you're not going to silence me and I'm going to bring it up and bring it up and bring it up.

FOLEY: That's time, Senator.

CHAMBERS: Thank you, Mr. President.

FOLEY: Thank you, Senator Chambers. Senator Howard.

HOWARD: Thank you, Mr. President. I wasn't planning on talking today, although I appreciate a robust debate, not at all related to my bill. So LB556, just a reminder, this is the A bill for the Prescription Drug Monitoring Program bill and it's all federal funds. But I actually was really grateful that Senator Hunt stood up and talked about the synagogue shooting this weekend because I do think that there's more that we can do as a body to recognize that there's bias and discrimination occurring in our country and in our state. And one of the really-- one of the proposals that I brought forth this year was LB640, which is a bill that requires holocaust and genocide education for students. It's currently in the Education Committee. It didn't have a priority and so the committee really hasn't had time to discuss it. But the bill came about because I went on a trip to Washington and was meeting with an individual who works at representative's Bacon's office and he said that of all of the things that are required in our educational system, the Holocaust is not one of them. And I couldn't believe it. And then when we dug a little bit deeper we found out that about two-thirds of young American adults couldn't identify what Auschwitz was, which was incredible. I feel like the Holocaust is an incredible-- it's a vital part of human history and it outlines how dangerous dehumanization can be. But it also, when we don't recognize the Holocaust and when we don't recognize this as part of our educational system, we also sort of forget the veterans who fought so bravely to end the Nazi regime in Germany and in Europe. And we actually had a veteran come to the hearing and talk about how important he felt as though this type of education within our educational programming should be because they fought so hard. When we think about what is happening right now with repeated shootings at synagogues, so often we think that antisemitism is dead and it doesn't exist anymore, but these are very stark reminders that it continues to exist in our country and beyond. LB640 is a great bill. I hope the Education Committee will have some time to discuss it. But it's also my hope that

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by moving this bill along and by educating our youth about the past, we can prevent these events from happening in the future. Now, I'm talking about the Holocaust, but the bill touches on genocide, which is something that-- it is horrific. The holocaust and genocides together, we had originally listed different genocides so Rwanda and Native American, and we ended up removing them so that the crime of genocide or genocides in history would be included as a whole. One of the-- when I was in college, I had a work-city job. I was desperate to not do my work-city job that was washing dishes, and so I started seeking out professors that I could work for instead of washing dishes.

FOLEY: One minute.

HOWARD: And the first two professors that caught me were two professors who were noted, sort of Africanist scholars, and they gave me sheets of paper. They gave me a box with sort of very thin paper and they said, we want you to take these lists of names and put them into a spreadsheet for us so that we can search them. And at the end of the project, I had done just piles and piles of boxes with very thin paper. At the end of the project I asked them what the names were. And they were the names of individuals who had been murdered in the second Rwanda in genocide and I had just spent an entire year cataloging those names. It was overwhelming and terrifying to think about. And so, if I may just for a moment put a plug in for LB640, while we discuss LB556, to the Education Committee. I hope you will consider passing this bill out. Senator Slama and Senator La Grone have graciously signed on to it. And so with that-- yeah, please pass LB556A. It's actually really important to me as well. So thank you, Mr. President.

FOLEY: Thank you, Senator Cavanaugh. Senator Pansing Brooks. I'm sorry, Senator Cavanaugh, you're next in the queue.

CAVANAUGH: Thank you, Mr. President. Thank you, Senator Howard, for reminding us about this very important bill, LB556. I think it brings to mind the importance of what Senator Hunt was talking about and what Senator Chambers was talking about. These things are all interconnected. Addiction is a real issue in this country, racism is a real issue in this country, and oftentimes these two things can be tied. Not racism broadly, but racism in the case of the shooting that happened, can be tied to behavioral health. And having it at the forefront of our

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minds that the opioid epidemic is real and we need to be facing head on the challenges that those suffering from behavioral health have every single day. I appreciate Senator Howard. She has made her work, and her mother's work has made Nebraska one of the most progressive states in fighting the opioid epidemic, but we still have a lot to do as far as changing the perspective on addiction and changing the perceptive on behavioral health. Whenever there's a mass shooting, or any kind of shooting, it does bring to mind the behavioral health element. What brings some person to think that it's okay to kill another person because of a belief system. And we as a country need to working harder and we as a state in the legislative body need to be working harder to be thoughtful in our rhetoric, and how we talk about individuals that are different from ourselves. Senator Chambers brought up a very important point that my family-- our family of immigrants, but they-- though they were fleeing things in their home countries, they were not forced to come here. And Senator Chambers' family did not come here of their volition and that is a tragedy that is still and will always be a mark on this country's history, just as it is a tragedy and a mark on this country's history that we massacred those that were here before us. That we massacred our Native American brothers and sisters and those things are stuck in our-- when I talk about systemic racism, that's what really where it starts is our history, and you have to look at our history. Our entire creation of law enforcement in this country was based around when we no longer had slaves but they started to become free and so we needed a new way to enslave those that were previously slaved and that's how we started our incarceration system. Our prison system is riddled with a history of racism and we need to be looking at that through our public policy and how we can do more to reduce our prison population through more thoughtful legislation. What we can do to make sure that our prison system isn't reflective of a broken system of racism and there are things we can be doing. We can be looking at what crimes are considered a felony. We can be looking at who is convicted of a felony and who is kicked down to a misdemeanor and the data is there. If you have a white man who is 25--

FOLEY: One minute.

CAVANAUGH: --and a black man who is 25 and they commit the exact same crime, and it could be a misdemeanor, nine times out of ten, that white man is going to get a misdemeanor and nine times out of ten that black man is going to get a felony and that's a problem. And actually it's just math in my head, I don't know I'm probably way more skewed than that. So it's important that we

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keep this topic and I so appreciate Senator Hunt bringing to the floor today this tragedy that has befallen our country yet again, and the hate that is in people's hearts, we need to be the change. We as a body have the opportunity to change people's hearts and minds by the thoughtful legislation that we put forward today and in the future. Thank you.

FOLEY: Thank you, Senator Cavanaugh. Senator Hunt, you're recognized.

HUNT: I'd just like to withdraw the motion. Thank you.

FOLEY: Motion is withdrawn. Returning now to the bill. Mr. Clerk.

CLERK: (Read LB556A on Final Reading.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB556AE pass with the emergency clause attached? Those in favor vote aye; those opposed vote nay. Record, please.

CLERK: (Record vote read.) 44 ayes, 0 nays, 1 present and not voting, 4 excused and not voting, Mr. President.

FOLEY: LB556AE passes with the emergency clause attached. Our next bill is LB638. Mr. Clerk.

CLERK: Mr. President, Senator Cavanaugh would move to return the bill.

FOLEY: Senator Cavanaugh, you're recognized to open on your return motion.

CAVANAUGH: Thank you, Mr. President. First of all, I would like to say that Senator Stinner, I have no intention of returning your bill. I will rescind my motion after a few things are said, and if others want to speak as well. So Lori Kaye was killed in a shooting at Congregation Chabad on the last day of Passover. Chabad of Poway is grieving today as the bereaved congregation prepares to say goodbye to the dear and loving friend, Lori Gilbert-Kaye, 60, was killed by a

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gunman who shot up the San Diego area synagogue during services on Saturday. She will be buried on Monday. Kaye jumped between the shooter and congregation's rabbi. The rabbi and two others were injured in the attack which took place exactly six months after the massacre at the Tree of Life synagogue in Pittsburgh. A 19-year-old man was arrested. Kaye is remembered as an upbeat and positive force among friends and congregants. Lori, you were a jewel of our community, a true-- I'm not going to say this correctly-- a Eshet Chayil, a Woman of Valor, by friend, Audrey Jacobs on her Facebook page Saturday. You are always running to do the good deeds and give charity to everyone. Jacobs described her friend as a warrior of love. Another friend told CNN News Day on Monday that Kaye symbolized random acts of goodness. The community support. The shooting shook the community and people of all faiths and walks of life came by the synagogue to offer their support. Across the street from the house of worship, people stopped by a makeshift memorial sight dropping off messages, leaving small offerings and saying prayers, the station reported. Troy McKinney told his young son about the incident. I was telling him that some people got hurt up here and we want to make them feel better. One violent act is not as powerful as the community that stands together. Hundreds attended a candlelight vigilance Sunday. The others hurt in the attack were Noya Dahan, eight years old, and Almog Peretz, 34, both injured by shrapnel. One message on the Chabad of Poway Facebook page conveyed its condolences from the Muslim community. Muslim communities thoughts and prayers are with you all in this tragic time where all houses of God are under attack. If it affects one community, it affects all of us. We stand in solidarity with you. Shalom. Her final good deed. The assault unfolded on the last day of Passover, which fell on Chabad this year. What time-- synagogue lobby asked him, what time is Yizkor. Yizkor is the memorial prayer for deceased loved ones and is recited during holy days four times a year. On the last day of Passover, on the second day of Chabad, on Shemini Atzeret on Yom Kippur, obviously my Hebrew is not even existent. I apologize to my Jewish brothers and sisters. Kaye was planning to recite the prayer of her late mother, but she never got the chance. Goldstein told her that it was called for 11:30 a.m., just a few minutes away and wished her a happy Passover. Then he turned to wash his hands. A sudden loud bang startled him. When he turned back around, Kaye was prostrate on the lobby floor and the terrorist rifle was pointed right at him. Lev, who had not been at the synagogue, rushed to the hospital after news of the shooting. The rabbi told me when I saw him rolled into surgery, let people know that Lori died saving my life. Taking the bullets for the rabbi was her final good deed. Among the physicians at the synagogue, Kaye's husband



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was one of them. People screamed for help and he ran to give CPR to the fallen victim. When he looked at who it was, his wife, he fainted, Jacobs said on her Facebook page. A brave off-duty border patrol agent fired at the shooter and chased him. Other members of the synagogue who carried license-concealed weapons also went after him. Miraculously, the killer's gun jammed and he ran off. The heroes and "G-d hand" prevented the killer from claiming more lives. Fortunately the murderer was caught and is in custody. Thank you to our law enforcement for your support, Jacobs said. This is on CNN's Web site and it outlines the details further. It is heartbreaking that we continue to have these sorts of events happening in our religious institutions. I cannot begin to imagine taking my children to church on Sunday, taking them to Easter mass a week ago, and having a gunman show up. It's something that I don't want to imagine. I don't think anyone wants to imagine. We should hold our places of worship sacred and there is a stream of white supremacists in this country that no longer respect, and possibly never did, our religious institutions, our people of faith. I will absolutely stand in support once Senator Hunt brings her resolution on white supremacy. I think we need to be taking a moral stand as a legislative body to cast out such evil and say that this is not something that will be tolerated. In last week's debate on the floor, a constituent sent to me some quotes and I would like to share some of them. Words are tears that have been written down. Tears are words that need to be shed. Without them joy loses all its brilliance and sadness has no end. Thank you then for your tears. Paulo Coelho. St. Pope John Paul II said in January of 1919, the dignity of human life must never be taken away, even in the case of someone who has done great evil. Pope Benedict in November of 2011, I express my hope that your deliberations will encourage the political and legislative initiatives being promoted in a growing number of countries to eliminate the death penalty and to continue the substantive progress made in conforming penal law both to human dignity of prisoners and the effective maintenance of public order. I think the crimes that have happened in this country, the murders that have happened is as important to remember that that 19-year-old young man, and I struggle as a four-year-old to say man, not child, but he is a man. I think it's important to remember that he is a person as well and that circumstances in his life brought him to do this great atrocity, but that does not mean he is not a person and that does not mean that he does not deserve compassion in our judicial system. Thank you. I yield the remainder of my time.

FOLEY: Thank you, Senator Cavanaugh. Senator Chambers.

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CHAMBERS: Thank you, Mr. President. Ralph Waldo Emerson wrote a lot of essays and much of what he said gets paraphrased, so I'm gonna paraphrase one of his comments. Charity abroad often translates to oppression at home. People are concerned when something bad happens a long way away or a long time ago. Senator Cavanaugh handed out this-- some pages from the publication that Creighton put out commemorating the 1919 lynching of Will Brown in Omaha. Now, the first picture that you see shows the courthouse. Above it, a collection of white men. But even this is a whitewash, to use that term. What they're looking at is the smoking body of a black man being burned. It was too horrendous, I guess, in the minds of those who put out this publication for Creighton, for the delicate minds and sensitivities of white people to look at. So even while describing what happened, it's done by means of a half truth. The picture from which they cropped the burning body of the black man who was lynched, and shot any number of times, was printed in full in Life magazine and in every publication that talks about lynchings to show just how horrendous it was, how vicious white people have been and I think still are now. They just are afraid to try to do to some of us now what they did with impunity then. But there's another reason they don't have to do it. The courts have taken over and lynch law rules the white courts. I could stand here and talk all day, today, tomorrow, for the rest of my life and your life, and they would be as Peter, Paul and Mary said, words blowing in the wind. It's not going to make any difference. Nothing that we failed to do here will be corrected. The poor will not be dealt with. The mentally ill. You have a Governor who will lie through his teeth. These so-called conservatives running around here, they can't even bring themselves to say the Democratic Party. So they call it the Democrat Party. So petty, so juvenile, so silly. I don't take any of them seriously, but there are people who take them seriously. And that youngster who shot up the synagogue legally purchased that weapon, the AR-15, legally. That genie is out of the bottle now. The guns are everywhere and you are going to see armed confrontations. Where will the NRA people be then? There will be people who will be interested in doing something to them because they started it all, so a different group will use the guns for vengeance. And once the violence is unleashed, the government won't be able to stop it because the lynch mob attitude exists in the military. It's everywhere. You all don't see it because it's not directed at you. But it's in the schools. I have a letter I'm going to show to Senator Pansing Brooks because she is concerned about what happens in Lincoln's Public Schools and there's a young black girl who was kicked off the track team.

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FOLEY: That's time, Senator.

CHAMBERS: Thank you, Mr. President.

FOLEY: Senator Chambers, you're recognized.

CHAMBERS: She was kicked off the track team, she was threatened. She's what is called biracial because some white kids said bad things about her. But one of the boys who was involved has postings showing the Swastika, Ku Klux Klansmen in hoods. Nothing was done to them. This girl has been threatened with physical violence. The boy's uncle has harassed her family. She's staying with her grandfather, right here in Lincoln. So when I listen and I hear all of the commiserating with what happened in California, or in some other place, it's right here in this city and it will continue because if the school officials thought that that racism would not be tolerated, they wouldn't do it. School people are not known for courage. They're very sensitive to public opinion. So for the principal, counselor, one of Senator Pansing Brooks's favorite kind of people, one of these officers in the schools, a cop in the school, when she showed him these things, he said, oh, just forget it. Just delete that. These are kids trying to get at kids. But if a black kid did that to white people, he'd be out of school and he'd probably be in jail because they say he was threatening. A black girl ganged on by white boys, cowards. Your boys in school. She's trying to get an education. She wound up having to drop classes. They follow her in the halls. They say things to her of a threatening nature and now she's afraid that they will do something to her because that's what they've been saying and posting-- in Lincoln. And I listen to you all and I get disgusted. They're just words. They don't have any substance whatsoever. The Jews will say, never again, never forget. They say that in this country and this is not where it happened to them. I talk about what not only happened to us, but continues to happen and white people get irritated. Senator Slama, to give you an example of how silly these white people are, I referred to her as a woman when I was discussing something she did and she took offense and said it was sexist and an insult to her gender and I've got the transcript. I'm going to hand it around and she has become the self-appointed person to put female senators in their place and interrogate them on this floor. I watch that. You all don't say anything, but you see it and you know it. And some of you have talked to me about it. So we may as well bring it all out. But rather than me paraphrase, I'm going to hand you the transcript and let you read what I said

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about a white man hiding behind a woman's skirts. She got offended because I referred to her gender. I don't know what she wants me to refer to her as, but I'll still refer to her as a woman. Silliness. Shallowness. A child in an adult setting. But you know why I can't blame her too much? Because there are people twice her age--

FOLEY: One minute.

CHAMBERS: --who behave like children and juveniles also. Cannot cope with the realities that we are supposed to deal with in the Legislature. I showed you all the last day we were here what I could do in terms of stopping the activities if I chose to and I made the point that day that I wanted to make. I had indicated to several people that I had nothing that I was going to say on Final Reading today. But the gate was opened by others. Because of the nature of the discussions, I was impelled to say something and I'm going to do it whenever I think it's necessary and I will say on this floor what I think is necessary and when I see people behaving a certain way and making certain comments, then I'm going to address that too.

FOLEY: Time, Senator.

CHAMBERS: Thank you, Mr. President.

FOLEY: Thank you, Senator Chambers. Senator Cavanaugh.

CAVANAUGH: Thank you, Mr. President. I have just a few more things to say and then I will be withdrawing my motion. There's some very interesting noise happening right behind me. So thank you to Senator Chambers for his very important comments about what's happening in society and thank you again to Senator Hunt for bringing this up today. I just wanted to take the time since Senator Chambers has pointed out to us on a few occasions that he will no longer be in the body in a couple of years, so when we want to take time to talk about these really important pressing issues, we're going to have to do it ourselves and not count on Senator Chambers to make the time for us. And I appreciate that he's done that for us in so many other instances, but it's important for us to talk about what happened in San Diego. It's important for us to acknowledge that it's more than just San Diego. So thank you to Senator Hunt for giving us

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the time to start the conversation and thank you to Senator Chambers for showing us the way. And with that, I would like to withdraw my motion.

FOLEY: Motion is withdrawn. We're back to LB638. Mr. Clerk.

CLERK: (Read LB638 on Final Reading.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB638 pass? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 45 ayes, 0 nays, 4 excused and not voting, Mr. President.

FOLEY: LB638 passes. Proceeding now to LB663.

CLERK: (Read LB663 on Final Reading.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB663 pass? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 44 ayes, 0 nays, 1 present and not voting, 4 excused and not voting, Mr. President.

FOLEY: LB663 passes. Next bill is LB698E. Mr. Clerk.

CLERK: Mr. President, Senator Chambers would move to return the bill.

FOLEY: Mr. Chambers, you're recognized to open on your return motion.

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CHAMBERS: Thank you. Mr. President and members of the Legislature, and particularly to Senator Bostelman, I'm not against his bill. In fact, if he would yield, I would like to ask him a question or two.

FOLEY: Senator Bostelman, would you yield, please?

BOSTELMAN: Yes.

CHAMBERS: Senator Bostelman, early on in this bill's career, did I have some-- what I consider serious problems with it?

BOSTELMAN: You did.

CHAMBERS: Did you and I and your staff come together and work our way through it?

BOSTELMAN: We most certainly did.

CHAMBERS: And is it a better bill for that having been done?

BOSTELMAN: Certainly.

CHAMBERS: So will you accept that at face value that I'm not doing this to hurt your bill?

BOSTELMAN: Yes.

CHAMBERS: Thank you. Members of the Legislature, here is why I'm doing what I'm doing now. I had criticized the Ag Committee, which I say that ag means agony or aggravation. I've been on that thing almost the whole time I've been in the Legislature. I've spent more time on that committee than anybody in this Legislature. When they were going to get rid of it, I saved it. I saved the Agriculture Committee in the Legislature in an agricultural state where they hate me. Had term limits taken me out of here before it did, you wouldn't have an Ag Committee now. That's what they were going to do with it. But I was very critical of the fact that they will not

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advance a bill, the black-tailed prairie dog bill, and I mentioned how horrendous it is and it violates the constitutional principles, due process, and all the things that supposedly make this country great. So without going into all of those matters by reading the statutory provisions, which I could do, I decided to detail them for you. Pursuant to the Black-Tailed Prairie Dog Management Act, the following actions can be taken against a landowner on the basis of an unverified complaint by a disgruntled neighbor without an investigation, without a warrant, without any court involvement, and without the landowner being given notice. Number one. Oh, and by the way, this is for you hypocritical conservatives who say you don't like regulation, you don't like government overreach. Well, I want to see somebody pop up here and point out why this is not acceptable. Number one. An agent of the county board may, quote, enter the property for the purpose of taking appropriate management activities at the owner's expense. Remember, all of this without notice. Number two. The expense shall become a lien on the property as a special assessment. Number three. A fine of \$100 per day up to \$1,500 for noncompliance can be levied. Number four. The county board shall immediately cause notice to be filed of the management assessments against the property in the register of deeds office. That's another governmental official. The county board shall certify to the county treasurer, the second governmental office, the amount of such expense which shall become a lien on the property. The county treasurer shall add such expense to and it shall form a part of the taxes on the property and shall bear interest at the same rate as delinquent taxes. Number 7. In the event of noncompliance, the county board shall notify the county attorney, the third governmental official or office, who shall proceed against the landowner. Number eight. If convicted, the penalty shall be a fine of \$100 per day for each day of violation up to \$1,500 for 15 days of noncompliance. Number nine. Satisfaction of the obligation in whole or in part by tax foreclosure proceedings shall not be the limit of proceedings. They can foreclose on your property 'cause somebody complained about prairie dogs without you having notice of any of this. You all aren't interested in this now, are you, 'cause it's right here in Nebraska and I'm doing it on purpose to show how all that commiserating with the shooting out in California was so much hokum. This right now can happen in this state to your white landowners and you all don't care, but I want it on the record. Number ten. The expense may be collected by a suit for a debt due the county by any or-- by any other additional remedy otherwise available. All of that on the basis of somebody complaining that you have prairie dogs. And you don't have to be given notice. You are not having to have notice. You don't have to know that any of this is happening or why, because the

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law specifically says, even if you don't get notice, you're held accountable for everything in this law that I've read. Without notice. And the law says that. No law should say on its face that you don't have to be given notice, that makes it unconstitutional. Senator Hilgers knows this. But he's for keeping the bill, keeping that law in place. Why involve the county attorney and taking somebody to court to get a judgment? There is something else. You know, my job is so hard. I get tired of trying to educate you white people. I hope that angers you because you don't even pay attention to your own Constitution. Let me read something from you white people's Constitution, you superior white people. You educated white people. Some of you even graduated from-- at least one of you, an Ivy League school. And let me read this to you. Article VII, Section 5 of the Nebraska Constitution. All fines, penalties, and licensed money arising under the general laws of the state shall be appropriated exclusively to the use and support of the common schools. And in this law that I read for you, you know where the money goes to? In a black-tailed prairie dog enforcement fund or the general fund of the county. That's your Constitution and I read to you all. Do you all see why I get disgusted with you, why I raise my voice? It's your law. It's your people, white people. This can be done without any notice being given and then it unconstitutionally disposes of the fines that are collected. Senator Brandt, I think, might be a member of the Ag Committee. I'm not sure. But you all know who you are and you can look at the roster. We are all grown people. We're supposed to deal with the issues that confront the people in this state. What is to be done when the Legislature itself enacts such a patently unconstitutional law and the Ag Committee won't even let it come out here? I don't care whether they let it come out here or not. What difference does it make to me if they haul one of your kind before a judge because somebody says you got prairie dogs on your land, and the county board did all this stuff that I mentioned and there are other protections for the people in the county who might do this. How much time do I have, Mr. President.

FOLEY: 1:45.

CHAMBERS: Thank you. I'll put on my light 'cause I may need that to finish. And let me tell you all something. If it didn't mean anything to me down inside that people are denied due process, I wouldn't even waste my time talking to you 'cause that's what I'm doing. Let me read what the law says. Mr. President, I will stop and then when I'm recognized, I'll be able to finish this. Thank you.



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FOLEY: Thank you, Senator Chambers. You are recognized.

CHAMBERS: Thank you. I didn't want to have to stop in the middle. Section 23-3808. Entry upon land authorized. This is what can be done without a warrant, without the landowner having any notice. Listen. The county board of a county that has adopted a coordinated program for the management of black-tailed prairie dogs under Section 23-3803 or anyone authorized by the county board, anyone authorized may enter-- are you all listening? Huh? Oh, I heard a yes. At least one person-- may enter upon property in the county for purposes of performing the duties and exercising the powers under the Black-Tailed Prairie Dog Management Act without being subject to any action for trespass or damages, including damages for destruction of growing crops if reasonable care is exercised and 48 hours written advanced notice of entrance is provided to the property owner or occupant. But the law says, you don't have to be given that notice. That part of the law indicated that you should be entitled to the notice. But there is a general statement that governs all of this particular law that says even if you are not given notice of any kind, all of this can be done. So while internally acknowledging that notice should be given, they erase it by saying, no notice needs to be given. They can destroy your crops. They can spread poison and all the other things they can do by way of taking this action which is laid out in that bill. I saw it. The belief that I have in due process, fair treatment, even by the government led me to try to do something to help your people. And you all are the white people who talk about not liking government overreach, that the government is too heavy-handed. I thought you all would eat this up for your kind. But you won't because my kind is the one who had sense enough and gumption enough to undertake to try to protect your kind. So you hate me more than you love your kind. Go get the Black-Tailed Prairie Dog Management Act. It's in the statute and read it for yourself. Jesus got frustrated when he talked to these disciples and other people. After they saw him work miracles-- now let's presume everything the "Bible" says about that is true. He was finally frustrated to the point where he told them, these people will not believe if one came back from the dead. Jesus said that. And you know what proves it? You all say he died and came back alive and you all don't believe him. So he told the truth. A fictitious character predicted exactly what would happen and it happened. They will not believe the one returned from the dead. So why should I, a black man, expect white people who hate black people to do anything that that black man suggests even when the suggestion is to rescue other

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white people? They are so blinded by their hatred, so blinded by their racism that they cannot take it from somebody who will warn them--

FOLEY: One minute.

CHAMBERS: --and tell them the way to protect their own kind. You know why I asked Senator Bostelman those questions before I started? Senator Bostelman listened. Senator Bostelman looked at the issues that were raised. He didn't say, Chambers said this, we'll go on with it 'cause they'll pass it anyway. That wasn't his attitude. And you know why I dealt with Senator Bostelman the way that I did? From the way he comported himself, I thought-- I had no way of knowing. He could have been like the rest of you all. I thought he'd be somebody who would listen, and as a result the bill is on Final Reading and you all don't even know what those issues were. I do that because experience is the best teacher and some will have no other. I had to give you all a concrete example of where I worked with one of your people who was willing to work together and we got something done in the way it should have been done.

FOLEY: That's time.

CHAMBERS: Thank you, Mr. President.

FOLEY: There's no one else in the queue. Senator Chambers, would you like to withdraw or speak?

CHAMBERS: I'm going to close and then withdraw that motion. There is so much yackety-yak on this floor about us learning how to work together, learning how to compromise. Well, Senator Hunt learned what that compromising leads to. I learned a long time ago what trying to teach white people something, not that I'm bringing something esoteric or mysterious or mystical, you know what I mean by teaching them? Showing them where it's in their law. Showing them where it's in their Constitution. I call it teaching because if they didn't know and I brought it to their attention, that is what teaching comprises, bringing information that people did not have. But you cannot learn for somebody. What do they say? You can lead a horse to water but you can't make him drink. You can lead a fool to school but you can't make him think. That second part is

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what I have trouble with down here. You let somebody show me where something I'm trying to do is defective and they've got a recommendation on how it can be corrected. They might have to pull their hand back before it gets bitten off. I accept instruction. I appreciate having my education improved. I'm not diminished because I accept information which I did not have. That enhances me. It doesn't diminish me. I can learn from anybody and anything. But that's not the case here. I know whereof I speak. I've been with and around you people. That's an insulting term to black people, you people. I've been among and around you people for more than four decades reading your laws, writing laws, improving laws, arguing in behalf of the Constitution, trying to prevent it from being savaged, which I did, but as soon as I left, the idiots then in the Legislature put a provision before the idiots out there to protect hunting, trapping, and fishing in the Constitution. That's not why Constitutions are written. I stopped them from doing that for all the years that I was here. As soon as I left, a guy named Pirsch got the Legislature to submit it to the voters and they voted to put into their Constitution something as demeaning and pedestrian as trapping, hunting, and fishing and which ones of you in this state think that trapping would be outlawed? Fishing would be outlawed? Hunting would be outlawed? I can't even stop you from hunting mountain lions, which you might exterminate. But that's how silly the people in this Legislature are. It is frustrating. That's why God sent the flood. He said, I'm sick and tired of being sick and tired. And I'm going to send one of their own kind to warn them 'cause I know they're not going to listen. But I let him know if he does what I tell him to do, he and his family will be saved and that's what happened. All the rest of them were drowned out and killed. All of them, killed. The fish didn't get killed, though, 'cause they live in water. They were happy. But then, you know what happened with Noah?

FOLEY: One minute.

CHAMBERS: Read it and see. That Bible is full of all kinds of things. Sex, treachery, murder, lies, false promises, and all of it is manifested in this Legislature in one way or the other. But since I'm here, within reason, I'm going to continue to try to stir your pure minds, stimulate you to get rid of these bad laws, and I don't know what's the matter with Senator Hilgers. Where much is known, much is required. And he who knew his master's will and did it not shall be beaten with many stripes. But I think Senator Hilgers might have political ambitions, so if he made the mistake of supporting something like this when I bring it--

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FOLEY: That's time, Senator. Senator Chambers, did I understand you were going to withdraw the motion? Motion is withdrawn. Thank you, Senator Chambers. Mr. Clerk, LB698E.

CLERK: (Read LB698 on Final Reading.)

FOLEY: All provisions of law relative to procedure having been complied with, the question is, shall LB698E pass with the emergency clause attached? Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: (Record vote read.) 44 ayes, 0 nays, 1 present and not voting, 4 excused and not voting.

FOLEY: LB698E passes with the emergency clause attached. While the Legislature is in session and capable of transacting business, I propose to sign and do hereby sign the following legislative bills: LB304, LB428, LB445, LB556E, LB556AE, LB638, LB663, and LB698E. Also while legislation is in session, I propose and do hereby sign the following two legislative resolutions: LR86 and LR89. Items for the record, please.

CLERK: Thank you, Mr. President. Senator Linehan? Senator Linehan, do you want to do your Exec Session now? All right. Revenue Committee will have an Executive Session now in Room 2022; Revenue Committee in Room 2022. Enrollment and Review reports LB600, LB460, LB460A to Select File, some having Enrollment and Review amendments. That's all that I have, Mr. President.

FOLEY: Thank you, Mr. Clerk. We'll proceed to General File, 2019 Senator priority bills. LB209, Mr. Clerk.

CLERK: LB209 is a bill by Senator Albrecht relating to abortion. (Read title.) Introduced on January 11, referred to the Judiciary Committee, bill was advanced to General File. There are committee amendments pending.

FOLEY: Thank you, Mr. Clerk. Senator Albrecht, you're recognized to open on LB209.

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ALBRECHT: Thank you, and good morning, President Foley and colleagues. LB209 is my priority bill. I want to begin by thanking Senator Lathrop, his staff, and all the members of the Judiciary Committee who worked with me on this bill to make it the best that it can be. AM1432 replaces the original bill and I'll allow Senator Lathrop to introduce that here shortly. It is a good amendment and the fruit of a lot of hard work between people who all have been interested in making sure that any woman who changes her mind after starting a medication abortion knows that it may not be too late and that she can talk to a medical professional who can help her. Its purpose is to ensure that every woman receives the information she needs and deserves to make a truly informed and voluntary decision when deciding whether to proceed with an abortion. We all sometimes make decisions that we'd like to take back. Some of those decisions are small and we quickly forget about them. Other decisions are major ones and can be life altering. It should not surprise us that this happens with abortion, too. Fifty-five percent of the abortions in the state of Nebraska are now medication abortions, those begun by taking the abortion pill mifepristone. This bill is about one thing: informed consent. It gives every woman a second chance at choice if she wants to pursue it. It ensures that no woman who regrets starting an abortion is left in despair. LB209, as amended, requires that a woman be told the following: that research indicates that mifepristone alone is not always effective in ending a pregnancy. You may still have a viable pregnancy after mifepristone. If you change your mind and want to continue your pregnancy after taking mifepristone, information on finding immediate medical assistance is available on the Web site of the Department of Health and Human Services. All of these statements are medically and factually accurate. They have one purpose in mind: to give a woman the information she needs, including what to do if she wants to change her mind. There are doctors and nurse practitioners in Nebraska today who are helping women save their pregnancies after taking mifepristone. At the committee hearing we heard from Teresa Kenney, a nurse practitioner in Omaha who has assisted several women who came to her for help because they regretted taking mifepristone and wanted to save their babies. The committee also received a letter from a Dr. Robert Plambeck, an ob-gyn here in Lincoln who has attended several thousand births. He has assisted six women who-- who came to him for help. All six women delivered to term with healthy babies, including one set of twins. I have distributed Dr. Plambeck's letter explaining his experience and his support of LB209. I will read a letter from Dr. Britt Thedinger, who has written me a personal, in his personal capacity, a support letter for LB209: This help that is available to women who regret having begun the process of mifepristone abortion only helps

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women if they know about it. No woman should find out weeks or months later that she could have saved her pregnancy if she had known it was possible. LB209 gives women accurate information about all their options. This bill has broad support in the body and I have been encouraged by the support it has received from many doctors and nurses across the state of Nebraska. It gives women hope, control over their own medical treatment, and another opportunity to choose life. It gives a woman an opportunity to spare herself the pain and regret of a no longer wanted abortion, as well as the pain and regret of losing a wanted child. I'd like to extend my time now to Senator Lathrop if he would like to open on the amendment.

FOLEY: Thank you, Senator Albrecht. Senator Lathrop, you're recognized to open on the Judiciary Committee amendment.

LATHROP: Thank you, Mr. President. Colleagues, good morning. I think it would be appropriate to open on this committee amendment by giving you a little bit of a history of this bill and sort of the topic that we're going to deal with today. So when a medication abortion takes place, it is a two-step regimen. You should understand that this is only available in the first ten weeks, so these don't happen beyond that. This is something that happens in the first ten weeks of a pregnancy. It is a two-step process. You go in to the doctor. You meet with the doctor. You are advised of various things, and I'll talk about that in a little bit. The doctor administers one medication and, for the sake of convenience, because the two pills are a, hard to pronounce, and b, similar, I'm going to call it pill number one. You get pill number one in the office after you've been advised of various things that are required by-- some by statute, and those things that a doctor would normally tell a patient in the normal course of providing good medical care. You are then sent home with a second pill and advised to take that within 24 to 48 hours. When you do that, it is 95 percent effective in ending a pregnancy. If you don't take the second pill, research indicates that you have a 25 to 50 percent probability that you will go on and have a healthy pregnancy and-- and have a healthy child. So if you don't take pill number two, you can end up with a pregnancy or you might not. There is a 30 to 50 percent probability that you'll go on and have a healthy child. So when LB209 came to the committee, it basically required that physicians advise patients it may be possible to reverse the effects of a medication abortion. That's where we ran into a problem in the committee. We heard a great deal of testimony, colleagues, on this topic. We heard from those who are proponents. The proponents essentially

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told us that there was a study that supported the proposition that you can actually reverse one of these abortions between pill one and pill two. That study was done by a guy in California named Delgado. Dr. Delgado was not an ob-gyn. He was somebody that put a Web site up and had people come to him between pill number one and pill number two. Dr. Delgado would then administer to these women progesterone. Progesterone is a female hormone commonly given to high-risk pregnancies, so there's a little bit of logic to what this person was trying to accomplish. The problem was, the difficulty with the original bill was, is that there wasn't good science to support the connection between administering the progesterone. In other words, this was a case study, not a scientific study. He just gathered information. And you'll hear some criticism of that study. Senator Hunt handed out a paper that talks about the criticisms of this particular study by Dr. Delgado. But there was a little bit of a logic to it. If you take pill number one, we give you progesterone, some of these continue on to a healthy and a complete pregnancy with a healthy child at the end. So did those children or did those pregnancies continue on because pill number two wasn't taken or because they were administered progesterone? That's the science question. So as a committee what we learned was the bill, original LB209, would mandate that doctors suggest to a patient when they give them pill number one that it's possible to reverse an abortion. OK? That statement is not scientifically proven. We do know that if you don't take the second pill, you got maybe a 50 percent chance of your pregnancy going on. So what we ended up with was a constitutional problem with mandating something that had not been scientifically proven, hadn't been scientifically proven with any type of a study, and which some doctors don't believe. That's compelled speech. There is a-- a whole body of law on the First Amendment and compelled speech. You can't tell somebody you must say something that isn't true or you don't believe to be true. So we came up with a committee amendment. I should add that there's another criticism of LB209 that is not fixed with this amendment. There are an awful lot of people in the medical community that believe that the Legislature doesn't have any business telling them what they should have to tell a patient. OK? I believe what we've done in the amendment that I'll introduce in a second is tell them things that are factual, the things-- we've taken it away from the study that's not established scientifically and we have said that if you choose, after you take pill number one, you take pill number two home, if you change your mind, look at the Web site, look at the literature that we're going to send you home with, and you may be able to find somebody you can talk to about it. That's what-- that's what the amendment does. So what we do is get away from compelling a doctor to say something the doctor doesn't believe to be true and

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isn't scientifically established, compelled speech, a violation of the First Amendment, and we get to a place where the bill requires them to say something that is factually true. It's not about the reversal, the reverse. Reversing an abortion is gone. This is about whether, if you change your mind between pill one and two, find somebody and talk to them about it. The answer may be don't take the second one. You got a 30 to 50 percent chance this will go on to-- and-- and deliver a healthy child. That's the amendment. You can see we've taken care of the constitutional problem with the original version of LB209. We still have prescribing a script for the doctor to say during the course of care. Now, when we had an ob-gyn that came in from Planned Parenthood, that doctor told us, when Senator DeBoer was asking some questions, that doctor told us that we're going to go through the odds of if you take the first pill and you don't take the second one, we're going to cover what that-- what happens just in the normal course of providing quality medical care. So I think where we're at is a place where the amendment is actually factual. Where the train may jump the tracks is if HHS puts something on their Web site that's not scientifically accurate. But that we don't necessarily have control over. What the doctor will be required to say will be factual. And with that, I would be happy to answer questions on the amendment or on sort of the thought process of those of us on the Judiciary Committee that supported the bill and I look forward to the debate. Thank you.

FOLEY: Thank you, Senator Lathrop. (Visitors introduced.) Mr. Clerk. Debate is now open on LB209 and the pending committee amendment. Senator Slama.

SLAMA: Thank you, Mr. President. I rise today in support of LB209 and AM1402. I supported this bill in Judiciary Committee and still support the bill today on the simple fact that this bill gives women the information about medical assistance available if they change their mind during a chemical abortion. There have been some concerns raised about this bill, which I believe have been cleared up in the committee amendment, but I'd like to further address some of those concerns on the mike with the introducer of the bill. So if Senator Albrecht would like to yield to some questions, I'd be happy to ask her.

FOLEY: Senator Albrecht, would you yield, please?

ALBRECHT: Yes. Thanks.



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SLAMA: All right. Thank you, Senator Albrecht. So just to address some of the concerns with this bill, I'd like to ask first off does this bill require doctors to tell patients seeking abortion that medication abortion is reversible, dictating a practice that is not medically or scientifically supported?

ALBRECHT: Well, LB209, as amended, requires be told that that mifepristone, that first pill alone, is not always effective in ending a pregnancy. You can still have a viable pregnancy after taking mifepristone. If you change your mind and you want to continue your pregnancy after taking mifepristone, information finding immediate medical assistance will be available on the Web site of the Nebraska Department of Health and Human Services. And all these statements are medically and factually accurate.

SLAMA: Fantastic. So is LB209 an attempt to stigmatize or restrict reproductive healthcare?

ALBRECHT: No, LB209 is about one thing and that's informed consent. It's information only. There's only-- there's nothing in this bill that restricts abortion in any way. Saying that LB209 stigmatizes or restricts abortion is not only untrue, it's irresponsible.

SLAMA: So as amended, does this bill say, again with the committee amendment, does this bill say that physicians must tell their patients that it may be possible to reverse the effects of a medication abortion if she changes her mind but that time is of the essence? Is that included with the committee amendment?

ALBRECHT: As amended, LB209 only requires abortionists to inform patients that mifepristone alone is not always effective in ending a pregnancy and you may still have a viable pregnancy after taking mifepristone. And this is entire-- entirely factual information that women deserve to know.

SLAMA: So that information about the reversal pill and its potential is removed from this committee amendment, correct?

ALBRECHT: Correct.

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SLAMA: Correct. Great. We've also heard that this is a model bill from Americans United for Life that has been litigated or vetoed in many other states. Besides requiring physicians to lie to their patients, this bill also exposes the state to serious and costly legal liability. Is that correct?

ALBRECHT: Well, I've worked with local organizations to craft a bill specific to Nebraska's existing informed consent statutory framework for abortion. And suggesting that this bill is exposing the state to costly legal liability is nothing more than a scare tactic. There are eight states now with similar laws, Arizona, Arkansas, South Dakota, Utah, Idaho, North Dakota, Kentucky, and Oklahoma, including three in the Eighth Circuit, which is Arkansas, South Dakota, and North Dakota. Of those states in the Eighth Circuit, their laws have been challenged in zero of these states. Arkansas bill, which has been even stronger language than-- than ours has passed in 2015 and in the four years has had no legal challenges.

SLAMA: Great. So another question, a concern that has been asserted is that LB209 is a dangerous and unethical attempt to require doctors to misinform their patients and, thus,--

FOLEY: One minute.

SLAMA: --interferes with the doctor-patient relationship. Is that true?

ALBRECHT: I'm sorry. I was-- I was paying attention to my noise behind me.

SLAMA: No.

ALBRECHT: I'm sorry, what? Just repeat again what you--

SLAMA: So L-- there is an assertion that LB209 is a dangerous and unethical attempt to require doctors to misinform their patients and, thus, interferes with the doctor-patient relationship.

ALBRECHT: No, I don't believe it does.

SLAMA: So you're saying it has pretty broad support from doctors and nurses--

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ALBRECHT: Yes.

SLAMA: --across the state.

ALBRECHT: Yes.

SLAMA: Great. So there's also a concern that legislative mandates based on unproven, unethical research are dangerous to health. Politicians should never mandate treatments or require that physicians give their patients inaccurate information. What say you to that?

ALBRECHT: I say that it does not require treatment or require physicians to give their patients inaccurate information. It informs a woman of all of their options so that they can make their own choice. LB209 would--

FOLEY: That's time.

ALBRECHT: --require. Thank you.

FOLEY: Thank you, Senator Slama and Senator Albrecht. Senator Geist, you're recognized.

GEIST: Yes. Thank you, Mr. President. I just want to talk briefly about the pharmacology of-- of the drug mifepristone, and why progesterone is a safe and effective reversal of the effects of misop-- mifepristone. And I'll try to explain it in layman's terms, but first I'm going to use the correct pharmacological words so that you know that I know what I'm talking about, although I am going to read parts of it. Mifepristone is a competitive antagonist of progesterone at the progesterone receptor sites and it binds to the progesterone receptors twice as avidly as progesterone. Now what that means is if you pretend that this is a little site that produces progesterone, what mifepristone does is it inhibits or stops that site from receiving progesterone. When-- when that site no longer produces progesterone, it actually allows the uterine lining to quit detaching-- or attaching to the site. And then progesterone is introduced which actually turns that site or uncovers that site again so it actively produces progesterone again, which then allows that uterine lining to build up again and make a habitable site for the embryo to implant. This is a

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common practice, has been used for 50 years, not mifepristone and progesterone. Let me back up just a moment because what I just described to you is what commonly happens when a woman miscarries a baby. So it-- it-- when that lining is pulled away or starts sloughing off, that's when the embryo is deprived of air and nutrients, and so that commonly happens in a miscarriage. Progesterone has been used for 50 years to build up a risky pregnancy so it increases the ability of the uterine lining to implant the fetus. And so the reason that this, this process or this procedure is so effective is because it's actually just mimicking what physicians have been using all along to build up a risky pregnancy. I-- I did also receive information from Dr. Plambeck, who himself has done six-- has worked with six women who have-- have reversed the process of mifepristone and he has delivered six healthy babies using this exact process and I would say this exact safe process. Progesterone is a naturally occurring hormone that occurs in the body anyway, so they're just reintroducing a hormone into the body that will do no harm. If mifepristone has been taken and the embryo and the baby has already died, mifepristone-- I mean progesterone will not bring that baby back to life. So introducing progesterone into this equation will do no harm to the woman. So whether it-- it will only promote a healthier pregnancy if that mifepristone has been ineffective in the period of time it's been taken to reject--

FOLEY: One minute.

GEIST: --the embryo. So it is a do no harm, safe, and effective treatment to stabilize a risky pregnancy. And with that, I will yield my time back to the Chair.

FOLEY: Thank you, Senator Geist. Senator Erdman.

ERDMAN: Good morning. Thank you, Lieutenant Governor. I appreciate Senator Albrecht bringing this bill. Of all the bills that I have received e-mails on this session, this bill has to be at the top of the list. And I understand what Senator Albrecht is doing. I want to thank the Judiciary Committee for working with Senator Albrecht and bringing this amendment, AM1432. I am in support of both of those. The e-mails that I have received are very supportive, and they describe things such as Senator Geist just did. And I appreciate the opportunity we have to vote on something that will make a difference in a young person's life that had never done anything

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wrong. Senate Halloran brought that up last week on the bill that we discussed. But I would like to ask Senator Albrecht a question or two if she would yield.

FOLEY: Senator Albrecht, would you yield to questions, please?

ALBRECHT: Yes, I would.

ERDMAN: Thank you, Senator Albrecht. Senator Albrecht, this bill or a similar bill, similar language has been adopted in other states. Is that correct?

ALBRECHT: Yes.

ERDMAN: So when those other states have adopted this bill, has there been any repercussions legally, anybody challenge those issues in court?

ALBRECHT: I do understand that there have been some challenges in California, but they are not on my list. Arizona, Arkansas, South Dakota, Utah, Idaho, North Dakota, Kentucky, and Oklahoma are on my list.

ERDMAN: OK. I appreciate that. But I do appreciate you bringing this bill. You have brought other bills that have made sense before. And I do appreciate your conscientiousness of what's going on and I'm in full support of the bill and the amendment. Thank you.

ALBRECHT: Thank you.

FOLEY: Thank you, Senators Erdman and Albrecht. Senator Clements.

CLEMENTS: Thank you, Mr. President. I stand in support of LB209 and the amendment, AM1432. I wanted to share a couple of e-mails that I've received from constituents. First, a woman from Omaha wrote me a well-thought-out message. She wrote, I'm requesting you to support LB209 for the following reasons. LB209 is pro woman and pro science. Women deserve all the information regarding abortion to make a truly informed decision. This reversal protocol

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offers a real chance for the woman to rescue her child when she has changed her mind, as well as spell-- spare herself the pain and regret of losing a wanted baby. A small window of time, two to three days, exists for a woman to continue her pregnancy after starting a medication abortion. Informing her of all her options and where to find medical help if she changes her mind increases her chances to save her pregnancy. The short time frame makes early information extremely important. The reversal protocol already is being offered successfully across the country and in Nebraska. Informed consent is a staple of good medical practice in any procedure. A woman shouldn't have to find out later that she could have continued her pregnancy if only she had known it was possible. Please support women and unborn children by voting yes on LB209. Also I had a message from a medical doctor in my district. He says, Senator Clements, as one of your constituents I encourage you to support LB209 allowing a woman to keep her pregnancy if she changes her mind regarding an abortion. The American Association of Pro-Life Obstetricians and Gynecologists strongly supports a woman's right to choose to keep her pregnancy and to attempt to reverse the effects of a medical abortion which she no longer desires. The abortion pill reversal process is safe for both the mother and for her unborn child and offers a real chance for a woman to rescue her unborn child when she has changed her mind about abortion. Thank you for your support of this legislation. I was glad to hear from a physician that the procedure is safe and that a national ob-gyn association with 2,500 members supports it. I urge your support of AM1432 and LB209. I yield my time to Senator Arch.

FOLEY: Thank you, Senator Clements. Senator Arch, two minutes.

ARCH: Thank you, Mr. President. I wanted to respond to a comment or a phrase that was used by Senator Lathrop, and I think there is some misunderstanding as to research, medical research, science, how exactly these things-- the phrase was "scientifically proven." I am a-- I am a cosponsor of LB209 and strongly support this bill, but I just wanted to clarify what-- what exactly happens in medical research and particularly in clinical research as it relates to medication. We've-- we've received some information and-- and there's been some communication via e-mail as well that-- that there are certain associations that are calling for what I-- what-- what would be referred to as a double-blind, randomized clinical trial before anything could be prescribed, such as progesterone in this particular case; and in-- in case series with no control groups are among the weakest forms of medical evidence, those types of

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statements, and I just wanted to-- I just wanted to clarify that. A true experimental design to answer these research questions would have some ethical issues. And-- and-- and so a double-blind, randomized clinical trial is-- is being referred to as the gold standard. And in-- in a double-blind, randomized clinical trial, one group of patients, and in this particular case pregnant women, would receive a medication while another group, control group, would receive a placebo after-- in this process. Neither group of these patients would know whether they were taking the medication or the placebo, nor would the physician who administers the drug know, and that is the double-blind. So the patient doesn't know, the physician doesn't know. There's actually something referred to as like a platinum standard, and that is where the analyst that analyzes the data would also not know, so it's a triple-blind study and as believing that that would even be a stronger, a stronger--

FOLEY: Senator Arch.

ARCH: --experimental design.

FOLEY: That will conclude Senator Clements' time. You're now on your own time.

ARCH: Thank you.

FOLEY: Five minutes.

ARCH: So in this particular case, all the patients, volunteer, of course. They sign consent forms, neither know whether they're receiving the placebo or the medication in this type of an experimental design. And-- and the results of that, in-- in, of course, as we consider this particular situation with administering of progesterone, in some cases there would-- it would result in abortion, in other cases it would not result in abortion. And needless to say, an internal review board, the IRB, would have issues of the ethics of providing and not providing a placebo and all of this experimental design. So I-- I-- you're left then with-- with something that physicians call off-label prescribing. And I want to talk a little bit about off-label drug-- drug use as though in some-- in-- in some-- in some manner, in some fashion that the use of off-label prescribing is in some way inferior and should never be practiced by physicians, without this

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double-blind or triple-blind, randomized clinical trial. So I went to a publication from the "Mayo Clinic Proceedings," published in October 2012, "Ten Common Questions (and Their Answers) About Off-label Drug Use," and I just want to read a couple of statements here: Off-label drug use involves prescribing medications for indications, or using a dosage or dosage form, that have not been approved by the U.S. Food and Drug Administration. Since the Food and Drug Administration does not regulate the practice of medicine, off-label drug use has become common. It occurs in every specialty of medicine, but it may be more common in areas of medicine in which the patient population is less likely to be included in clinical trials, and listen carefully to this, for example, pediatric, pregnant, or psychiatric patients. Indeed, off-label drug use is common. Radley et al. reported in 2006 that in a group of commonly used medications, 21 percent of prescriptions were for an off-label use. So pausing there for a second, when the FDA approves the use of a medication, it is very, very narrow, very, very specific. It talks about a particular indication, it talks about a particular dosage. And that is what is finally, if-- if successful, approved by the FDA. Then the physician looks at that medication and reads the literature and says, but it appears as though that that medication is also useful for another indication at a different dosage. And using best clinical judgment, best evidence available, that physician then prescribes off-label. So I want to continue reading here: To limit liabilities, physicians should prescribe medications only for indications that they believe are in the best interests of the patient on the basis of the most credible available evidence. In an era of global exchange of medical information, this approach to physician prescribing practices may have greater utility than restricting practices solely to indications approved by a U.S.-based pharmaceutical labeling system, my comment, the FDA then approves just for that. Healthcare professionals should continually educate themselves about off-label drug use to weigh the risks and benefits and provide the best possible care for their patients. My personal experience with off-label drug use was in the area of child and adolescent psychiatric care. There are times that physicians, psychiatrists will prescribe antipsychotic medication that has only been tested with adults for the care of children and adolescents in their care. And that being-- that being said, the reason that is being done is they have seen literature, they have seen case studies, and so they use that as an understanding in their best clinical judgment to say that this has efficacy in the case of children and adolescents in specific cases.

FOLEY: One minute.



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ARCH: So physicians use that best-- their best clinical judgment. They-- they-- they use off-label drug use. As related to this particular bill, my only re-- my only reaction was to, well, it's not scientifically proven, and that is a-- the-- the-- the evidence of science is very broad. It can be used in case studies. It can be used in double-blind, it can be used in triple-blind, randomized. It can be used in off-label drug use. And so the-- the use of progesterone in this particular case for something that has not been FDA approved would not be that unusual, as the physician determines in their best clinical judgment, using the best available evidence. Thank you very much.

FOLEY: Thank you, Senator Arch. Senator La Grone.

La GRONE: Thank you, Mr. President. I rise in strong support of LB209 and I want to thank Senator Lathrop for his work in the on this. I think that the committee amendment puts the constitutionality of this bill beyond reproach. I think that it-- personally, I think it was constitutional prior to that, but this absolutely moves it to an area where there's no question whatsoever. So I think the Judiciary Committee did great work in that respect. I support this bill wholeheartedly because this is a bill about providing factual, truthful information to a patient, and I think any time we can do that it leaves us better off. So thank you, Mr. President.

FOLEY: Thank you, Senator La Grone. Senator Ben Hansen.

B. HANSEN: Thank you, Mr. President. I just want to say that I am standing in favor and I'm going to vote yes on LB209. I do appreciate the amendment, AM1432, that Senator Lathrop has brought forward to clear some things up. I think that makes this a better bill. And so I just want to talk a little bit maybe from a physician's standpoint a little bit about informed consent and why I think this bill is a good informed consent bill. First, I'm just going to read a little bit of a definition about informed consent. And this one comes from the American Medical Association. So the process of informed consent occurs when communication between a patient and physician results in the patient's authorization or agreement to undergo a specific medical intervention. In seeking a patient's informed consent, physicians should, A, assess the patient's ability to understand relevant medical information and the implications of treatment alternatives and to make an independent, voluntary decision; and B, present relative information accurately and

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sensitively, in keeping with the patient's preference for receiving medical information. The physician should include information about the diagnosis, the nature and purpose of recommended interventions, and an important one here, the burdens, risks, and expected benefits of all options, including foregoing treatment. So this is something that we do deal with all the time, physicians do, lawyers do, wealth management people do, about making sure that the patient or the client understands the treatment that they're getting, all options available to them, the risks, the benefits, and that's what I think this kind of falls into. This is making sure the patient understands where they can get information about a reversal to a treatment that they-- that they got. I think this is very important not only for the patient-doctor relationship but also for, you know, the child that's involved. And so anybody who knows-- who's-- who's been on HHS Committee with me or anybody who's brought a bill in front of HHS Committee understands my reluctance quite a bit to ever get the government involved in the patient-doctor relationship unless it's absolutely necessary. And I think this bill falls in that category of appropriate intervention by making sure that the patient gets the accurate information and all options available to them. Thank you, Mr. President.

FOLEY: Thank you, Senator Hansen. Senator Pansing Brooks.

PANSING BROOKS: Thank you, Mr. Lieutenant Governor. Well, I rise in opposition to LB209. I voted against the bill in committee. A large part of it is due to my belief that we are not free until we can make all decisions about our lives and our futures and not have the heavy hand of government weighing in on those decisions. I believe that any kind of attempt by-- by the people in support of this bill is inflammatory, it's deceptive. We heard many pieces of information about the fact that this is bogus science, that this is not appropriate, and that the language is being brought nationally to score political points. I believe that it's important that we are informed in our healthcare that there are studies and actual science supporting any kind of decisions that we as a government make regarding a woman's healthcare. These are attempts to shame women. And until you've walked in the shoes of another, I don't believe it's up to us to-- to make that decision for someone. Again, we had discussions today saying that this is accurate information. But you weren't at the hearing, and-- and the opposite side says this is not accurate information. I've had a couple people that I've talked to, that are friends that are pro-life, or excuse me, antiabortion, because I am pro-life. The antiabortion friend said this gives false hope to require

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this language, to give some sort of hope that if somebody changes their mind. I'm not against a doctor informing, but I am against this kind of imposition on speech. The U.S. Supreme Court's precedence, there's a court case, NIFLA v. Becerra, and in that case, quote, the U.S. Supreme Court precedents have long protected the First Amendment rights of professionals. For example, the court has applied strict scrutiny to content-based laws that regulate the noncommercial speech of lawyers, professional fund-raisers, and organizations that provide specialized advice about international law. Moreover, the court has stressed the danger of content-based regulations in the fields of medicine and public health where information can save lives. The dangers associated with content-based regulations of speech are present in the context of professional speech. As with other kinds of speech, regulating the content of professional speech poses the inherent risk that the government seeks not to advance a legitimate regulatory goal but to suppress unpopular ideas or information. A disclosure requirement cannot be unjustified or unduly burdensome. The U.S. Supreme Court's precedence required disclosures to remedy a harm that is potentially real, not purely hypothetical, and to extend no broader than reasonably necessary. Broad prophylactic rules in this area have been rejected. Otherwise, they risk chilling the protected speech. Importantly a state has the burden to prove that disclosure requirement is neither unjustified nor unduly burdensome. And as a reminder, just this year the Governor in Kansas has vetoed a similar bill saying the practice of medicine should be left to licensed health professionals and not elected and not elected-- not elected officials. And with that, I'll give the rest of my time to Senator Hunt.

FOLEY: Thank you, Senator Pansing Brooks. Senator Hunt, 50 seconds.

HUNT: Thank you, Mr. Lieutenant Governor. And thank you, Senator Pansing Brooks. Colleagues, Senator Albrecht and I agree that we care about women who change their mind about abortions. Abortion is one of the medical procedures that has the highest level of decisional certainty, and study after study that's repeatable and scientific and peer-reviewed has shown that over time, that there is no other medical procedure that has a higher level of decisional certainty at 98 to 99 percent of women having certainty that this is a procedure they want to go through with. But those 1 to 2 percent of women who change their minds, who have regrets, I care about them and I want to make sure that they aren't lied to. We should show

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compassion for those women and we should make sure they are not lied to or given false hope for a treatment that just has not--

FOLEY: That's time, Senator.

HUNT: --been shown not to work.

FOLEY: That's time. Thank you, Senator Hunt. Senator Lathrop, you're recognized to close on AM1432.

LATHROP: Thank you very much, Mr. President. Colleagues, I would encourage your support of AM1432. I believe it addresses the constitutional challenges that were presented in LB209 as introduced. Thank you.

FOLEY: Members, you heard the discussion of AM1432, Judiciary Committee amendment. The question before the body is the adoption of the amendment. Those in favor vote aye; those opposed vote nay. There's been a request to place the house under call. Question is, shall the house go under call? Those in favor vote aye; those opposed vote nay. Record, please.

CLERK: 27 ayes, 3 nays to place the house under call.

FOLEY: House is under call. All members please return to the Chamber and record your presence. The house is under call. Could all members please return to the Chamber. The house is under call. Senator Erdman, if you can you check in. Senator Groene, if you can you check in. Senators Kolterman, McDonnell, and Chambers, please return to the Chamber and check in. House is under call. Senator McDonnell, if you could please return to the Chamber. Senator Albrecht, at this point we're lacking Senator McDonnell. We could wait or proceed. We'll wait. All unexcused members are now present. Senator Albrecht, how did you wish to conduct this vote? Roll call vote has been requested on the adoption of AM1432. Mr. Clerk, please call the roll.

CLERK: (Roll call vote taken.) 39 ayes, 3 nays on the adoption of committee amendments.

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FOLEY: The committee amendment, AM1432, is adopted. I raise the call.

CLERK: Mr. President, Senator Howard would move to amend with AM1524.

FOLEY: Senator Howard, you're recognized to open on your amendment.

HOWARD: Thank you, Mr. President. When I was reviewing this bill on Friday, I realized that there was something missing in the areas around the department's-- the department's role in-- in some of its oversight of-- of this, it's not a procedure, of this service. So annually since the '70s the Department of Health and Human Services has collected data on abortion statistics, the statistical report of abortions in the state of Nebraska. And so because this is abortion related, upon reviewing this bill it seemed appropriate that the services that were provided in this bill would also be included in that report. So it mirrors what's already in our abortion statutes. There's broad agreement. I've given it to the introducer and some of the individuals who put together the-- of the committee amendment agreement. And because the data on this service in particular is very minimal, if Nebraska providers are going to be offering it, it's important that we record it to help provide more data. Had this bill gone through our committee, we most likely would have also included this data reporting requirement. We already collect data on prescription drugs and diseases through public health and immunizations and a host of other things. We have a birth defect registry and a child and maternal death review. And so all of this would then-- this service would then be included in the statistical report on abortions. I don't anticipate any concerns around this, adding this reporting requirement. If you'd like, I have the report here if you'd like to review what we already are collecting. But otherwise, I would urge the adoption of AM1524. Thank you, Mr. President.

FOLEY: Thank you, Senator Howard. Debate is now open on the amendment. Senator Hunt.

HUNT: Thank you, Mr. Lieutenant Governor. Where to begin? This is the-- this is the level I'm at. I could just start anywhere here, but let's-- let's-- I'd like to start with a couple questions for Senator Albrecht. Would you yield?

FOLEY: Senator Albrecht, would you yield, please?

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HUNT: Thank you. So you say you're-- you're bringing this bill, LB209, so that women have all the options available to them. Is that correct?

ALBRECHT: Yes.

HUNT: You said in your opening statement when you brought the bill that it was about choice. Is that correct?

ALBRECHT: Yes, it is.

HUNT: And it's about informed consent?

ALBRECHT: Yes, it is.

HUNT: And you're doing this to protect women's health.

ALBRECHT: Yes.

HUNT: OK. So this bill is inform, you know, not the-- not the committee amendment that we just adopted necessarily but the original bill, LB209, that you brought, the green-copy, was informed by a study, right?

ALBRECHT: You're asking me if we're amending in 14--

HUNT: No. When you brought LB209, it was-- it was informed by a study by Dr. George Delgado, right?

ALBRECHT: Yes, LB209 was, yes.

HUNT: OK. Have you had a chance to read this paper?

ALBRECHT: Yes, I have.

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HUNT: OK. Well, I am-- I'm having the pages distribute this paper right now because I have some questions about the methodology and the findings in this paper, and I think that we need to talk about that a little bit. So while that's being passed out, I just want you to consider the weight of the responsibility that we have here that passed laws that affected 2 million people, nearly, in Nebraska to know exactly what it is that we're voting on. And if we're adopting policy that's based on science or if we're just not, then we should be familiar with the study that this is based on. So first to explain this, I'm going to go through this study a little bit. So the most alarming thing to me is on page 4 of the study where it says this is an observational case with-- case series with data analysis that received an institutional board waiver, an institutionally review board waiver. When I read that I literally-- I was like what? in front of a whole room of people. So the institutional review board is a the university's ethics review board. It's completely unconscionable to me that a science-- that a scientist would do a study providing medical advice or care with real humans without the review of the IRB which ensures that human subjects who were involved with the study are protected and they're not harmed by participating in the research. I seriously cannot imagine the rationale for this. I'm so alarmed that I actually wrote to the university of San Diego about the footnote in footnote 33 to see if they really did receive a waiver, because it's seriously so evil to do a medical study on patients without appropriate oversight, and this is especially true for a doctor who claims on his Web site to have an ethical approach to female reproductive healthcare and respect for the dignity of human life. I was so disturbed by the ethics of this study that I checked on that with the University of San Diego. And they did, in fact, confirm that this is a study that was done without approval from an institutional review board, without any ethics committee oversight. And in fact, colleagues, this is not a study. This is not a scientific study. The journal where this was published in, it-- it publishes antiabortion papers. It publishes antivaccine papers. The journal that this appeared in is not respected by anybody in the mainstream medical community, and that needs to be a big red flag for us. And in Nebraska, if we're serious about protecting life, I think that we could be leaders in pro-life culture in the whole country if we, as a Legislature said, you know, if there's evidence that progesterone can help a woman continue her pregnancy for those 1 to 2 percent of women that we do have compassion for, who we do want to protect and--

FOLEY: One minute.

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HUNT: --and support, we want to know that that's actually true. We've heard people say up here that there's no ethical way to conduct that study. That's something that Dr. George Delgado said himself about why he conducted this study in the way he did. He said there's actually no ethical way to do this. In fact, one of Delgado's biggest critics is doing a study. And I can sort of explain in layperson's terms how this study is going to work and I'm going to take some more time on the mike to explain that as well. So the way this study is going to work is the-- the researcher is going to take a pool of women who do want to have abortions, who have that absolute decisional certainty, who definitely want to go through with the procedure. He's going to give them mifepristone, the first drug, and then administer the progesterone treatment that this bill purports works, that this bill is telling Nebraska physicians and--

FOLEY: That's time, Senator.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator Albrecht.

ALBRECHT: I just rise in support of AM1524 and I do believe it's a very friendly amendment. I'm excited to be able to find out how many births are actually reported as continuing the birth instead of aborting it. But while I have the mike I am going to stand to say that while, Senator Hunt, I understand you have your views on this bill, but when we put the amendment in, that took the authority of whoever's doing that abortion not to have to talk about the study. And that's one of the big reasons that we amended as we did. So I hope everyone will rise to vote for AM1524 and move on to LB209. Thank you.

FOLEY: Thank you, Senator Albrecht. Senator Lathrop.

LATHROP: Thank you, Mr. President. Colleagues, I want to echo what Senator Albrecht just said. And really this is an amendment offered by Senator Howard to-- to take care of probably an oversight by the Judiciary Committee when we go into this area we probably should be amending, or we should be amending. This is sort of a Health Committee catch, if you will, and I



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appreciate Senator Howard amending it into LB209. I think it's altogether appropriate. Thank you.

FOLEY: Thank you, Senator Lathrop. Senator Lowe.

LOWE: Thank you, Lieutenant Governor. I am standing in support of LB209 and AM1524. The committee amendment took care of the study. The study is no longer referred, as the committee amendment took care of that. So along the line of the bill, yeah, we're-- we're giving women a second choice, a second choice to reevaluate what they just did and maybe take time to think, think about how their life might be affected either way. I think that's a good thing. We're also giving a second choice to a little baby and that is a very good thing. Thank you, Mr. President.

FOLEY: Thank you, Senator Lowe. Senator Pansing Brooks.

PANSING BROOKS: I'm going to waive right now. [INAUDIBLE].

FOLEY: Waives the opportunity. Senator Cavanaugh. Senator Cavanaugh.

CAVANAUGH: Thank you. I rise in support of this committee amendment. I sit on the Committee of Health and Human Services, and I appreciate Senator Howard, the Chair of the committee, doing this important work to make sure that we have reporting and that we are tracking what this bill does to the women that we are talking about. I'm looking at the amendment right now, and I think it's a good reminder to have thoughtful legislation in public policy, making sure that the name of the attending medical professional is tracked. Who-- who's conducting these services is really important and what the outcomes are. And I know that this is something that we do in other areas, so I appreciate Senator Howard and Senator Albrecht working together on this amendment to make our public policies just a little bit stronger. Thank you.

FOLEY: Thank you, Senator Cavanaugh. Senator Howard, you're recognized to close on AM1524.

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HOWARD: Thank you, Mr. President. And I appreciate everyone's courtesy around this. I realized it on Friday after I reviewed the amendment, because I hadn't seen the amendment, and talked it over with my staff. So-- and then sort of ran around today and made sure everybody had a good look at what we were adding into Section 28-345, which is just adding on to our current-- our current reporting requirements. So just for a bit of history, because I really like history, we've actually been reporting on this since 1977, with a few revisions in 1978 and '79. And then the reports that you can find on-line, just in case you're curious, really on-line we start in 2000. You can see sort of how many abortions were performed, whether there was an emergency situation. We did remove-- the initial legislation in 1977 included like a woman's marital status and we removed that in 1979, which was really great. It talks about sort of the methodology that's used. That's how when we're talking about 55 percent of abortions performed in the state of Nebraska are using medication or medication-assisted. The way that we know this is because of this report that we're receiving annually. And so in looking at the contents of LB209, it really fits appropriately into the report that we're already collecting. And really it's just a reiteration. My other expectation is that there shouldn't be a fiscal note by adding on-- adding this into the report because we're already doing the report. The form already exists through the department so it's just adding sort of an additional line on to the form. So I actually really appreciate everyone's courtesy in this simply because had this gone through HHS we probably would have caught this and added it to our data reporting. And with that, I would urge the adoption of AM1524. Thank you, Mr. President.

FOLEY: Thank you, Senator Howard. Members, you heard the debate on AM1524. The question before the body is the adoption of the amendment. Those in favor vote aye; those opposed vote nay. Have you all voted who care to? Record, please.

CLERK: 35 ayes, 0 nays on adoption of Senator Howard's amendment.

FOLEY: AM1524 is adopted. Items for the record, please?

CLERK: Mr. President, bills read on Final Reading this morning were presented to the Governor at 11:15 (re: LB304, LB428, LB445, LB556, LB556A, LB638, LB663, and LB698). Mr. President, Senator Cavanaugh would move to recess the body until 1:30 p.m.

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FOLEY: Members, there are four of you in the speaking queue. We'll hold that queue and pick up with Senator Pansing Brooks when we return. The question before the body is to recess. Those in favor say aye. Those opposed say nay. We are in recess.

RECESS

FOLEY: Good afternoon, ladies and gentlemen. Welcome to the George W. Norris Legislative Chamber. The afternoon session is about to reconvene. Senators, please record your presence. Roll call. Mr. Clerk, please record.

CLERK: I do have a quorum present, Mr. President.

FOLEY: Thank you, Mr. Clerk. Do you have any items for the record?

CLERK: I have nothing at this time, thank you.

FOLEY: Thank you, sir. (Visitors introduced.) Senator McDonnell, for what purpose do you rise?

McDONNELL: A point of personal privilege.

FOLEY: Please proceed.

McDONNELL: Thank you, Mr. President. LR487. Whereas Senator Terry Carpenter, representing Legislative District 48, introduced LB15 during the Eightieth Session 1969; and whereas LB15 was cosponsored by William K. [SIC] Skarda, Jr., District 7, Senator Eugene T. Mahoney, District 5, Senator Bill K. Bloom, District 20, and Senator Henry F. Pedersen, Jr., District 4; and whereas, LB15 established the right for public employees to collectively bargain for wages, safety, and benefits; and whereas LB15 was approved on April 29, 1969, and 2019 will mark 50 full years of collective bargaining rights for Nebraska public employees. Now, therefore, be it resolved, by the members of the One Hundred Fifth Legislature of Nebraska, Second Session, that the Legislature designates April 29, 2019, as Public Employees Collective

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Bargaining Day in Nebraska; that Nebraskans are encouraged to recognize, commemorate, and celebrate the history and importance of collective bargaining in the state of Nebraska. Fifty years ago in this room senators stood, made a decision to bring meaningful democracy to the workplace for public employees and it changed their lives and it changed out state for the better. Thank you for these people that do the work every day to help our state be the best possible state in the country. Thank you.

FOLEY: Thank you, Senator McDonnell. Members, we will now proceed back to debate on LB209 where we left it. Senator Pansing Brooks, you're in the queue first.

PANSING BROOKS: Okay. Thank you, Mr. Lieutenant Governor. Well, over lunch I had a number of people say, well, this is just innocuous. Why are you concerned about this legislation? What is it doing? I can't understand why you are making any kind of-- why you're standing up and making any comments on this whatsoever. But of course, that's partly because not everybody is listening fully. This legislation is based on science that has not been proven. I used the word "bogus" and I'm not trying to be critical of Senator Albrecht who believes that this is, is something of value. It's always valuable for physicians to be-- to be open and communicative with their patients about what it is that they are doing, what kind-- what kinds of things they're prescribing, what kinds of things-- any kind of medical surgery or anything that they're doing there should be communication. But again, I don't think it's innocuous when we have no proof over the fact that this science is real. And that's what's concerning to me. And it's pretty easy for everybody to sit back and say, oh, so let the doctors go ahead and, and, you know, tell the women what's what. Well, why aren't we telling the men what's what? What about-- what about vasectomies? I think we better have informed consent on vasectomies pursuant to our laws and require each man to fully understand that vasectomies are reversible. Why wouldn't that be something that we're putting into law. Where is that? And I think we will get an amendment coming up at some point on that, fortunately, because I think that's really important for men to be fully able to know that vasectomies are reversible. So, you know, we need to fill up our state statutes with informed consent and requirements about what should be told to every single patient. How about cancer? So for cancer, many of the treatments are very toxic. So we need to have informed consent written into our statutes because, you know, people-- the doctors aren't going to give us information. And, you know, especially I think the women are very susceptible

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to being tricked by the doctors. You know, we are the weaker sex and-- sorry to be smarty about this, but this is aggravating to me. I am aggravated about the fact that we have to protect the women. Thank you so much, men, for protecting the women on an issue that isn't your business when that woman walks into the medical doctor's office. Okay? I trust my doctor. And you know what? If I want my minister or my priest to go into that office with me, I have that right. But I think it is audacious to say that women can't make their own medical decisions or they need to be helped along by the government to tell them how to do this. And so, again, I'm ready to start bringing all sorts of bills on informed consent to make sure that men can really understand their medical actions as well. We want to make sure that you're all safe and I'll protect you all as well, because really when you walk into a doctor's office it's very confusing for you, too. So I think that will be important for us to do in the future. The other reason that I'm aggravated about that is a year ago the Louisiana legislature had a similar bill. I have a question, please, for Senator Albrecht, if she'll answer it.

FOLEY: Senator Albrecht, would you yield, please?

ALBRECHT: Yes, I would.

PANSING BROOKS: Thank you, Senator Albrecht. So I presume you're aware that in 2016 the Louisiana legislature was close to passing a bill very similar to this.

FOLEY: One minute.

ALBRECHT: No, I'm not aware of that, but go ahead.

PANSING BROOKS: OK. They-- and instead, they passed a resolution-- so I guess I'll pass this out to everybody because it was just-- they have a, a, they had a bill and in April 12, 2017, came up with a decision that their-- the very last statement-- and I will pass this out and we'll talk about it more-- says that the Department of Health finds that there is neither sufficient evidence nor a scientific basis to conclude that the effects of an abortion induced with drugs or chemicals can be reversed. That was pursuant to the exact same kind of bill that we're trying to pass here today. So is this science or myth? Thank you, Mr. Lieutenant Governor.

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FOLEY: Thank you, Senator Pansing Brooks. Mr. Clerk.

CLERK: Mr. President, Senator Hunt would offer a priority motion and that motion would be to recommit the bill to committee.

FOLEY: Senator Hunt, you're recognized to open on your motion.

HUNT: Thank you, Mr. Lieutenant Governor. I think that Senator Pansing Brooks raised some good points about informed consent. And the number-- just to use her analogy, the number of men who go in to get a vasectomy and don't have knowledge that there's a procedure that they can go through later to reverse the vasectomy, the number of men who don't know that when they get that procedure is zero. They all know that. We don't have to put a law in statute, we don't have to put any language in our statutes that say, doctors need to inform men about all their options, everything they're missing out on, show them the video, give them the pamphlet if they want to have a vasectomy, because men already know that. And they know that because doctors are already propagating that information. The same thing is happening when women go through a medication abortion before ten weeks of pregnancy. They go into the doctor's office, they take the first drug in the doctor's office-- which I brought a bill this year to allow them to take that drug at home, which I believe would reduce the number of abortion, actually. But they take that first pill in the doctor's office. The doctor says, if you don't take the second pill, this is the likelihood that you will continue your pregnancy. And after you take the second pill at home you're going to come back into the office and we'll do an ultrasound and we'll figure out what's going on with your pregnancy and how we can continue to care for you as a patient. That is the business that goes between doctors and patients and nobody in this body here is qualified to write a bill to interfere with that. Senator Pansing Brooks also talked about the importance of trusting doctors and trusting our healthcare providers to give a high standard of care. In Nebraska, we certainly trust our doctors. We have an amazing medical community. During the committee hearing one testifier, Dr. Sofia Jawed-Wessel, she testified: As a public health practitioner, one of my duties is to undo some of the damage that previous generations of public health practitioners in the medical field have done either intentionally or unintentionally that has led to pretty significant mistrust of the medical field. Mistrust in our line of work is common. It's something we have to deal with on a regular basis. And while it might seem like this bill on its

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surface would increase trust because it's telling women about quote all their options unquote, LB209 is actually harmful to public health and makes my job a lot harder because it forces providers to essentially mislead their patients instead of giving them accurate information. So let's take our colleague's argument in good faith and at face value and let's look at the evidence that they're bringing to the table to support this question. So supporters of this bill have cited this paper which they believe "validates" the science informing this bill. So let's take a look at that paper to consider and evaluate this claim. I passed out this study to everybody. It's called "A Case Series Detailing the Successful Reversal of the Effects of Mifepristone Using Progesterone." This is by George Delgado, M.D. This is also a later version of the study, because the first version of the study was of course retracted and it also had typos on the first page. So that's a clue about how seriously those people are taking their work. So here's my thoughts on the science. This is a study of women who take the first drug of a two-drug protocol and then call a hotline to have it reversed. Everyone in the study, according to the authors, wanted to reverse the procedure. So the authors of this study then administer, instead of the second drug, a different drug, the treatment drug, which in this case is progesterone, which is intended to reverse the pharmacological process initiated by the first drug. The treatment drug, the progesterone, was administered in a variety of ways: intramuscular injection of progesterone in oil; oral administration of micronized progesterone; vaginal use of oral micronized progesterone capsules; compounded micronized progesterone vaginal suppositories; progesterone vaginal gel; and progesterone vaginal suppositories. Which, again, how can you do this procedure as a part of an experiment without oversight of an ethical review board. I'm so disturbed by this. So this raises a lot of questions about scientific validity because the whole principle of the scientific method is to hold everything constant in a study and just vary one thing. So that's-- that's when you have a control group and then in the experimental group you just change one little thing. And then you can monitor the outcomes and effects in the patient when you change that one thing. But in this study, they vary a whole bunch of things. I read all those things off. You don't have to know what they are. The point is that this is not a scientific study, so we can't base statute off of it. Even if you're antiabortion, even if you're pro-life, this is not something that we can put into statute, because it's interfering in the doctor-patient relationship, it's not based on science. So in this study they go on. They then compare the survival rate of these women-- the rate that they continue their pregnancy, I should say, to a quote comparison group, which the authors select to be the average rate of continuing a pregnancy in some population of women who only

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take the first drug. Of course, the comparison group, which is sort of a pseudo-control group-- this comparison group is a different population with a different set of circumstances. For example, who knows why these women took the first drug and not the second drug. We don't know if these women went on to get a surgical abortion. We don't know anything about this control group because they don't explain that in their methodology. This is not a scientific study. If this was true scientific study there would be double-blind randomization among the women enrolled in this study who wish to reverse and they would randomize the placebo in a treatment that is unknown to both the doctor and patient. And I heard Senator Arch talking a little bit about this and why this wouldn't be ethical to do. And when I get more time on the mike, I'm going to under-- I'm going to explain a scientific study that's underway now that's being done ethically with a review board under the University of San Diego, I believe-- no, UC-Davis. So when I get more time on the mike, I will talk about that. Anyway, back to this study, the problem about talking about the ethics of this study and how it couldn't be done ethically-- so this is the only acceptable evidence that we could possibly get to show that abortion reversal is real is that you could say that about any drug. You could say that about any cancer drug, for example. You could say, it's ethical to give a placebo to a cancer patient because they're facing a life threatening condition. It's unethical to give drugs to patients that haven't gone through scientific evaluation and it's unethical to enroll human subjects in an experiment without the oversight of an ethics board, without an IRB. The hypocrisy is just unconscionable and it does not belong in statute. So back to this study, let's look at the results. They're-- let's look at the results that they start to share on page 11. And there's so many problems with this I don't really know where to begin. They say themselves that they only include women in this study if the fetus has already survived the 72-hour mark after the first drug, which means they are potentially selecting the fetuses that were going to survive anyway to give them the treatment. So this totally changes the pool of subjects that they're studying. They say in the study that if-- they perform an ultrasound and if the fetus has already been terminated, they remove them from the study group. So that's-- puts the results completely out the window. Yeah, as they say in the study, they quote, is it possible that those embryos that were alive at the time of the sonogram may have survived without progesterone therapy? They say themselves, this is total bull hockey. There's no such science. They're not proving anything. Also, notice that the 1,668 calls received by the hotline for women who had taken mifepristone and who were interested in reversal, of all those woman who said they wanted to reverse their pregnancy-- or their abortion, only 45 percent actually initiated progesterone



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therapy. So this suggests to me that these women changed their mind about reversal or they were never interested to begin with. Also, of the remaining women who are included in this study, 15 percent went ahead and got an abortion anyway-- of that 45 percent. This is a lot of numbers. I don't think anybody is following me, but it's important to get on the record why this science is junk and why we can't base statute off of it. This-- these numbers adding up is really problematic because the survival rate of fetuses is lower in this group. So by dropping them from the analysis, by these authors not even considering them in the group, they're inflating the effect of the drug they're administering. So if they say--

FOLEY: One minute.

HUNT: Thank you. If they say that the survival rate of the fetuses in this group that they tested with the progesterone is X, we know that that's an inflated number because the study wasn't conducted in a scientific way. Page 11, first sentence, first paragraph on the page: One potential confounding variable is the use of ultrasound to select for living embryos prior to the first progesterone dose. This is a major confounding variable, because if ultrasound was used to see which fetuses were still viable before proceeding, the results are completely null. There were no actual methods or procedures followed here. All these doctors just did whatever they wanted with a drug that had never been approved for the FDA for this use. Nothing was standardized, not even the information that was collected on what each doctor did. This was not a scientific study. It would be just as effective based on research from the manufacturer of the drug to give these women a handful of Skittles--

FOLEY: That's time, Senator. But you're next in the queue.

HUNT: I would-- thank you.

FOLEY: You're next in queue. You may continue.

HUNT: --to give these women a handful of Skittles and say, don't take the second drug, they're just as likely to continue their pregnancy. The right thing for us to do as a body is not put anything in statute about what physicians have to say to their patients, because physicians who

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perform these procedures already know. They already inform their patients about these things. We already have informed consent. The thing that a patient needs to do, that 1 to 2 percent of patients that we do care about, that we have compassion for, we don't give them false hope by saying, you know, if you come in and you regret your decision and you'd like to reverse it, guess what? You can. You can. There's a way for you to do that thanks to science. We're telling them some BS. There's no such thing. And we're giving those people false hope instead of giving them compassion and care that they really need. What they need to do is go back into the doctor, induce vomiting, and not take the second drug. And then that clinician or doctor can care for that woman and her pregnancy in the way that the doctor and the patient need. Not in the way that the Nebraska Legislature says that they need. So in this study the information about the ultrasounds totally inflated the results of this study. It's a huge compounding variable. Overall, this study is enraging. But I also really dislike the language "abortion reversal." This isn't reversal of anything. This is just finding a second medication to counteract the effects of the first medication. So imagine I take an aspirin and regret taking the aspirin. I know a lot of you are going to have a huge problem with me comparing an abortion pill to aspirin, but go with me. A scientist could come along and say, you know what? We need a medication to help people who regret taking aspirin. This is fine with me, personally. I don't have a problem with it. We can find medications to reverse the effect of any medication. I think that would be a great use of modern science, a great use of our research grants, something worth studying on everything. But if we think this is a good idea, and I do, then go through the scientific process of evaluating the medication with the proper oversight. Don't trick people into enrolling into a study that's not properly supervised, that has no ethical review committee, that has no IRB board, and then base statute off it that we then have to clean up with a committee amendment. You know why we had to clean that up with that amendment, because this bill was coming out either way. I believe that Senator Albrecht has 33 votes for cloture on this. I know she has 25 votes on this bill to pass it along. And that's why I took such an interest in it, because I knew it was going to get pulled out of committee. So I'm very happy that the committee amendment is on there. I think that it makes an evil, horrible bill a little less bad. But I, I want on the record and I want Nebraskans to see in the future as this pseudoscience continues to be debunked that the Nebraska Legislature did not speak with one voice on this issue, that being antiabortion does not mean anti-- does not mean being anti-science, but that's the way the Nebraska Legislature voted. We acknowledged on the floor this morning before lunch that the science is flawed in this study. You were all ready to

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pass this bill in its original form. Twenty-five of you signed onto it thinking that this was good science. And I know how it works in the first ten days. You bring your little bills around and you say, do you want to sign this? This is a transparency bill for blah, blah, blah. Do you want to sign this? This is climate change, blah, blah, blah. Do you want to sign this? This is pro-life. And you can't swing a cat in here without hitting someone who wants to sign a pro-life bill. So you all signed onto it because you thought it was pro-life. You didn't care about the science behind it at all. We fixed it for you with that committee amendment so it's not going to hurt as many people as it was going to. And it's probably going to pass anyway.

FOLEY: One minute.

HUNT: But it's important to me that people in Nebraska see that we did not speak in one voice on this bill and that those of you who voted for this bill, knowing the junk science, knowing that there's no basis to say that progesterone can reverse anything. We could bring an amendment to this bill that says, if you lay on your back in a pool of saltwater with rose quartz crystals on your forehead, it would have the same effect. If I brought an amendment that said, if you offer thoughts and prayers to a patient, it will have the same effect. And that's why this is something we can't put in statute. Not only can we not do things based on science, we cannot put anything between the doctor-patient relationship. Senator Albrecht said that this bill is about informed consent. If this bill was about informed consent, it would clearly state that the evidence for this being effective is poor and that it is not the standard that the FDA follows for drug approval. And it is providing disinformation.

FOLEY: It's time, Senator. It's time.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator Howard.

HOWARD: Thank you, Mr. President. I won't weigh in too much on the bill itself right now. I think what I want to talk to you a little bit or speak to you a little bit is my deep, deep disappointment with the Nebraska Medical Association. Not, for changing there-- well, actually

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for changing their position. So last year this body considered a mandate, because obviously I don't have problems with the mandates, that required physicians to talk to a person when they are prescribing an opioid, to let them know that opioids are dangerous. It was a law that had been passed in several other states. It is basically when you go to get the prescription the physician has to say, just so you know when you are picking up your opioid these are highly addictive. And there are some-- I mean, it's in-- we passed it. But, as many of you know, when I talk about opioids I have a very hard time. So I bring a bill. I tell this terribly sad story. And the next testifier comes up from the NMA and says, we are opposed. Don't tell us what to do. And I was like, you have got to be kidding me, because is this something that-- it's sound. Right? We know that opioids are dangerous and we know that you should tell people that you can get addicted to them. And then the Medical Association came in because they are blanket opposed to mandates. The next bill that we had was around a cap for minors, because we know that with children their brains are developing. And so when we give an opioid to a minor, it's far more likely that they'll get addicted more quickly because their brains are still developing. And so when they need the receptors that are in narcotic medication, it actually alters their brain chemistry. And their brains start thinking that they need the opioid to live their daily lives. And so we suggested-- and, spoiler alert, last year we passed-- a cap on opioid medications for kids. And so I get up and I talk about this bill and I tell this very difficult story. And the very next person to testify is the NMA. And they come up and they say, we oppose mandates. This seems like a worthy thing. There's a lot of science. We oppose mandates. So I am deeply disappointed with the Nebraska Medical Association for not just sticking to their word, man. I mean, the thing is, is it doesn't matter the merit. Obviously, we know opioids are bad. This Legislature agreed that opioids were bad. But the Medical Association changed their position on this. I do not know why. I don't care why. But if you have a position about mandates you should stick to it and you shouldn't go willy-nilly moving around, and you shouldn't be sending me personal e-mails about your personal thoughts when you're representing the Nebraska Medical Association. It reduces your credibility as an association that comes to my committee very regularly, that I have worked with so much and have a lot of respect for. But it-- you don't have any credibility when you go and you sort of disparage somebody's bill that has so much merit and will do so much good and is doing so much good because this Legislature saw fit to see past the NMA's objections, to see them now bring objections to a mandate and then reverse that position. To me, this really reduces their ability to effectively argue for legislation to me. And it really deeply disappointed me on behalf

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of the medical profession. I won't speak to the merits of LB209. But I do want to make sure that the Medical Association appreciates--

FOLEY: One minute.

HOWARD: --how-- and disappointment is the only word that I can think of. Either you stick to a position or you don't. Either something has merit or it doesn't. And last year when we were struggling to do something meaningful to stem opioid abuse in this state the Medical Association opposed it because they didn't like the mandate. And this year they are obviously moving around quite a bit more on their positions. So with that, I won't speak to anything that's on the board now. And thank, Mr. President.

FOLEY: Thank you, Senator Howard. Senator Slama.

SLAMA: Thank you, Mr. President. I was wondering if Senator Albrecht would yield to a question.

FOLEY: Senator Albrecht, would you yield, please?

ALBRECHT: Yes.

SLAMA: So, Senator Albrecht, does this bill as amended have any references whatsoever to the reversal of abortion using progesterone?

ALBRECHT: No.

SLAMA: Any? Are you sure?

ALBRECHT: Yes.

SLAMA: So zero?

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ALBRECHT: Zero.

SLAMA: Okay. Thank you. Great. So the bill as amended has no mention or reference to the study or the reversal of abortion using progesterone. I'd caution certain members of this body from purposefully misleading their colleagues by continuing to reference the study when all of the references are taken out via the committee amendment, which has been passed by this body as of this morning. There is no mention that you can reverse the abortion in this bill. And to prove that I'm going to read through the committee amendment just to ensure all of my colleagues that I'm not just making things up. So starting on page 1 of the committee amendment, section (e): Research indicates that mifepristone alone is not always effective in ending a pregnancy. You may still have a viable pregnancy after taking mifepristone. If you change your mind and want to continue your pregnancy after taking mifepristone, information on finding immediate medical assistance is available on the Web site of the Department of Health and Human Services. This information is all factual and true. Continuing on towards the end of page 2, last two lines: and include information on finding immediate medical assistance if she changes her mind after taking mifepristone and wants to continue her pregnancy. Okay. Now we're on page 3, page 4, nothing on page 5. Oh, page-- this must be page 7. Yes. Page 7: Materials designed to inform the woman that she may have a viable pregnancy after taking mifepristone. The material shall include the following statements: Research indicates that mifepristone alone is not always effective in ending the pregnancy. Hence, the second pill, folks. You may still have a viable pregnancy after taking mifepristone. If you change your mind and want to continue your pregnancy after taking mifepristone, it may not be too late. And materials, including contact information, that will assist the woman in finding a medical professional who can help her continue her pregnancy after taking mifepristone. And then finally on page 8: The Department of Health and Human Services shall publish and make available on its Web site materials designed to inform the woman that she may still have a viable pregnancy after taking mifepristone. The material shall include the following statements: Research indicates that mifepristone is not always effective in ending a pregnancy. You may still have a viable pregnancy after taking mifepristone. If you change your mind and want to continue your pregnancy after taking mifepristone, it may not be too late. The material shall also contain information, including contact information, that will assist the woman in finding a medical professional who can help her continue her pregnancy after taking mifepristone. The Department of Health and Human

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Services shall review and update as necessary the materials, including contact information regarding medical professionals who can help a woman continue her pregnancy after taking mifepristone. All of these statements are backed by science. There's no debunked study behind these statements. This bill as amended is informed consent through and through. So I rise in support of LB209 and opposed to motion 71 and would like to yield the rest of my time to Senator Arch, if he'd like it.

FOLEY: Thank you, Senator Slama. Senator Arch, 1:05.

ARCH: Thank you, Mr. President. I had-- I had spoken earlier just to try to help some understanding as to the, the rigors of randomized clinical trials and the double-blind methodology with clinical trials and the difficulty with, in particular, certain populations-- pediatric, pregnant women, and psychiatric patients-- and how difficult that is with randomized clinical trials. But there was, there was-- and as a result that physicians often use off-label prescribing because those, those randomized double-blind trials have not been conducted and probably will not be conducted in some cases. But there was another-- there was another-- I think I, I also want to clarify another perhaps misunderstanding and that has to do with an IRB waiver. An institutional review board of a university that is overseeing human subject research is responsible for making sure that the patients are safe in any type of research that is being conducted. So a scientist will, will, will submit a protocol to an IRB and they will, they will review that IRB. And, and there are times when an IRB, an institutional review board-- will grant a waiver--

FOLEY: That's time, Senator.

ARCH: --because-- excuse me?

FOLEY: That's time.

ARCH: Thank you.

FOLEY: Thank you, Senator Arch. Senator Lowe.

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LOWE: Thank you, Lieutenant Governor. I rise in support once again to support what is now LB209, with the Judiciary amendment, AM1432, and Senator Howard's amendment, AM1524. I do not rise in support of the recommitment motion. It was said that we need to stick to our guns, that if you are for these medical things, then we have to constantly be for these medical bills. I don't believe that, because some days in here some of us are for a tax increase and some days the same person is against the tax increase. Some days we are for fully supporting the university and other days we are not fully in support of the university. It all depends on each individual bill that comes before us. And these are all individual bills. Otherwise, why don't we hear them all at one time and pass them all at one time and we'd be out of there in a week. Some days I'm for the children and some days I'm against the children. It all depends on the bill. This one, I am definitely for the children. Let's give them a second chance. Let's give the mothers a second chance to enjoy the life of that child. And that's all this is, it's a second chance. It's an opportunity and we need to take those opportunities when they come before us. With that, I'd like to yield my time to Senator Arch, if he would like to have to finish his statement.

FOLEY: Thank you, Senator Lowe. Senator Arch, 3:00.

ARCH: Thank you. I don't think it'll take three minutes, but let me, let me finish my thought here, because again just to make sure that we understand the role of an institutional review board. So a protocol is submitted by a scientist for review and it is determined at times in particular, because in this particular methodology it's identified as an observational case series with data analysis that received an institutional board waiver-- exc-- institutional review board waiver-- data analysis. So there are, there are times when a protocol is submitted, in this case the University of South Dakota according-- San Diego. SD, different-- different SD. San Diego where the review board took a look at it and said, we're going to grant you a waiver for patient consent. And that's the waiver that is granted by an IRB. They do not need to go back to each individual and ask for that waiver. Now I have not seen the waiver that was granted. I don't know the rationale for why the waiver was granted, but there are times when it's not necessary because, for instance, the data is anonymized. There is not patient information, there is no PHI, they're following HIPAA regulations. All of that is occurring and so it's not necessary for a patient consent to review historical data that has already occurred. There's no pill being administered, there's no-- there's no patient safety issue, as long as confidentiality is preserved. So I'm-- I guess



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what I just-- all that I wanted to say was just to help understanding here in this body that when an IRB grants a waiver, a consent waiver, it does not imply no oversight. It does not imply junk science. It implies that there is no harm, no threat to patient safety in the research that is being conducted. Thank you.

FOLEY: Thank you, Senator Arch. Senator Pansing Brooks.

PANSING BROOKS: Thank you, Mr. Lieutenant Governor. I wondered if Senator Arch would be willing to answer a question?

FOLEY: Senator Arch, will you yield to some questions?

ARCH: Yes.

PANSING BROOKS: Thank you. Senator Arch, have you seen the study that was put out by the Office of Public Health in Louisiana?

ARCH: No, I've not had a chance to.

PANSING BROOKS: OK. Could you look at it? It's right in front of you right now. I passed it out to everybody.

ARCH: OK.

PANSING BROOKS: So the, the legislature in, in Louisiana-- there's an executive summary that basically says at the very end of the first paragraph on page 2 says: Responses were received by the Louisiana Department of Health and formed the substance of this report. The panel of experts unanimously agree that there is insufficient evidence to suggest that there is a sound method to reverse a medication induced abortion. So you're saying that there's enough studies to, to allow us to go forward and put this in our statutes. Is that right?

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ARCH: No. I'm saying that-- I'm saying that a physician has the clinical judgment if there-- if there is-- if there is evidence under that physician's--

PANSING BROOKS: Oh, the physician has it?

ARCH: Right, because in this particular case we're not requiring physicians to prescribe, but it is rather a consent. It is, it is, it is an informed consent. That's all this is. It's not requiring anybody to prescribe. So if a phys-- if a physician decides that they don't believe that there is, is, is sufficient evidence, then they don't need to prescribe, because it's off, it's off, it's off label.

PANSING BROOKS: But if, if they're do-- if they're giving this-- if they gave the first pill, then there is no-- there's no-- they can't use their own informed consent and their-- their own knowledge as a physician to be able to go forward. But that's OK. I'm, I'm done asking you that question. Thank you.

ARCH: Thank you.

PANSING BROOKS: Senator Albrecht, would you answer some questions?

FOLEY: Senator Albrecht, will you yield, please?

ALBRECHT: Yes.

PANSING BROOKS: So what's your goal with this bill? Basically to help people, mothers, to be able if they change their mind in between the first and second day to be able to stop what?

ALBRECHT: Between the first and second day just to know that they can go on and get medical help to know that the-- they can take it up and save their, their child.

PANSING BROOKS: OK. So to stop trying to--

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ALBRECHT: Not to take the second pill from the-- the mifepristone or the second pill that will abort the baby.

PANSING BROOKS: OK. So I think that Senator Slama was talking semantics with us a minute ago, because I agree that it doesn't say it's about reversal of abortion. But stopping the-- it's stopping the-- it's stopping the baby. If you take two pills, don't you agree that there is a greater chance that the baby will not be born?

ALBRECHT: Correct.

PANSING BROOKS: So your goal is to make sure to have an opportunity if a mother changes her mind?

ALBRECHT: To have a choice, yes.

PANSING BROOKS: OK.

ALBRECHT: To make a decision whether she goes forward or continues with the abortion.

PANSING BROOKS: OK. So did you see the study that we have on Louisiana that I just passed out, where the legislature determined that they would not go forward because the science is not there?

ALBRECHT: But, again, I would just say that I don't know what was in their bill. I know what is in ours, so.

PANSING BROOKS: It was almost the same. So-- and, again, they, they-- after review of the professional opinions expressed by the panel of experts the department finds there is neither sufficient evidence nor a scientific basis to conclude that the effects of an abortion induced with drugs or chemicals can be reversed. Do you think that that-- my concern is-- I presume you heard me prior to lunch-- that I had some antiabortion friends who said they feel that this is very detrimental to the woman--

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FOLEY: One minute.

PANSING BROOKS: --because they've been-- they're given hope that maybe they can stop it when the science really isn't there.

ALBRECHT: Well, some on the floor would agree that the Delgado study is not true. I happen to believe, based on what I read about it, that it is. So that's--

PANSING BROOKS: What part-- could you tell me what part convinced you of that study?

ALBRECHT: Well, you know what's convinced me, not only the Delgado study, is that progesterone has been used for many, many, many years on high-risk pregnancies. I have six grandchildren that got the progesterone shot.

PANSING BROOKS: OK. So it's just that we feel that it might work and so we should put it in our laws. Is that basically it?

ALBRECHT: Again, this amended version of LB209 does not talk about the study. We don't say it can be reversed. We simply want to give them all the information to make an informed decision.

PANSING BROOKS: Thank you, Senator Albrecht.

FOLEY: That's time, Senators. Thank you, Senator Pansing Brooks and Senator Albrecht. Senator Wishart.

WISHART: Thank you, Mr. President. I rise with mainly concerns about Section 5 and 6 and I've talked to Senator Albrecht and talked to Senator Lathrop about these concerns and will be asking some questions on-- about this. So starting in Section 5, it says the Department-- and this is mainly about the Department of Health and Human Services, the Web site that they will publish. The Department of Health and Human Services shall publish and make available on its Web site

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materials designed to inform the woman that she still-- that she may still have a viable pregnancy after taking this medication. Senator Lathrop, would you yield to a question?

FOLEY: Senator Lathrop, will you yield, please? Is Senator Lathrop on the floor?

WISHART: Senator Albrecht, would you yield to a question?

FOLEY: Senator Albrecht.

ALBRECHT: Yes.

WISHART: What are these materials?

ALBRECHT: Well, I'd like to take you to the first page of the amendment. And if you go down to line 25, I would imagine-- I don't know what it's going to look like. It's up to the Department of Health and Human Services. But I believe that they would go on line 25, 26, 27 and on to the second page, the first three lines. I think they would model it after those. Research indicates that the mifepristone alone is not always effective in ending a pregnancy. You may still have a viable pregnancy after taking mifepristone. If you change your mind and want to continue your pregnancy after taking mifepristone, the information on finding immediate medical assistance is available on the Web site of the Department of Health and Human Services.

WISHART: So will there be anything on the Department of Health and Human Services around the-- I've been hearing a lot about a study around progesterone.

ALBRECHT: All they're going to do is send this woman to a doctor that would be able to let her know what she needs to do to take the next step of saving the baby, if that's what she chooses to do.

WISHART: So is there a way we can be more proscriptive then in making sure that that is all that's going to be on that Web site?

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ALBRECHT: You know, I believe this with what I just said and what the Department of Health and Human Services, I would leave it up to them based on what we have in the bill, that that's what they need to let them know that we are directing a woman to a doctor or a physician that can help her if she chooses not to go through with the abortion that she would have another option.

WISHART: OK. And that's something I, I, we can talk more off mike on. When it goes down to the-- there will be contact information that will assist the woman-- the material shall include information, including contact information that will assist the woman in finding a medical professional. Whose contact information?

ALBRECHT: It would be the contact information of the hotline that they would call to get help with a physician to help them through either saving their baby or-- I mean, that's the only reason they're going to go to the-- to the hotline is to know who they should be directed to go to.

WISHART: So who, who is running this hotline?

ALBRECHT: Well, I'm certain that they have a hotline throughout the country right now. But, more importantly, it's DHHS's responsibility to put together who in our state is currently doing this. And we do have doctors that are currently taking care of patients that would like to save their babies.

WISHART: So why do we need to send them to a hotline when on line 6 we list the medical professionals who will help the woman.

FOLEY: One minute.

ALBRECHT: Where do you see line 6? What page?

WISHART: Excuse me. In Section 6. Sorry. Sorry, Senator. Section 6. The Department of Health and Human Services shall review and update as necessary the materials, including contact information regarding medical professionals.

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ALBRECHT: Well, they-- obviously, it's for the whole state of Nebraska. So if you're out in Chadron and you're down here having the abortion and you want to within a 48-hour period find out where you should go to get these services, then they would have a list of doctors that could help you.

WISHART: And since I only have a minute left, I will follow up the next time I have to speak with a question about whether then the state would be liable if we're listing medical professionals on our Web site and whether there are other instances where we do that.

ALBRECHT: Would you like me to respond?

WISHART: I'll follow up, since I only had a minute. I didn't want to cut you off.

ALBRECHT: All right.

FOLEY: Thank you, Senators Wishart and Albrecht. Senator Chambers.

CHAMBERS: Thank you. Mr. President, members of the Legislature, is Dr. Arch on the premises?

FOLEY: Senator Arch, will you yield, please?

ARCH: I will.

CHAMBERS: Senator Arch, I was listening to you when I was downstairs and up here and I appreciate your presentation, the knowledge that you have. So I'm not going to challenge any of that. I want to ask you a couple of questions that go farther afield when you have a technical issue being discussed by lay people. When we're talking about science, scientific findings, scientific principles, there might be some logic involved in deciding which steps should follow which steps. But when you want to arrive at a scientific conclusion, is that based on logic and opinion or observation and experimentation, things that can produce a quantifiable result?

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ARCH: Not sure I fully understand your question, I guess.

CHAMBERS: Let me ask it differently.

ARCH: OK. All right.

CHAMBERS: What would you-- how would you describe the scientific method?

ARCH: Well, again, I think that there is-- I think that there are times when observation is involved, when, when, as I say, the gold standard is, is not available to you. You're not going to-- you're not going to conduct-- and I've used the example-- you're not going to conduct psychotropic medication studies on children and somebody gets a placebo and somebody gets that. So how do you then decide-- and the risk and benefits of prescribing medication off label without that gold standard. That's the question and in some cases observation--

CHAMBERS: I'm not just-- excuse me. I'm not just talking about this bill--

ARCH: OK.

CHAMBERS: --but in general. For example, a chimpanzee is not a human being. Many studies are based on tests conducted on chimpanzees, on rabbits, on mice, all kinds of animals. Then they try to determine to what extent they may have some effective value on human beings. Once they establish what they might consider to be a principle by experimenting on animals there still is experimentation necessary when you want to apply that to human beings. Isn't that true?

ARCH: If you can, yes. That is that-- that would be the next step.

CHAMBERS: OK. Now I'm going to go farther afield. Have you ever heard the term "flat earth" people?

ARCH: I, I, I have vaguely heard the term "flat earth" people.



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CHAMBERS: And those were people who thought the earth was flat because they can see everything that's flat, but if it's round you'd fall off. Those are the "flat earthers" I mean. Do you think there's any argument you could give based on scientific principles to a person with that belief to sway him or her from the belief that the earth is flat when their experience proves to them that the earth is flat?

ARCH: I would hope there is scientific evidence that could persuade somebody the earth is not flat.

CHAMBERS: Do you think it would be likely that you would succeed in the venture?

ARCH: I would say it depends on the individual, but I'm sure some are totally convinced it's still flat.

CHAMBERS: Right. Now there was a person named Galileo who said that the earth is not the center of the solar system, that the sun-- if you are going to have a fixed--

FOLEY: One minute.

CHAMBERS: --point of reference it would be the sun and earth spins around the sun in an orbit. Would you agree with that?

ARCH: Yes.

CHAMBERS: But there were people who were so convinced that the contrary was true, that the earth is the center, because they believe that in God's creation human beings and the earth were the center of everything that they tortured Galileo to make his-- him change his statement. Are you familiar with that?

ARCH: I'm not familiar with that last part, but I am familiar that there were those that regardless opposed him. I think those were the people that believed that, that if the bible didn't say that, that, therefore, it wasn't true.

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CHAMBERS: And since we only have a minute or less, that's all I will ask you. Thank you. Members of the Legislature, my presentation is going to go to this. The people who believe in these pro-life nostrums often believe in quackery. What they really want to do is do away with the right of a woman--

FOLEY: That's time, Senator.

CHAMBERS: --to have an abortion and anything that goes in that direction--

FOLEY: It's time, Senator.

CHAMBERS: Oh, I'm sorry, Mr. President. I didn't hear you.

FOLEY: Thank you, Senator Chambers. Senator Cavanaugh.

CAVANAUGH: Thank you, Mr. President. So I want to speak to something that Senator Howard brought up about the NMA. I know we all saw the letter. It was distributed that the NMA came in opposition to this bill initially. And part of the letter says, LB209 nevertheless compels physicians to provide such information to their patients. This message is misleading and potentially harmful to women who are seeking a medication abortion. Laws that undermine the physician-patient relationship or that subject individuals to medical care that is not evidence based, threaten public health, and comprise a physician's ability to practice medicine according to applicable standard of care. And I'd like to ask Senator Howard to yield for a question, if she would.

FOLEY: Senator Howard, would you yield, please?

HOWARD: Sure. Yes, I will.

CAVANAUGH: Thank you, Senator Howard. Now you spoke about the NMA coming in opposition to your previous opioid bill?

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HOWARD: Yes.

CAVANAUGH: Did they come and lobby this body the day that your bills were on the floor?

HOWARD: Yes.

CAVANAUGH: In opposition?

HOWARD: Uh-hum.

CAVANAUGH: I don't believe I've seen them today. Have you?

HOWARD: No, but I haven't left today. I want to stay in here where it's safe.

CAVANAUGH: OK. Thank you. I share my disappointment in the NMA with Senator Howard, that they would change their position. I think it probably would have been slightly innocuous if they hadn't done so. But since they decided to, I'm having-- as a member of the Health and Human Services Committee I'm struggling to view them as an expert in the field of medicine. I even received an e-mail from the president of the NMA to reiterate that they had changed their position and to inform me of his personal position, which I don't think is an appropriate thing to do as a representative of this organization that testifies in front of the committee I sit on. Additionally, within the letter to me, the e-mail to me, he stated that he assumed that I was pro-choice, which to me is politicizing the stance even further. This bill, LB209, is not a pro-choice, pro-life bill. This bill, LB209, is about medical care and patient-provider interactions. If there is an opportunity to reverse this medical procedure, I absolutely support patients being informed of that. I don't support so strictly prescribing what doctors have to tell their patients. I've never gone to a doctor that I didn't trust to tell me the truth about my medical condition. I wouldn't go to a doctor unless I trusted them. I certainly wouldn't go to a doctor about anything reproductive health related unless I had the utmost trust in that they were going to be forthright with me about what my options were in any given situation. And for the state to decide to disrupt that trust and for the NMA to decide to no longer take the stand of protecting that trust, is not something that I can agree with. I hope that this is a real thing. I hope that if a woman decides to take pill-- I'll say

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pill one because I can't say the drug either-- that this is an option for them. But until it is scientifically proven, then my hopes are irrelevant. I think we should do anything and everything we can to support women in this very precarious time.

FOLEY: One minute.

CAVANAUGH: Thank you. Thank you. Early on in a pregnancy is challenging for a lot of women. Early on in pregnancy you are very sick. I with my first pregnancy had the flu and I thought it was morning sickness. And when I called my trusted physician she laughed and said, that's the flu. And I said, oh, thank goodness because if this is morning sickness, I'm never having a baby again because it was awful. So maintaining that trust is something that I think is really important. And I support the NMA's initial position on maintaining that trust. And I would like-- I support the recommit to committee, not because I don't support what Senator Albrecht is trying to do, but because I think it is so important that we should have a study on this. We should have a study on whether or not this is a real scientifically valid thing to happen, because I don't think we should be forcing doctors to give misinformation, even if it is referring them to a Web site.

FOLEY: It's time, Senator.

CAVANAUGH: Thank you.

FOLEY: Thank you, Senator Cavanaugh. Senator Murman.

MURMAN: Thank you, Mr. Lieutenant Governor. I rise in strong support today of LB209 as amended. And I want to say thank you to Senator Albrecht for having the courage to bring this bill. I'm going to talk a little bit more about the basics to the bill. I think maybe we're getting a little bit too much into the weeds and the details and need to just get back to the basics. LB209 ensures the information necessary to begin the reversal treatment is provided when a woman takes the initial mifepristone pill. The abortion pill reversal process offers a chance for the woman to rescue her baby when she has changed her mind about an abortion. This abortion pill reversal process is already available to our constituents here in Nebraska, but it's not required to

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explain the possibility to reverse the effects of the initial mifepristone pill. I remember meeting Rebekah Hagan the day that she so bravely told her story out in the Rotunda just behind us all. Rebekah had the change of heart and saved her pregnancy through the abortion pill reversal process. Rebekah had the choice to receive a medical abortion and with the abortion pill reversal process she had the choice to reverse the mifepristone pill. Making sure that medical professionals provide all the information she needs to make a truly informed decision should be something that we should all support. We should hold our medical health professionals to a high standard, making sure they are sharing all the information for a medical practice with a patient. Every woman deserves to be given all the information she needs when making a decision, especially a decision that is going to end a life. LB209 as amended adds a new section to our existing informed consent statutory framework for abortion. Simply requiring, requiring that when a woman goes in for an abortion she will be given all of the information she needs to make a truly informed decision, including the information about abortion pill reversal and how to find help if she changes her mind. Colleagues, I want to ask you this question. When you go in for a medical procedure, wouldn't you want to know all of the information? Our state requires that a patient gives consent before undergoing medical treatment. The importance of informed consent should be standard medical practice in any procedure or protocol. By not providing the information about the abortion pill reversal, our state is not helping the woman. A woman, a woman shouldn't have to find out later that she could have reversed the process if only she had known it was possible. Colleagues, LB209 is a pro-life, pro-woman, pro-science, pro-information bill. I urge you to support LB209 as amended. Thank you.

FOLEY: Thank you, Senator Murman. Senator Hunt, you're recognized for your third opportunity.

HUNT: Thank you, Mr. Lieutenant Governor. Senator Murman did not say this was a pro-choice bill. He couldn't bring himself to use those words, but that's what Senator Albrecht said when she introduced this in committee. I'm going to talk about this study because the whole reason we're wasting our time on this bill-- which thanks to Senator Lathrop and his staff and Josh Henningsen and the Judiciary Committee is in a much less offensive form at this point. Senator Albrecht, herself, in her introduction said that this study is why we have this bill and it doesn't matter if she believes the Delgado study or not. It doesn't matter if the state legislator has a belief

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that this is valid. It's not. There's nothing to believe. This is science-- there's science and there's anecdotes. Science is a thing and this is an anecdotal paper. It's just stories. Science is so much more rigorous and monitored and that's why we spend so much money conducting studies. They're expensive and they take a lot of time because they're meticulous and they require teams that are vigilant in removing as many bias and confounding variables as possible. These authors didn't even try to do that. Maybe a big reason that they know they don't need to do that is because they know that there is so much political pressure on state legislators to pass junk science bills that back up their own religious viewpoints that they don't even need to do that. It doesn't even have to be valid science because we're all going to close our eyes and sign off on it. Everything that Senator Slama read out of the committee amendment after I last spoke, are things that doctors already tell their patients about medication abortions. And there's a group of people in this body who are constantly talking about things like government overreach and big government and reducing the size of government. And that's exactly what this bill does, is it puts government in a position in the doctor's office that we have no business being. On Senator Arch's comments about the IRB, protocols are waived when the protocol is not in fact a scientific study. One scientific study takes years from start to publication and it's reviewed at every level. They are heavily scrutinized, especially when there's human subjects. Anyone can gather stories and you don't have to have a Ph.D. in science to gather stories. Anonymous data does not waive an IRB, ever. Some other things we've talked about are this hotline. There's no hotline mentioned in this bill or in this committee amendment. Why are we directing women to go talk to a hotline? We should be directing them back to their physician. The physician has no vested interest in whether a woman maintains or ends her pregnancy. Their only goal is to provide a safe treatment that is requested by the patient. We regulate these providers, these doctors in a way that we would never regulate any other type of doctor. It's honestly discrimination because these people are experts in their field, just like a podiatrist is an expert in his field, just like an anesthesiologist is an expert in their field. And being in the weeds and in the details, it is offensive and ridiculous and it's rude to the people of Nebraska who are watching us on TV right now or listening to us or going to read the story in the newspaper later to say that we can't get into the weeds and the details. What we are telling women is that their doctor is not who they should turn to when something has changed for them. They should call a hotline and speak to a stranger who may or may not know anything about the medical history, anything about the medical experience? This bill says that the Nebraska Legislature doesn't trust doctors who provide reproductive healthcare and we don't

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want women in Nebraska to trust them either. Doctors in Nebraska, whether they provide reproductive healthcare-- which my general practitioner does-- I get my pap smears, I get my birth control, whatever. I get that from my general practitioner, I don't go to like a special ob-gyn for that. Doctors all over Nebraska, no matter what their field of study is, they're entrusting us, all of you, to spend time in the weeds--

FOLEY: One minute.

HUNT: --and get in the details and be in the weeds so that they don't have to do it. If there's a logic to this, as Senator Lathrop said, if there's a logic to-- if it seems reasonable, if the gut check is there, that if we give progesterone to women it can reverse their pregnancy, because the reasons we've heard from all the nonscientists in the body is that progesterone is a natural hormone. It's already given to women for pregnancy. Never mind that it's not FDA approved for this purpose. Never mind that it's never been tested for this purpose. So why don't we test that? There is an ongoing trial right now. There is a test right now to test this. And I will speak about that on my next opportunity. Thank you.

FOLEY: Thank you, Senator Hunt. Senator Kolowski.

KOLOWSKI: Thank you, Mr. Chairman. I yield my time to Senator Hunt.

FOLEY: Thank you, Senator Kolowski. Senator Hunt, 5:00.

HUNT: Thank you, Senator Kolowski. So this is from an article that was published on NPR and it's a, it's a story they did about the interesting position and Michael Creinin put in after he read the Delgado study. He is a highly respected physician, board certified, every board possible-- not just these like pro-life boards that a very small minority of obstetricians belong to, but like really mainstream boards of physicians. He, he's a leading researcher in women's healthcare, not just abortion, and he is conducting a study right now to address this. So I'm just going to read from, from the story: In 2018, George Delgado-- the author of the, of the study that's completely wrong-- Delgado and his colleagues and his network of health providers published a larger case series, this one involving 754 patients in the journal, *Issues in Law and Medicine*. That's that

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journal I told you all about that talks about anti-vaccine-- really crazy. The paper concluded that the reversal of mifepristone's effects with progesterone "is safe and effective." The researchers acknowledged that the study didn't randomly assign women to receive a placebo or mifepristone. A study like that, called a randomized placebo controlled trial, would provide strong evidence. But Delgado and his colleagues wrote that doing this kind of trial in women who regret their abortion and want to save their pregnancy would be unethical. There's no alternative treatment, he says. You can't always wait for the randomized control trials. If it's lifesaving, there's no alternative. This is an argument that we've heard from our colleagues on the floor today as well. It continues. Creinin's study-- this is Dr. Michael Creinin who's doing this study-- the real-- you know, like the real doctor who's respected by his peers and everything. Creinin's study approved by UC Davis Institutional Review Board in December has been registered with [clinicaltrials.gov](http://clinicaltrials.gov), which tracks medical research. The study is slated to involve 40 women who are between 44 and 63 days of pregnancy and are seeking to have a surgical abortion. As a condition of the research, the women would have to be willing to take mifepristone, the initial pill that would normally trigger a medical abortion and then a placebo or progesterone. Two weeks later researchers will see if there's any difference in the rates of continued pregnancy. If progesterone can prevent the effects of mifepristone, Creinin says, he'll find that more women in the group that got progesterone are still pregnant with a pregnancy that's progressing. The key ethical point, the researchers say, is that all women in this study want to have an abortion and will receive one by the study's end. The study isn't enrolling women who are seeking a quote reversal. They will be told upfront that if the mifepristone doesn't prompt an abortion, they will be offered a surgical abortion. Creinin says, the study participants will be compensated for their time in the study, but won't be paid for having an abortion and patients will still be responsible for the cost of the surgical procedure, either through insurance or out of pocket. Creinin is skeptical that progesterone will have any effect, since it is thought that mifepristone irreversibly blocks progesterone in the body. But if it does have a clinically significant effect, I want to know that. Creinin hopes that his work will help medical researchers better understand that this kind of treatment can actually help women who change their minds after taking mifepristone for a medication abortion. If the results show that progesterone doesn't work, Creinin hopes that it will discourage state legislators from mandating that doctors tell their patients about an ineffective treatment.



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FOLEY: One minute.

HUNT: Creinin started enrolling patients in the study in February. He isn't sure how long the study will take, but he says he probably won't have preliminary results for at least a year. So my question, colleagues, this article is from March 22 of this year, this is ongoing right now, what is the reason that we need to pass this bill this year in 2019, knowing that there's an ongoing study that could potentially prove in a repeatable, ethical, medically reasonable way what Senator Albrecht is proposing? Why do we need to pass this bill if we can't wait and see the results of this study. This goes back to my issue with the ethics of claiming that this entire process is about informed consent. If this was about informed consent, we would also be informing patients that we're telling you that you may be able to continue the pregnancy by calling this hotline, by going to this other clinician. And we don't know in statute what it is they're going to do. I--

FOLEY: That's time.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator McCollister.

McCOLLISTER: Thank you, Mr. President. Good afternoon, colleagues. Given my advanced age and gender, I'm way past childbearing age, but I support AM71 [SIC] and oppose LB209. Why is that? Well, I think this is probably legislation without science. And we do, in fact, have incentive to wait until the science supports this proposition. Secondly, the initial position of the Nebraska Hospital Association was opposed to this bill. I think this legislation is unnecessary legislation. I would yield the balance of my time to Senator Hunt.

FOLEY: Thank you, Senator McCollister. Senator Hunt, 4:15.

HUNT: Thank you, Senator McCollister. And I would also suggest with some hesitancy, maybe, that you're not over childbearing age and I'm glad that you have the choice to decide if you'd like to bear a child. I was talking about this bill being about informed consent. If it was about informed consent, then we would be telling patients it may be possible to reverse this, it may be

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possible for you to get treatment from this and it's really not true. I had a conversation over the weekend with one of my family members and I come from a very antiabortion family. This is messaging that I definitely received a lot growing up. And even my family members agreed with me that you can be antiabortion and you can still realize that this bill ain't it, this isn't the way got to do this, because the effects on the Nebraskan people of putting things in statute that aren't based on science, that is a lot worse than passing something without having it fully tested out. The fact that you can find one or two doctors in support of this is not surprising. It's not convincing of anything because there will always be somebody who believes that we've met the standard of evidence. And that's why we have the FDA, that's why we have medical associations. And what's truly amazing to me is the hypocrisy that we're saying this is about informed consent and informing Nebraskans about their options, when really this isn't even something that's been proven to work. I have questions about what patients are going to hear when they go to DHHS and they find a clinician who can help them as the amendment says, continue to help the woman continue her pregnancy after taking mifepristone. I'm going to be bringing an amendment that changes it to, who can help a pat-- "who can help care for the patient," because the goal of the physician should always be to care for the patient, not to prescribe a political viewpoint on what it is that she needs to do. This gets back to a lot of the problem that we have that we're telling physicians in Nebraska that we don't trust them to do their job, that we don't trust them to provide healthcare. And doctors are looking to us to give them the freedom to do their own job that they're trained to do. And if there is logic to this, let's have that studied. If the science comes back that this is ineffective then this statute can't be enforced and it should be stricken from statute. And as long as I'm here in the Legislature, that's something that I'm happy to work on because it really doesn't make sense to have something like this in statute. To me this is a big waste of time. This is massive government overreach, which makes this is super hypocritical to me. And the hypocrisy in this body as we talk about this is, is pretty evident regarding that. I'm saying that even as antiabortion people we can be reasonable and recognize that this bill is not appropriate to put into statute, because--

FOLEY: One minute.

HUNT: --it compels the speech of doctors and it puts it on a slippery slope of validating debunked research and untrue medical claims. And even the people who are antiabortion can

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understand how dangerous that is. If the committee amendment has taken the bill to a point where all we're doing is telling women that the effects of mifepristone may not be enough to end a pregnancy, we know that doctors are already doing that. That's why this is government overreach. That's why we're putting things in statute to make one group of physicians say something when there's nothing in statute to make other groups of physicians say something similar. We don't force in statute doctors performing vasectomies on men to say, and this can be reversed. And the reason we don't do that is because we already know that they're saying that. There are things that we know reduce abortions because the science proves it. There is replicable, peer reviewed, scientific studies that prove what we can do to reverse abortions.

FOLEY: That's time, Senator.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator Albrecht.

ALBRECHT: Thank you, Lieutenant Governor Foley. I'd like to kind of take us back here, since we started first and tried to explain what everything needed to be with this bill. I want people to understand that I'm not haphazardly taking on a bill that I don't believe in or that I don't believe that those that followed behind me and testified during the committee hearing were not mindful and thoughtful. I appreciate Senator Murman talking about Rebekah, the gal from California. For those of you who might not have heard her story, she was a woman who at the age of 19 already had a one-year-old whose birthday she was going to be celebrating, while she walked into the clinic to have an abortion. Took the first pill, got back to her car and realized, what have I done? You know what? Six years ago she Googled, can this be reversed? And in Googling that, she was brought to the area where she needed to go to find a physician who could help reverse the procedure and it was successful. Today she has a another beautiful little baby boy that she has raised and he's healthy. This is all we're doing, is giving these women the ability to have informed consent from the physician to let them know that there are other options, there other choices. I do call this a pro-choice bill as well. You can choose to do what you're doing, but you also have a choice to change it and reverse it. I'd like to share with you, because maybe some of you don't read everything that hits your desk, but, but you take a doctor in Lincoln that has

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delivered over 4,000 babies, 6 of which were those that went in to have an abortion and came to him and said, I think I've done the wrong thing, can you help me? And he did. He has six children, one set of twins that he helped. And these are healthy little babies that are, are here today. If this bill saves 1 child, if this bill saves 500, this is a bill that we are simply asking for informed consent within the bill that we have amended and to help these women try to find where they should go to get that done. You know, Dr. Plambeck, again, he's a licensed physician here in Lincoln, board certified gynecologist and he's practiced since 1991. He's delivered over 4,000 babies. He's writing in support of LB209. In the state of Nebraska, he says again, 55 percent of all abortions are medically induced. The medication abortion involves a two-step process and can be used up to ten weeks of gestation. The first step involves giving that patient mifepristone. This causes the degeneration of the pregnant uterine lining. The second step is the misoprostol, which is given one to two days later. This causes the expulsion of the fetus. Studies show that the first step, mifepristone alone, is 60 to 80 percent effective in causing an abortion. When the second step is taken, misoprostol, it's nearly 100 percent effective. The abortion pill reversal protocol involves giving the patient multiple doses of the hormone progesterone over several weeks as soon as possible after the mifepristone, but before the misoprostol is taken, so between step and step two. The progesterone counteracts the anti-progesterone effects of the mifepristone, thus potentially halting the aborted process of the mifepristone. Research studies have shown that the progesterone reverses--

FOLEY: One minute.

ALBRECHT: --the effects if mifepristone blockage. One scientific study showed 55 percent pregnancy success. Current ongoing studies have preliminary success rates approaching 65 percent. Progesterone has been used safely in pregnancy over 50 years. Progesterone is used for many problems in pregnancy. For example, patients that have a high risk of miscarriage are often treated with progesterone throughout the first trimester of pregnancy and it's used during the vitro fertilization without harmful effects as well. He personally has been involved again with six abortion pill reversals, using this protocol. Six patients went on to deliver full-term, happy, healthy babies. One patient had a set of healthy twins. If a woman's right to have a complete medication regarding the medical abortion process so they potentially reverse their decision if

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they so choose, no woman should be coerced into continuing a medical abortion by not being fully informed. Physicians have an ethical and professional--

FOLEY: It's time, Senator.

ALBRECHT: --responsibility to provide this to their patients. Thank you.

FOLEY: Thank you, Senator Albrecht. Senator Slama.

SLAMA: Thank you, Mr. President. I rise still in support of LB209 and opposed to motion 71 to recommit this bill to committee. I'd like to start off by addressing a quote that was said on this floor, that we are wasting our time on this bill. I'm sorry. The way the bill is drafted after the committee amendment, we are informing women that if they take the first abortion pill they may be able to still keep their pregnancy if they change their mind, by not taking the second pill and by seeking medical assistance. There's no talk of reversal. There's no talk of debunked science. We know for a fact that if a woman takes this first abortion pill that there is no guarantee that this abortion will go through. So if we pass this bill and a woman is informed that she can go back after she takes that first pill and possibly save her pregnancy and possibly save the life of that child, even if we just save one child because we have given the woman the power to have informed consent when she gets an abortion, that's not wasting our time and I take personal insult to the fact that that's been asserted on this floor. These lives matter. So to zoom out I'd like to cite the fact that mifepristone is not always effective at finishing the abortion. This is citing the Reproductive Health Access Project, which has information about abortion, contraception, miscarriage, programs, resources, all sorts of things. They cite that mifepristone is only effective about 65 percent of the time in completing the abortion. So what is the problem with informing women that that's a fact? Where is the issue with that? That is backed by science. That's been confirmed. It's worth noting also that it's been said on this floor that docs are-- doctors are already telling women that if they take the first pill and choose not to take the second pill that the abortion may not be completed. There's no citation there. Do we have any evidence that that's going on, because without a citation I think we've discussed on this floor today that that's possibly debunked science. So unless she can provide-- unless the senator in question can provide a citation saying that all doctors are always providing this information when giving an

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abortion, I think that we need to codify this in statute. And now I'll just go through the current statute as to what we already require doctors to tell their patient before they get an abortion. This is referencing page 1, subsection 1: The woman is told the following by the physician who is to perform the abortion, by the referring physician, or by a physician assistant or a registered nurse licensed under the Uniform Credentialing Act who is an agent of either physician at least 24 hours before the abortion, the particular risks associated with a particular abortion procedure to be employed, including when medically accurate the risk of infection, hemorrhage, perforated uterus, danger to subsequent pregnancies, and infertility, the probable gestational age of the unborn child at the time the abortion is to be performed, the medical risks associated with carrying her child to term, and that she cannot be forced or required by anyone to have an abortion and is free to withhold or withdraw her consent for an abortion. And then it's worth noting, since I still have time, what this bill as amended actually includes, so I'll just start on page 1. Research indicates mifepristone alone is not always effective in ending a pregnancy.

FOLEY: One minute.

SLAMA: This is backed by science. Thank you, Mr. President. You may still have a viable pregnancy after taking mifepristone. Also, backed by science. If you change your mind and want to continue your pregnancy after taking the mifepristone, information on finding immediate medical assistance is available on the Web site of the Department of Health and Human Services. Now this doesn't have to be the reversal pill. There's no reference to the reversal pill in the committee amendment. It could be any type of medical treatment from throwing up the mifepristone, as referenced by Senator Hunt already, to try to negate the effects of that pill to some other treatment. This bill just gives the woman the information that after that first pill if they change their mind, there's a possibility that if you seek medical assistance you may be able to save that child and that's not a waste of time in my opinion. Thank you., Mr. President.

FOLEY: Thank you, Senator Slama. Senator Blood.

BLOOD: Thank you, Mr. President. I stand opposed to Senator Hunt's recommit to committee. I would ask that Senator Lowe please yield to several questions.

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FOLEY: Senator Lowe, would you yield, please?

BLOOD: Got to hurry up, Senator, I only got five minutes.

LOWE: I'm sorry. Yes, I will.

BLOOD: Senator Lowe, did I hear you correctly? Did you say, sometimes I'm for the children and sometimes and sometimes I'm against the children?

LOWE: The bills that become our-- the Legislature.

BLOOD: So children that are yet to be born, thumbs up; children that are poor and are born, thumbs down [INAUDIBLE]?

LOWE: No, no.

BLOOD: No? So when are you against the children?

LOWE: It depends on the bill.

BLOOD: All right. So I'm going to ask you some questions, because you're one of the few men who stood up on this bill. So true or false, would you say that men cause 100 percent of all unwanted pregnancies? All unwanted pregnancies are caused 100 percent by men and their irresponsible ejaculation.

LOWE: I would say it's probably 50-50.

BLOOD: No. That would be incorrect. How long is a woman's egg fertile?

LOWE: What was the question again?

BLOOD: How long is a woman's egg fertile?

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LOWE: You know, I really don't know.

BLOOD: Two days a month or twenty-four days per year. Of course, there's some fluctuation, because everybody has a body that is different. How many days a year are men fertile?

LOWE: Well--

BLOOD: How many days are in a year, Senator?

LOWE: Leap year or otherwise?

BLOOD: So we'll say 365 days, would that be correct?

LOWE: That is correct.

BLOOD: So in theory, you could cause potentially a thousand or more unwanted pregnancies a year if you would choose to. Is that correct?

LOWE: That would really surprise my doctor and my wife.

BLOOD: As we just said, Senator McCollister could still be sharing his bounty. All right. Thank you, Senator Lowe, you've been a good sport. So we're talking today about a very important issue. And I think sometimes we get on the mike-- and we're talking about women's bodies, that's the bottom line. And there's zero consequences for men who cause these unwanted pregnancies. And you might say, well, they have to pay child support. But, you know, only 61 percent of all men pay child support. It doesn't even affect your credit history if you don't pay your child support. So I just want to make sure that when we're talking about important issues like this, it's not a us against them but it's always about the women. We really need to start having honest conversations if we really want to reduce or stop abortions, and we need to make sure we're holding men accountable. We talk a lot about the womb, we talk about our vaginas. We're not talking about what is put into those wombs and who does it. To say it's 50-50 is ludicrous. It is potentially always the women who are responsible for birth control and birth control does



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horrible things to our body in many instances. And you're asking women to put chemicals in their body so you're not bothered with the issue of somebody getting pregnant. I want to make sure that if we continue to bring forward this type of legislation that we work even harder to address the real issues of how these women got pregnant. With that, if I would have any time, I would yield it to Senator Hunt.

FOLEY: Thank you, Senator Blood. Senator Hunt, 1:20.

HUNT: Thank you, Senator Blood. This is like a surprise for me every time someone talks that I get a little bit of time, so thank you very much, that's nice. Senator Blood made a really great point about if we're serious about reducing abortions, if we're serious about helping women not have unwanted pregnancies, we already have data and information about how to do that. A big part of that is comprehensive sex education. It's making sure that kids receive medically accurate, age-appropriate, research-based information about their bodies, about consent, about reproduction, and that in Nebraska it is currently not the standard. So it's safe to assume that there's a lot of unwanted pregnancies that are caused in Nebraska just because we're not educating our kids about their bodies and human growth and development. Another thing that we can do is support low-income parents with things like SNAP and Medicaid and social programs which they're entitled to when they qualify for them, because we know when people are able to come out of poverty, they're less likely to have unwanted pregnancies as well. I want to address some other things that were said recently. We don't know that Rebekah Hagan had a successful abortion reversal, because there's no science to prove that. From the research that we have today, in 2019, we know that she probably continued her pregnancy because she didn't take the second pill.

FOLEY: It's time, Senator.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator Pansing Brooks.

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PANSING BROOKS: Thank you, Mr. Lieutenant Governor. May I please ask some questions to Senator Slama?

FOLEY: Senator Slama, would you yield, please?

SLAMA: Yes.

PANSING BROOKS: Thank you, Senator Slama. So what I'm hearing that you're saying is basically this isn't about Delgado, is what you're saying. Is that right, the Delgado study?

SLAMA: Yes, it's not.

PANSING BROOKS: Okay. So then it seems to me that the Web site should probably be saying something like mife-- if I can pronounce it properly, mifepristone is not-- we could include information that it is not 100 percent effective. Is that right?

SLAMA: Yes.

PANSING BROOKS: So that, that would be more-- because, you know, as I had mentioned previously, I had some antiabortion friends who said to me that they're concerned that this is giving false hope, as written. That this amendment indicates if the doctor quotes it from the statute, that, that it will give false hope that maybe they can reverse what they're doing. And I know you're saying that's not really reversal, but stopping a procedure midway is a change of that procedure, whether you want to call it reversal or not and whether I do, it is stopping a procedure midway through. Is that correct?

SLAMA: Yes.

PANSING BROOKS: So it seems to me that we ought to be more clear and make sure that they understand that that is not 100 percent effective, you know, for-- I mean, why are we not putting that into the amendment as well?

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SLAMA: Putting what, specifically?

PANSING BROOKS: Putting in that the mifepristone is not 100 percent effective on being able to reverse or continue the pregnancy.

SLAMA: I believe that's referenced in the committee amendment, three times actually.

PANSING BROOKS: It says "may still have" but it doesn't talk about being 100 percent--

SLAMA: Mifepristone alone is not always-- sorry.

PANSING BROOKS: Thank you.

SLAMA: Research indicates that mifepristone alone is not always effective in ending a pregnancy.

PANSING BROOKS: Where are you? Where are you on the amendment? Oh, on the first page?

SLAMA: Yeah, that's on the first page. That sentence is repeated twice over in other parts of the amendment as well.

PANSING BROOKS: Okay, well, it seems to me we ought to have exact language that says it's not 100 percent effective of continuing the pregnancy. So, thank you. Thank you, Senator Slama. And I'll give the rest of my time to Senator Morfeld.

FOLEY: Thank you, Senator Pansing Brooks. Senator Morfeld, 2:30.

MORFELD: Thank you, Mr. President. And thank you, Senator Pansing Brooks. Colleagues, I haven't had a chance to get up and speak on this, but I am opposed to LB209 and with the committee amendment as well. I oppose the committee amendment and I oppose the underlying bill for a few different reasons that have been discussed at length here. First, I don't see a lot of attempts to regulate male reproductive rights in this body, so perhaps one day when I see those

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attempts happen I'll be more open to some of these other bills in consideration or maybe I won't, actually. But in any case, I'll just say that, first, I think this is unnecessary. This is information that can already be made available if the doctor feels as though it's necessary. Second, even with the amendment, which definitely I think in most people's view probably makes the bill better, I'm still opposed to it, because that's again information that we don't require for other procedures, that doctors already have the opportunity to provide if they believe it is necessary or if the patient requests that. Especially given that, I think that the research behind this is dubious at best. So I, I rise in opposition to this and I rise in opposition to any attempt to really kind of demonize and shame, in my opinion, shame women in their decision--

FOLEY: One minute.

MORFELD: --that is often a really tough decision for women. I can't even imagine having to make that decision. I know many women that are close to me that have had to make that decision and it's nothing that they relished, and I don't think that we should continue to pass laws that continue to shame them in that respect. This is information that is already available to women if they want to find it, it's information the doctor can already give to them if they feel as though it's necessary and appropriate. And that's why I'm in opposition to LB209 as amended. Thank you.

FOLEY: Thank you, Senator Morfeld. Senator Wishart.

WISHART: Thank you, Mr. President. I actually had some questions for Senator Lathrop. Will he yield?

FOLEY: Senator Lathrop, would you yield, please?

LATHROP: Sure.

WISHART: So, Senator Lathrop, you weren't here when I was talking to Senator Albrecht. My main concerns exist within Sections 5 and 6 of this bill around the Department of Health and Human Services' Web site. And so I'd like some clarity from you, in terms of what were your

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intentions when you were working on this compromise. Is it your understanding that this language, that there could potentially be a hotline on this Web site that women are directed to?

LATHROP: Actually-- so this involved some negotiation back and forth. At one point, one of the amendments that was offered as a proposal included a hotline. We took that out and said, simply what we had for language that you see in the amendment. What happens when it gets to HHS? I didn't have an opportunity to talk to anybody at HHS and I don't know what their process is, Senator. I would think if it's the Department of Health and Human Services that it's going to be something medicine-based, medically based, and not, you know, send you to somebody with-- someplace that's not good information. It's the Health and Human Services agency, right? But I'll grant you that, that at one time there was a proposal that was tendered during our discussions that had a specific Web site, and I was not comfortable with that. We left it up to Health and Human Services agency what to put in there, and that's why the amendment looks as it looks.

WISHART: So is there anything currently in this bill that would prohibit the Department of Health and Human Services from posting that Web site that you were uncomfortable with on this-- from posting that link on this Web site?

LATHROP: So you and I've looked at the language. I don't know. There's nothing that gives them specific direction what to do or what not to do, they're just to populate the Web site with information.

WISHART: Okay, thank you, Senator Lathrop. Colleagues, this is just some of the concern I have is that we have worked hard with some-- with the amendments that we put in place to ensure that this bill is as medically accurate as possible. I think some in the body would still have concerns about whether it is. But then we direct people to a Web site where, for me, I have concerns whether we're following that-- that same level of prudence in terms of making sure that this website is medically accurate. Senator Albrecht, would you yield to a question?

FOLEY: Senator Albrecht, would you yield, please?

ALBRECHT: Yes.

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WISHART: Senator Albrecht-- and, again, this is something that I am definitely willing to work on, on Select File, in between now and Select File, if this bill advances. But do you have-- would you be open to the idea of including on line 4 in Section 5, "The Department of Health and Human Services shall publish and make available on its Web site medically accurate materials"?

ALBRECHT: We can certainly discuss that, but, again, as I spoke before, I felt like what they said on page 1, lines 25 through 26, 27, 28 would be what they are telling them when they get the first pill.

FOLEY: One minute.

ALBRECHT: I believe that would be what would roll into what happens in the department.

WISHART: Well, and that's what I want to ensure is. I think we've covered what we are requesting of the doctors in terms of what information they will give to their patients. My concern is that we don't-- we're not using that same prudence when we are requiring the department to, to put this on their Web site. The other concern I have is, I think it makes more sense for us to list the physicians that are willing to provide this service instead of sending to-- instead of allowing for us to send women to a hotline where I don't know who's funding that hotline, I don't know whether that hotline is giving medically accurate information.

FOLEY: It's time. Thank you, Senators Wishart and Albrecht. Senator Chambers, you're recognized.

CHAMBERS: Thank you. Mr. President, I didn't like all of this stuff that they put into this section of the law. All they're trying to do is carry out the antiabortion theory, philosophy, doctrine by making it as difficult as possible for a woman. Why should you compel a doctor to say the following to the woman: That the father is liable to assist in the support of her child even in instances in which the father has offered to pay for the abortion. What does that kind of claptrap have to do anything? This is the longest, sustained stream of disingenuous religion-based claptrap that you find in these statutes. This is not a pro-life state, it is a pro-ignorance state. There was a licensing body in-- of the state, I think they were dealing with therapists, and

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they couldn't get any regulations passed because it did not pass the approval of the Catholic Conference. The Catholics called the shot on that and regulations could not be put in place. So you all are deliberately being blind to what is really going on here. All of this nonsense is designed to make it as difficult as possible for a woman to get an abortion and for a doctor who's willing to perform one to do so. If you look at-- on page 2, in line 6, it's telling you that an abortion can be performed legally only if, at a minimum, you mention all kind of things, have all kind of training, that has nothing to do with you performing the abortion, because even a nurse practitioner and all these others that can be an agent of a physician has to do all this yow-yow. All they want to do is continue putting obstacles in the way of women. And for Senator Slama to take offense and say a sexist referred to her as a woman and then hear her stand up here and listen to this patronizing of women shows me there are statements she makes that are provided to her by others. Whether or not a woman is going to carry a pregnancy to term is a decision that should belong to the woman, not Senator Lowe, not Senator Slama, not to the Pope, not to Senator Foley-- former Senator Foley, not me, not anybody else. It pertains to the woman. It is one of the most intimate, serious decisions that she will make and you should not, if you have any conscience or a shred of decency in you, agree to have all this trash that's currently in the statutes when a woman is intending to get an abortion. You all seem to think, especially people like Senator Slama, that a woman gets up and she says: "Should I wear red shoes with my outfit today or should I wear blue shoes or should I wear a different outfit?" As though the woman hasn't thought about this, hasn't agonized over it, hasn't considered the ramifications. So a bunch of people in the Legislature and somebody a few years from high school who gets statements from others, going to dictate to a woman all that she has to listen to and go through before she can have a decision carried out that she has already made. It's not for the doctor to be required to do everything he can to put obstacles in her path. All of this stuff that's in here is going to be interesting because on other bills you know what I'm going to do? I'm going to read everything that is required of a doctor to say. But the thing about it, it's supposed to be so serious that a doctor's not the only one. A doctor who's to perform the abortion, a referring physician, a nurse, several different people who serve as an agent of the physician. Now, if it's that important, why are you going to let these people who have nothing to do with performing the procedure give this information? Because you know that you have to put certain things in it to have the chance--

FOLEY: That's time, Senator.

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CHAMBERS: Thank you, Mr. President.

FOLEY: Thank you, Senator Chambers. Senator Howard.

HOWARD: Thank you, Mr. President. I was listening intently to Senator Wishart and Senator Albrecht's discussion. When I first read the section that has the requirements for the department, it, it does not mirror what we do in other statutes around telling the department to put things on Web sites. Like it's just different, and I think it's because it didn't go through our committee. There were a lot of nuanced things we could change. A good example is of the stroke system of care. We-- Senator Baker had us put a lot of information around strokes onto the Web site. We've done it for several children's health awareness issues. That being said, I do want to make sure that we're clear on the language. So would Senator Albrecht just yield to a brief question?

FOLEY: Senator Albrecht, would you yield, please?

ALBRECHT: Yes.

HOWARD: Thank you. So-- I-- and it may just be a drafting error. So it says the material shall also include information including contact information that will assist the woman in finding, finding a medical professional who can help her. Is your intention that there's a list of medical professionals on the Web site or is your intention that there's sort of an intermediary, where it's either a hotline or another Web site that would list the medical professionals? And if so-- yeah-- because we've done this before, but usually we're very proscribed on what we would put on the Web site.

ALBRECHT: Well, I would have my faith in the Department of Health and Human Services that they are not going to send a woman to someone who is not in that field of profession and that can take her through the full pregnancy.

HOWARD: Yeah. I tend to take a more trust but verify with the department. So are you thinking a list of medical professionals or are you thinking like another Web site?



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ALBRECHT: I'm certain that it would be professionals in the field. And if we have to check that before they actually get to call the folks, we can certainly do that.

HOWARD: OK. So I think that-- that actually is very clarifying for me, because I think maybe your language infers that there's a contact information for somebody else who is going to assist her in finding a medical professional, but if what you're envisioning is that literally they'll look at this spot on the DHHS Web site and there will be a list of professionals, which I think is more clear and probably gets you closer to what your aim is, which is, which is sort of assisting a woman to get to appropriate medical care. I'm happy to try to help, help with that language between now and Select, because I, I see exactly where you're trying to go, which is literally, you want someone to go on this Web site and then they're going to find that medical provider. Right? Is that--

ALBRECHT: Well, and, again, there would have to be providers throughout the whole state, so I'm-- I would imagine that, like right now if somebody wanted to do that, if they were just to Google it, and if there is in fact a hotline out there that can direct people, then I'm certain that we would probably try to marry the two together, because if someone is in an area that isn't close to someone who assists them in abortion they would have to find someone, you know, in a different area that the person would be close to so they would have to know who these professionals are that would help.

HOWARD: And then-- and this is maybe just another point of clarification. When we're considering medical professionals, what type of provider are you thinking of?

ALBRECHT: I would say ob-gyn. I believe-- I know my daughter-in-law went to the Catholic Services, and they provided the doctors and nurses that needed to help bring them through their pregnancy with the--

HOWARD: OK. So you're thinking of a specialty-level M.D.?

ALBRECHT: Yes. Yes.

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HOWARD: Or a specialty-level like APRN?

ALBRECHT: Yes.

FOLEY: One minute.

HOWARD: OK. So that, that may be something that you want to clarify then as well, so that when you're thinking of the medical professionals, it's very broad. And so you may want to clarify that you want somebody who actually has some reproductive health experience. Medical professional does not mean a dentist or a brain surgeon in this instance. And so I think there, there's an opportunity here in this section to specifically clarify what your intent is so that there isn't confusion. I work a lot with the department, and often they follow very closely exactly what we tell them to do. And so we need to be, perhaps, better as a Legislature being really, really clear as to what our expectations are for the department. We've had several incidents-- I look at Senator McDonnell's chair because he's had an incident where he put something in a bill, it didn't go the way that he wanted it to because the bill was not clear enough for the department. And so I think this is a good opportunity for us to make sure we're very, very clear on what you would like them to put in that list of providers. Thank you, Mr. President.

ALBRECHT: Thank you.

FOLEY: Thank you, Senator Howard and Senator Albrecht. Senator Hilgers.

HILGERS: Thank you, Mr. President. Good afternoon, colleagues. I rise in strong support of LB209, the green copy, but certainly as it was amended. And I agree with Senator Slama. I just want to briefly-- I won't take up all of my time, but I do want to briefly just reframe what it is we're talking about, because the amendment is a little bit different than the green copy. The amendment has a number of-- there's a number of changes to various sections in Chapter 28 of the Nebraska Statutes relating to informed consent. And by the way, the concept of informed consent is something that we have, we have, we have had in Nebraska statute for a long time when it comes to abortion. There are a number of other things that we require for informed consent to be present before an abortion can be committed or can take place. And what this-- the

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amendment does is really it adds in a number of different places roughly three sentences. Now there's some different preparatory languages-- language for these different sections, but here are the three sentences. For those of you who don't have the statute in front of you, those of you who are watching at home, I'm reading off of page 1, lines 25 to 27, of a white copy amendment, AM1432. The first sentence says: Research indicates that mifepristone alone is not always effective in ending a pregnancy. It's a-- that's a factual statement that I have heard any-- anything on the floor to suggest that that's not a true statement. You may-- next sentence says: You may still have a viable pregnancy after taking mifepristone. Also-- that's the second sentence. That also-- I haven't heard anything on the floor to suggest that that's not also a true statement. If-- the third sentence says: If you change your mind and want to continue your pregnancy after taking mifepristone, information on finding immediate medical assistance is available on the Web site of the Department of Health and Human Services. To the extent that there's a fact in that third sentence, it's just that there will be information on HHS. Now how that differs from the green copy is that doesn't involve in any way any of the potential treatments that one might prescribe or any sort of medical intervention that might occur if one were to try to continue their pregnancy after taking the first pill. And in that sense, the Delgado study and the discussion of the Delgado study, while certainly I listened to Senator Hunt's conversation about it, Senator Arch; I respect their perspectives on it. I was learning a great deal from that conversation of the various studies at play. That's not what's before us today, but I will say-- I will reference one thing in the Delgado study and that was on page 7. One of the things that Delgado referenced was the number of hotline calls, about 1,600 or so, 1,668, that were received at this particular hotline over a multiyear period from women who were interested in reversal. And to me, I think that's a key number, because that is, that is a-- there are women who in that moment-- and I think it's a-- it's one for which we should extend our greatest empathy, because as Senator Morfeld said, these are, these are, these are difficult moments for women. They're difficult moments when the father's involved for the father as well. But they're incredibly difficult and we should have-- we should extend as much empathy as we possibly can for these women in these moments. And I think in doing so it's important for us to say, hey, in that moment we want to make sure that you are informed. And what we're hearing from the Delgado study is that these women-- there are women who are seeking this information. And all we are saying is in that instance that-- all we are saying is in that instance here is a resource to go look for and find additional information. And you can be referred to an appropriate medical professional to get help. That's what the

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amendment does and that's why I support the amendment I supported. I voted for the amendment, I voted for the underlying bill, LB209, and I would yield the rest of my time to Senator Albrecht.

FOLEY: Thank you, Senator Hilgers. Senator Albrecht, 1:20.

ALBRECHT: Thank you. Thank you, Senator Hilgers. You know, I just want to get back again to what this bill is all about. The informed consent on abortion, it's a statute that provides information to women that they can decide to choose another alternative if they are not comfortable with the decision that they made. You know, in reading through this bill-- and I know a lot of us don't have time to read through every single bill, so I just want to enlighten you just a bit in what is actually within this bill, because it's not just what we put into it with the amendment but it's also what this, what this consent is all about as well. No abortion in here shall be performed except with voluntary and informed consent of the woman upon the abortion when it is to be performed. Except in the case of an emergency situation, consent to an abortion is voluntary and informed only if the woman is told that the following by the physician who is to perform the abortion, that by the referring physician, or the physician assistant or the registered nurse, which is licensed under the Uniform Credentialing Act who is an agent--

FOLEY: That's time, Senator. That's time.

ALBRECHT: Thank you.

FOLEY: Thank you, Senator Albrecht. Speaker Scheer, you're recognized.

SCHEER: Thank you, Mr. President. We've reached the allotted time on this bill and we'll move to the next item on the agenda. Thank you.

FOLEY: Thank you, Mr. Speaker. We'll clear the speaking queue. Mr. Clerk.

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CLERK: Mr. President, some items. General Affairs Committee reports LB592 to General File with amendments. Enrollment and Review reports LB641A to Select File. And an amendment to be printed to LB209 by Senator Chambers. That's all that I have, Mr. President.

FOLEY: Thank you, Mr. Clerk. Our next senator priority bill is going to be LB583. Mr. Clerk.

CLERK: LB583 is a bill by Senator Hilgers relating to the Transportation Innovation Act. (Read title.) The bill was introduced on January 22; referred to the Government, Military and Veterans Affairs Committee; advanced to General File. I do not have committee amendments; I do have other amendments, Mr. President.

FOLEY: Thank you, Mr. Clerk. Senator Hilgers, you're recognized to open on LB583.

HILGERS: Thank you, Mr. President; good afternoon, colleagues. I'm pleased to open on LB583 this afternoon. And I want to, before I start, I do want to thank Senator Arch for making this his priority bill. Many times on this floor, this year and in past years, I've spoken about the work we've done on the Transportation Committee to help make our transportation-- the building of our transportation infrastructure in Nebraska go faster, work more efficiently, and save money and we've had a number of efforts in that regard. One of which, this year, is LB616, which is my personal priority bill; last year, LB271, the NEPA Assignment bill, which is Senator Geist, at the time, priority bill. And continuing within that vein is LB583, which is an extension of authority that this Legislature has already granted to the state, the State Department of Transportation to do what is called design-build for constructing highway and bridge projects. What design-build is, is, again this was in 2016, it's a concept that essentially combines some of the steps when you create-- or you work on a major highway construction project. If you don't have design-build, how traditionally it worked is you have design, bid, and then build. Those are three separate stages. And so when you have three separate stages, you're doing them sequentially, that just take-- naturally it takes a certain amount of time. But if you're able to combine those steps and to design and build at the same time, what you're able to do is actually shave off, potentially, a significant amount of time in the process. Because instead of doing the design then doing the bid and then starting to build, you can sort of have one contractor do all of that process together. And so you're able to, potentially, save 30 to 40 percent of your overall time. And we've talked a lot

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about, in this body, about how when you save time on a major a major construction project, certainly; but even in other construction, highway construction projects, I mean, you're able to save that inflation-- construction inflation cost, you can save a significant amount of money. So in 2016, this body, I believe in a unanimous vote, in the Transportation Innovation Act, gave the state the ability to do design-build-- have design-build projects. LB583 would extend that. And there's an amendment to follow that would extend it to the counties of a certain size, I believe over 150,000 individuals in a county, if it's that size or larger, in addition to Omaha and Lincoln. And the way that those amendments came about, when we brought the extension-- when we brought this bill in to the committee, it was just the counties. And then as the city of Omaha and the city of Lincoln found out about what we were doing, they said, hey, we would love to be a part of this, too. And of course, we would love to be able to give them the tools to be able to get their projects done faster, same amount of quality, save money, do them more quickly, and use their transportation infrastructure tax dollars to get the highest and best value that they can out them. So the underlying bill is just counties. The amendment that will follow will extend that to the city of Omaha and the city of Lincoln. There was-- this bill came out of committee unanimously. There was some opposition in the committee from the engineers. They have since withdrawn that opposition. And I would ask for your green vote on LB583. Thank you, Mr. President.

FOLEY: Thank you, Senator Hilgers. Mr. Clerk.

CLERK: Mr. President. Senator Hilgers, I understand you would like to withdraw AM523?

HILGERS: That's right.

CLERK: Senator Hilgers would move to amend with AM1490.

FOLEY: Senator Hilgers, you're recognized to open on AM1490.

HILGERS: Thank you, Mr. President. As I mentioned before, AM1490 would extend LB583, the design-build authority and powers to Omaha and Lincoln.

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FOLEY: Thank you, Senator Hilgers. Debate is now open on LB583 and the pending amendment. Senator Arch.

ARCH: Thank you, Mr. President. I did prioritize this bill. I have had experience with both sides of construction on this, although not on roads, not on transportation, but rather on construction of buildings where the intent is-- and there's many variations of this, but the intent is to bring the architect and contractor together early in the process. And, you know, my experience has been to do the traditional: bid it out, and then respond to whatever the bids come in at. There's just-- my personal experience is there's such huge benefits to actually getting the contractor and architect together at the very beginning, have one source of contract there, and you then can increase the speed of the project, you can add value engineering because the contractor and the architect bring very different set of skills to the process, and having the contractor at that table and not just the architect brings a different set of eyes to the cost, and then the course is the benefit of known cost. By the time you're done with that process, you know what your costs are going to be, and there aren't the million-dollar surprises at the end of the day for how much it's going to cost. So, I do find value in this. I know that Sarpy County, as well, that I represent a piece of that, also finds value in this, so I would encourage your support. Thank you.

FOLEY: Thank you, Senator Arch. Mr. Clerk.

CLERK: Mr. President, Senator Chambers would move to bracket the bill until June 5.

FOLEY: Senator Chambers, you're recognized to open your bracket motion.

CHAMBERS: Thank you, Mr. President. Members of the Legislature, and especially Senator Hilgers and Senator Arch, I don't even care about this bill that's before us. I said what I intended to do based on that bad bill we just went through and all the nonsense being stated. We started on this bill, I'm going to say, about 3:15, just to be sure, and I know it was later than that. So if I take three hours, I will stop by 6:15, and I know that will leave enough time for Senator Hilgers to get his vote. He doesn't care when we vote on this bill, just so it moves today. It's an innocuous bill. It may or may not have value. But I doubt if more than three people: Senator Arch, Senator Hilgers, present company excepted because I'm so modest, but I just surmise that

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this bill will not encounter any opposition, so I may as well take this bill and do what I said I'm going to do, because when I said I was going to do it, I made it plural that I'm going to go use bills to do what I intend to do. And I'm going to say like Perry Mason when Hamilton Burger-- and you know if you drop the "ilton" it's hamburger. When "hamburger" says: Your Honor, I object, that question is irrelevant, immaterial, and incompetent. And Perry Mason just looks at him, because he's read the script, he said: Your Honor, I will tie this all together and show its irrelevance. And with saying only that, the judge will say: Very well, Mr. Mason, I count on you to do this, objection overruled. Well, it should be a little more put into the record if a judge is going to overrule an objection to a statement that could be considered testimony by the lawyer rather than questioning to elicit evidence, admissible evidence, from the person on the witness stand. So I'm very frank about what I'm going to do. And I say the entire collection of pages, sections, subsections of this clap-trap design to make it as difficult for a woman to get an abortion as possible needs to be read into the record. I'm not going to ask for a show of hands, because either you wouldn't show them; or if you showed them you would be lying, because I know you haven't read all of this. I'm probably the only one who read it all. This stuff was put together in bits and pieces every time some nutty thing came up in another state, this is monkey-see, monkey-do. The monkeys didn't think about it; they say it and then they said we'll run and put that in the statute too because there are people who decide what they're going to try to get into the statutes all over the country, and they sit around and come up with this crazy stuff, then legislatures like this one will roll over and lap it up. There's a lady named Julie Schmit-Albin, who talked about how delighted she was that I would be out of the Legislature by term limits because then they could get through some antiabortion legislation. She said it would be like children in a candy store, that it would be very difficult for those who favor abortion to replace Senator Chambers because he could do by himself what it's going to take a number of lobbyists to do. Acknowledging what I do after I'm no longer in a position to do anything, like they can lie about how great this corpse is in the coffin, because there is nothing else he or she can do. So I told you what I'm going to do, and I'm going to do it. I don't care if none of you listen, I don't care if none of you stay in this Chamber. This period of time is mine. It belongs to me. I will be asked, when I give talks, how I could say I own this Legislature. I say, well, because I learned the rules and I beat them at their own game. I don't grab anybody. I don't choke anybody. They write rules that they don't read. They write rules that they don't understand. They will spread a net to catch a small rabbit that has holes in it so big that an elephant can go through any one of them.



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They don't know how to contrive a net, in other words, to catch and hold a clever one. And you don't have to be too clever to escape the rules in this Legislature, because most of the people have not read them. And when they read them, they don't understand. One of the biggest disservices that had been done to this Legislature this session was when Senator Williams was in the Chair presiding and I offered a motion. It was an amendment that would strike everything from the bill before us and insert other material, and I think it may have been Senator Slama who educated a couple of these elderly gentlemen behind her that it was not relevant, because here's what the rule book says about relevance. But she and they did not know what the history of that tactic was. It's been used by the Legislature many times; I've used it, others have used it. When we get to a tight place in the session and there is not enough time for a bill to be introduced, go through a hearing, and all three stages of debate, so they will find somebody who's got a bill that doesn't mean too much to him or her, and they will make that motion, strike-- and here's the language, it's like abracadabra: Strike the original sections and insert the following new sections. And that's the way it was done. But she's young, she means well. She read what the words said, but she didn't know the history behind those words. People can read the U.S. Constitution or the state constitution and think they know what the law is. No, the law is what a court has declared the law to be. And those who see what the law as declared to be the law by a court will look at the constitution and say, that's not what the constitution says. But when the court of final jurisdiction speaks, that law is what that court said it is. That's how things can be allowed to go along for years and decades, then a more enlightened court will come along. There was a judge in whom I place a degree of confidence in what he said most of the time, Oliver Wendell Holmes, Jr. But when he said three generations of imbeciles is enough and used that as a basis to sterilize women against their will, that erased a lot of the respect that I had for Oliver Wendell Holmes, Jr. But when they made that decision, that became the law. So when you talk about our rules, you need to know what is behind those rules and what they mean and how they function in reality. So that's why I say I learn their rules. Not just what's in the book, but other ways that those rules are determined as far as meaning, by the traditions, by the practices. And I am doing what I'm doing within the rules. I'll always be within the rules. But I always say, white people run this place and all they have to do is get somebody in the Chair who says that's out of order, then back that person up, and they've changed the rules, because that's how they do when they have naked power.

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FOLEY: One minute.

CHAMBERS: And that's why my brain has to be more nimble than yours, because you only have to be 1/49. I have to be 1 against 48. So I've got to take into consideration all these others. You can sit back and say, well, I'll do this and all these others will support me, and that's when you'll speak up, that's when you'll be bold, that's when you will seem to be on the cutting edge. But I want to tell these "Repelicans" by the way, and you all are the messenger, run over there and tell them. When they were criticizing people who didn't vote on the death penalty bill-- I will stop now and speak when I'm recognized.

FOLEY: Thank you, Senator Chambers. Senator Cavanaugh.

CAVANAUGH: Thank you, Mr. President. I like to always keep Senator Chambers on his toes. Would Senator Hilgers yield to a question?

FOLEY: Senator Hilgers, will you yield, please?

HILGERS: Absolutely.

CAVANAUGH: Not necessarily opposition, I just had a question about-- I looked at the committee statement and that there was a testifier in opposition. It was the engineers?

HILGERS: Yes, that's right.

CAVANAUGH: Would you just speak to what their concerns were, and perhaps they're already addressed in the amendment, but I just wanted to know a little bit more.

HILGERS: No, thanks for that opportunity, Senator Cavanaugh. So, and they're not specifically addressed in the amendment. I think the concerns, if I were to speak to them, really go back to the whole concept of design-build that was initially put into the TIA a couple of years ago. And I think, if I were to describe it, I think it would be fair to describe it as engineers tend to do the design work. And so if you were combing design and build into one process, then maybe some

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of that work would go to the contractor, for instance, who would do the design in house. So I think it would be-- I think the way they would articulate it would be some loss of potential work.

CAVANAUGH: OK. What I do know about engineering versus the contracting work is that the engineers do a lot of the, sort of, calculations and make sure that things are up to certain standards of-- for use, for the intended use. So is there anything to account for that being taken out of the process?

HILGERS: I appreciate that question. No, there's not, because as part of that process, the design still has to be done and it still has to be done with all of the same rigor that you would have in a normal design process. It's just that it can now be done by the entity that's doing the building. And so you combine it into one process that is a little bit more seamless instead of-- how it normally goes, you have to design it, and then you have to bid whatever the design was, and then you have to then build it. So doing it this way is faster. But it doesn't, in any way, erode the quality standards or the requirements of the design process.

CAVANAUGH: OK, I think for today, I'm not going to take any more time on your bill. I'm going to look at it for Select File and educate myself a little bit more. So don't take my not voting personal. It's to give myself time to educate.

HILGERS: Thank you, Senator Cavanaugh.

FOLEY: Thank you, Senators Cavanaugh and Hilgers. Senator Chambers.

CHAMBERS: Thank you. Mr. President, members of the Legislature, I was given some breaking news, and it's going to break you all's heart. We're not going late tonight. So I will not go until six-something. At the most, I will go until 4:30 so that Senator Hilgers can get his bill moved. But Senator Hilgers should know this also; a person should not tempt the Lord. So if I say I'm going to go until 4:30, maybe to show that I might run the show down here, but I don't run it everywhere, he might decide to bring the world to an end at 4:00. Then what you going to do? You think that God couldn't make another world like this? He could do it in a-- he wouldn't even be the one to make it. He let his son, Jesus, do it. He said, Sonny, I was going to wait about 30

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eons before I let you get into the creating business, but I'm looking at those fools down there at the Nebraska Legislature, and in the same way I destroyed the whole world. Jesus would say, Daddy, without meaning to be smart-alecky, you actually didn't destroy the world, you drowned a whole lot of things, but you didn't even drown everything. And God would bring him over and put his hand around his shoulder, and say, Sonny, you're learning, you got it right, words have meaning. I didn't destroy the world. But maybe everything only on the floor of this Legislature will be destroyed. You know why I can talk like this? Because this is not a serious place. This is not where we have individual thinkers. And I want the official minion for the "Repelican" Party to run back and tell those fools don't call me radical. They say "radical Ernie Chambers." I am not that moderate. If they call me radical again, they are understating what it is that I am. But they're so used to using labels, they can't even bring themselves, as I mentioned earlier today, to say "the Democratic Party." The Democrat Party; boy, that will make them bad, sitting around drinking. When we say-- when we spring that on them, watch them, they'll hit the ceiling. And the first one who said it waited for a reaction, and there was none. You know why? Because all the Democrats said, boy, that sure is an ignorant "Repelican." He doesn't even know that the name of the party is "Democratic." Maybe it has too many syllables. But that's what Trump says. It's what the local "Repelican" Party says, because they're ignorant. They follow the leader. Trump spits and they lick it up. He's losing his mind and they follow the dictates of a madman. And some of them know better, so they have to swallow spit and convince themselves if they're going along with the party to do the greater good and cast aside the intelligence that they do have. And the Governor looks for people like that when he appoints them. You know why I say it? Because he campaigned against people who were not what he called platform "Repelicans." So anybody he appoints is a platform "Repelican." You know what a platform "Repelican" is? One who carries out the Governor's orders, and that's what the Governor said. So, Senators Clements, he's a platform "Repelican." Senator Slama, she's a platform "Repelican." And you know why I'm saying it, that's what the Governor said. And if you all don't know that, you haven't followed what your Governor--

FOLEY: One minute.

CHAMBERS: --said when he was out campaigning against sitting senators, he was calling some out because they didn't vote the way he wanted them to vote on the death penalty, the gas tax,

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and some other item. Why Lieutenant Governor Foley went to a fair that-- I think Senator Brandt was running against that preacher guy, you know, that fanatic, that religious fanatic? Governor came out, and the Lieutenant Governor, to support him, and Senator Ebke was in the Legislature. So the Lieutenant Governor ran out to support somebody against a sitting senator. And these gutless senators sat here and didn't object to it, but I did, because I have respect for the Legislature as an institution. The Governor's Office obviously has no respect for this place. And that's why they do you as an institution like they do you. Instead of finding somebody --

FOLEY: That's time, Senator.

CHAMBERS: --with life experience-- you said time?

FOLEY: That's time. That's time.

CHAMBERS: Thank you, Mr. President.

FOLEY: Thank you, Senator Chambers. Senator Moser.

MOSER: Sorry for the delay there. Thank you, Mr. President and colleagues. Back to the merits of the design-build world, in a typical public construction project, the architects and engineers will design a building and they'll develop elevations, pictures of what it's going to look like, and they declare, in advance, all the specifications: the plumbing, the electrical, the-- you know, all the options. And then the project is introduced to builders who would construct it. And then when the builders begin to construct it, sometimes they'll find things in the plan that are impossible or mistaken or illogical or something that will drive the project cost way up, and they'll come back and ask the engineers and architects to reconsider and ask for a change order. And this process of completely declaring how the project is going to look in advance, and then the constructor going out and building it exactly the way that it's predicted to be is-- when you have change orders, it's not very efficient sometimes. The design-build process gives you more input into the design as it's being constructed. And if you find out that a certain size of girders or a certain placement of footings is more expensive but not necessarily any stronger, those decisions can be made without going through change orders. So-- and I was-- while I was mayor

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of Columbus, we had various projects where we talked about design-build and that's the discussion we had. We spent many hours talking about it. So I support the bill, I support the process. It-- it's better to let the projects kind of evolve with everybody working together rather than predicting exactly how it's going to be in advance and then having those specifications be rigidly followed when a few good decisions could save you some money in the long run. Thank you.

FOLEY: Thank you, Senator Moser. Senator Chambers, you're recognized, it's your third opportunity.

CHAMBERS: Thank you, Mr. President. I'd like to ask Senator Moser a question before he moseys too far away.

FOLEY: Senator Moser, will you yield, please?

MOSER: Yes.

CHAMBERS: Senator Moser, you know something about architecture? A modicum?

MOSER: I'm not an architect.

CHAMBERS: No, no. I'm not a surgeon, but I know something about operations.

MOSER: I know a little about architecture, I'll go that far.

CHAMBERS: OK. Now, what shape is the strongest weight-bearing structure? What would the shape of that structure be, if you have an opinion?

MOSER: Well, it depends on how you're going to load the shape.

CHAMBERS: How you're going to do what?

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MOSER: How you're going to apply a load to the shape.

CHAMBERS: True. So which shape, when a load is applied, would be the strongest in bearing weight? I'm not talking about the material, because we know that if it's made of steel, whatever the shape, it will bear more weight than something made out of wood, balsa wood. So what would-- OK, let me ask you this: if you go two sides straight up horizontally, go straight up horizontally, if I go up, am I going horizontally or vertically?

MOSER: I would say vertically.

CHAMBERS: See, by me saying horizontally and my hands moving vertically, he accepted that I'm going horizontally, but I was going vertically.

MOSER: You were going vertically. I wouldn't want to be one to correct you.

CHAMBERS: But you should. When ignorance is on display, you help the ignorant one by improving his education, especially if he's arrogant or thinks he's smart. It's good-- OK now, two beams are going up and you put a piece across the two beams. Is there another shape of structure that you could use to span those beams that would be stronger in bearing weight than straight across?

MOSER: I assume with where you're going with this is that you're saying a curved structure [INAUDIBLE] two beams, an arch.

CHAMBERS: An arch, your colleague, an arch. And I think you'll find that that's what they say. I don't really know. I just read. But here's what I want to ask you about this bill. If it did not pass, what would be the greatest harm that would result from it not passing?

MOSER: Well, we continue to build projects as we have in the past.

CHAMBERS: Well, if they've been good enough in the past, why are they not good enough now?

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MOSER: Well, they would build a lot of good projects in the past. But design-build might be able to build better projects for less money. That would be the goal.

CHAMBERS: Oh, so they wouldn't be like those in the past?

MOSER: They might look just like some of the projects in the past but with little variations.

CHAMBERS: But you were right. I said if the bill is not passed, what's the greatest harm. And you were-- if it would be harm, we build just like we've always built them in the past. Had you read this bill before it came before us today?

MOSER: The design-build?

CHAMBERS: Yes.

MOSER: Yes, I had scanned through it. But I had quite a bit of familiarity with it before, I mean, the concept, anyway, before.

CHAMBERS: Is there a difference between the word "poser" and "poseur?" They sound alike, but they're not quite alike. That's your assignment: poser, and I say poseur, p-o-s-e-u-r or u-e-r. Check it out and see which letter comes first after the "s" and then tell me when you find it out. You can get it in the dictionary and there's a rhyme in store for you. It's going to start out "Senator Moser is no poseur."

FOLEY: One minute.

CHAMBERS: Not poser, poseur, and then you'll be flattered.

MOSER: I've already got some assignments for tonight, but I'll try to work that in.

CHAMBERS: OK. And members of the Legislature, you're not going to pay any attention to me if I just read this material, which I'm going to do, as much as you pay attention if I seem to be



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talking to you. And I always talk about object lessons. People will pay attention if you treat them as though they have worth, that they have value, that they are worthy of being noted, that you think enough of them to share your thoughts with them, and you wait to hear what they're saying too. This is what's called giving mutual respect. And it's based on the notion of dignity that every human being has an innate dignity. And that person may not have heard the word, may not know how to spell it if he or she hears it--

FOLEY: That's time. That's time.

CHAMBERS: --but he or she knows that what--

FOLEY: That's time, Senator Chambers.

CHAMBERS: Oh, thank you, Mr. President.

FOLEY: Thank you, Senator Chambers. Senator Hunt, you are recognized. Senator Hunt.

HUNT: Sorry, I thought you said Senator Arch. I yield my time to Senator Chambers.

FOLEY: Senator Chambers, 5:00.

CHAMBERS: Thank you, Senator Hunt. There are, many times, a bigger issue that I'm getting at. People have feelings, and people's feelings can be hurt, and they may not be able to describe to you like a psychologist or a psychiatrist would, what factors go into producing that feeling of being hurt. But a person knows what pain is when he or she feels it, if he or she cannot spell it or even describe it. So when we behave in a legislature in such a way that diminishes the value of certain groups and certain individuals, you would not like to have that done to you. When I deliberately call some people out on this floor, they don't like it. They don't feel good about it. But the things we do hurt people far more than anything I might say. They are totally insensitive until it is turned on them, then their feelings get hurt. Then they might get angry. It should be a set of circumstances when we are educated if we say we are, if we are intelligent even without being educated. That means we have an understanding, we can observe, we understand what we

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see, we can empathize. Then we would not do to others what we don't want done to us. We wouldn't do to other people's children what we don't want done to our children, provided we are sane. So I have to take the long way around a lot of times, and that's what I'm going to do when I start reading this idiotic stuff that is not antiabortion, it's anti-woman. How could somebody, a woman take offense and feel it's a sexist statement to refer to her as a woman and then stand up and talk this nonsense which indicates that women cannot think. They don't know what they are asking for when they want an abortion. See, they confuse a woman, not having an understanding of what it is she's asking for, with the kind of circumstances that drove her to make that decision. They conflate the two, put them together and don't understand either one, and they come up with not a first thing, not a secondary thing, but a tertium quid, a third something, which is neither the one over here nor the one over there and a miscombining of the two into something else which is neither, which is not like either of those two. And that's what happens when you take your orders from a Governor or "Repelican" Party, these lobbyists, and the flunkies who call you out there and make you run in here and make a fool out of yourself. And the ones you think are your friends are not going to tell you you're losing any credibility that you had. Stay in your seats sometimes. Don't always be prancing and putting yourself on display. Don't be saying things that you think are smart when they don't even apply. Sometimes the one you think is your enemy is the best friend that you might have, because a friend is not one who will mislead you and encourage you down a path where your so-called friends mock you and talk about you behind your back. You all don't have any understanding, and that's why I'm smarter than all of you. Nobody in here can make we angry enough so that I won't listen to what's being said--

FOLEY: One minute.

CHAMBERS: --so that I won't remember what's being said. So I won't draw from what they've said something that may be of value. See, somebody may pick up a handful of what he or she thinks is dirt, sand, and gravel; but I'm a jeweler, and I will look in there and I know a diamond before it's even cut because diamonds don't come out of the ground looking like they look in the setting of a ring. But I'm the one who makes it look like that. And I know that raw material when I see it. And people, not raw material, metaphorically, analogously speaking, are jewels, precious jewels. But if they allow themselves to be treated like stones, that's all they will ever be. They

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don't know what is in themselves, and my job is to bring it out. And you know why I'll do it? Because I don't care if you get mad at me.

FOLEY: That's time, Senator.

CHAMBERS: Thank you, Mr. President.

FOLEY: Senator Chambers, you are recognized to close on your bracket motion.

CHAMBERS: Thank you, Mr. President. I'm contemplating whether I ought to-- yeah, I'm going to ask for reconsideration because I have got a long way to go and a short time to get there, but we're going to do what they say can't be done. Senator Lowe knows what I'm talking about. He's probably the only one who knows-- well, I'm not going to give the guy's name, but we know who the guy was who sang that, don't we, and we know he was in "Smoky and the Bandit." And that was one of the funniest movies that I saw and it had a lot of clever things, not only in the words that were said, the jokes, but even in the visuals, if you looked at them, you could see what they were actually showing you, but you could see things behind that if you look for them. And maybe I was attributing more to them than was really there. But when I tell you that I'm going to do something on this floor, you think all it is is a waste of time, and for you it is. For me it is a waste of time, because I know there are better things that I could be doing. But because I'm in a legislature that produces trash legislation, I have got to scale my sights down and use what I have to work with. There was some children in South Africa, black children, and they were in this alleyway. And a white man was in South Africa writing about a apartheid and what it did to the black people. He wrote for "Esquire Magazine." And he said he heard this very unique kind of music, it sounded like a cross between a whistle and a flute, he had never heard an instrument like that before. And he looked in this alleyway and there was these little black children. They had what he wound up calling penny whistles. And they had contrived a way to get different tonalities, musicalities when they were all together to produce a sound that this man had never heard before. And he said when I heard that, I was amazed that such music could come from such-- he didn't say basic or any of the things that might sound degrading, but from such ordinary instruments, such simple instruments. He said then a thought hit him. That's good music, but it's a shame that the only thing they have with which to make music are these penny

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whistles. I don't just look at what is, I look at what could be. And while I'm here, I would like the "could be" to become a "what is." All of you all are smarter than you show yourselves to be. Nobody could be that dumb and make it from where you live to here in one piece if you drive on the road. You would go when the light is red, you turn left where the sign says turn right. You'd go when the sign says stop. So you have brains, you just don't use them. You just don't have that human touch and you cannot see what it is that we could do and have the potential to do by just carrying out the oath, in my case an affirmation, that we put out there when we took this office. Nebraska has poverty, but it doesn't have to be as grinding as it is. There could be cooperation in this state. There could be a better distribution of the talents--

SCHEER: One minute.

CHAMBERS: --and the abilities and the resources, and instead of the ranker and setting one group against the other group; I'm not the one who broke the city down to urban and rural, white people did that. So when you say "one nation indivisible" and you're divided in the state, that's why I say it's a lie, the country is divided. White people have control of everything. You all don't have anybody pushing against you, you all fight against each other. You all are the ones who can't get along. You turn the state over to me for a year and let me have full power, and by the time that year was over nobody would be dissatisfied and nobody would want me to leave, except the ones who have been tricking, bamboozling, and sticking it to the people by keeping them divided, fighting over crumbs, and they run off with the bakeries. But I'm not going to talk like that very often. I'm going to do things that will make you all angry. And when I'm--

SCHEER: Time, Senator. Thank you, Senator Chambers. Yes, Senator Chambers.

CHAMBERS: That's my closing, isn't it?

SCHEER: Yes, it is.

CHAMBERS: Then I would like a call of the house and I'll take a roll call vote.

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SCHEER: There's been a request to place the house under call. The question is, shall the house go under call? All those in favor please vote aye; all those opposed vote nay. Please record.

CLERK: 12 ayes, 1 nay to place the house under call.

SCHEER: The house is under call. Senators please record your presence. Those unexcused senators outside the Chamber, please return to the Chamber and record your presence. All unauthorized personnel please leave the floor. The house is under call. Senators please return to the floor, the house is under call. Senator DeBoer, would you check in please. Senator Hughes, Senator Lathrop, Senator Howard, Senator Wishart, Senator Vargas, Senator Briese, Senator Linehan, Senator Clements, please check in. Senator Lindstrom please return to the floor, the house is under call. Senator Wayne, Senator Lathrop, please return to the floor, the house is under call. Senator Chambers, we are waiting for Senator Wayne. Would you like to prefer to start? All right. The question before us is adoption of MO72 from Senator Chambers, a bracket a motion until June 5. Roll call vote, Mr. Clerk.

CLERK: (Roll call vote taken.) 0 ayes, 42 nays, Mr. President.

SCHEER: Bracket motion is not adopted. I raise the call. Mr. Clerk.

CLERK: Senator Chambers would move to reconsider that vote.

SCHEER: Senator Chambers, you're welcome to open on your reconsideration motion.

CHAMBERS: Thank you, Mr. President. Members of the Legislature, did you all detect a bit of rancor when we were considering that recon-- that conver-- whatever that bill was, Senator Albrecht's bill, however it was characterized? Did you all detect a little rancor around the edges at least in this room? That not everybody was happy with everybody else? Did you see what I managed to do? I brought all of you together, united you, and unanimously you all voted the same way. Only I could do that. And because I couldn't vote against my own motion, I didn't vote a green because that would have disturbed the unanimity. You all had a unanimous vote. But now the question is this, do you always win when the votes you cast is unanimous? Is it possible

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ever for everybody to be wrong except one person? Anything some people say, it's possible. But if anything is possible, then the word impossible has no meaning whatsoever. People don't think about what the alternative is to the thing that they say. If anything is possible, then nothing is impossible. How many of you have heard the expression what happens-- I'm going to ask Senator Moser a question if he would respond.

SCHEER: Senator Moser, would you please yield?

MOSER: Sure. I'm still thinking about the last question you asked me, but go ahead.

CHAMBERS: OK. That's why I want to get that out of your mind. That's like an earworm where you hear a song and you just can't get it out of your head. I want you to-- we're going to flush that out. Have you heard the expression what would happened if an irresistible force hit an immovable object? And they even sang a song: When an irresistible force such as you meets an old immoveable object like me. I'm asking you, what would happen if an irresistible force met an immovable object?

MOSER: Well, in the definition, neither one of those could win, but I would imagine there would be some deformation of whatever is pushing against the immovable object.

CHAMBERS: You're close, that's all-- I won't push you any further. But for any young people who may still-- that's all I'll ask you. Any truly young people who think about what we discuss here, you've heard that expression, too. But if you have one of those, you cannot have the other. If a force is irresistible, that means nothing can withstand it, so there cannot be something that is immovable. If there's something that can withstand that force, the force is not irresistible. So, if you've got an irresistible force, there cannot be an immovable object. If you've got an immoveable object, there cannot be an irresistible force, because if the object is immoveable, it will be able to resist any and everything. So, some of the most popular statements and expressions that people give, and in their mind there's a mental construct, some people might see an explosion, but some words, if you have one of them, the other one cannot be a reality. But mentally, you come up with a lot of things that don't accord with what fits the real world. And when we have discussions, like the one we had on some of this antiabortion stuff, there are

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things that people are saying that do not match what's in the real world at all. And if we were discussing any other thing, anything else, they feel like a fool saying the things that they say here. Women need to be protected and shielded only from those arrogant people who think they can tell women that they don't know what it is that they are doing when they do something that they've given a lot of thought to and therefore they need to be protected from themselves. But if you did that to the arrogant one who is presuming to read the minds and divine the hearts of these women who may be in desperate straits, they would be very offended. The only one who should be involved, unless she chooses to involve somebody else, is the woman who decides to have an abortion. I used to ridicule these Catholics and others in here so much when they said that when you have a fertilized egg you have a human being. I said that's crazy. That's not a human being anymore than an acorn is an oak tree. So then they started saying, well, life, you have life. My kidneys don't have life. My heart does not have life. That is not a human being. Now, there is a potential human being there. In a man's sperm there is a potential human being, just like in the woman's egg. There is a potential human being. But that potentiality cannot be brought to reality unless the two unite in the proper way under the appropriate circumstances. And that is not a human being. Aristotle did a lot of work that is used by scientists to this day because he believed in observing. And when you take some courses in zoology, when you get to the point where they have you to dissect a fetal pig, a lot of what you're looking for is what Aristotle described by the work he did in observing. But when you are dealing with a doctrine, you put yourself in a position to be made a fool of, because the one who spends time on this floor echoing what these men in the Catholic Church said hasn't read as much about what those early Catholic Church leaders, all men, did say. You know what they said? That a male fetus is given a soul at an earlier stage of development than a female fetus. In other words, a male was given that, whatever it is you call a soul, that forms that into a human being comes to a man at an earlier stage than it does to a woman. That was an official teaching of the Catholic Church. You didn't know it, did you? I read something that everybody said in religion. When you read what those people write, you find out more about mental gymnastics there than anywhere else. Try to make truth untruth, make untruth true, and people's head are spinning and spinning and spinning, and they don't know whether they are coming or going until some preacher or priest or rabbi or shaman will come up and put the hand on the top of the head and stop it from spinning, and whatever direction that head is facing when it stops it fixes that person for life. That's not what they believe. And you have the greatest and worst wars fought on the basis of religion. If you got

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rid of every religion on this planet, you would be-- if it took 100 steps to get from here to peace, if you got rid of all of those religions, that would be 99 of the 100 steps that need to be taken. They hate each other. They kill each other.

SCHEER: One minute.

CHAMBERS: They condemn each other to the worst of punishments that they can contrive. On the basis of religion, things they don't see, things they don't hear, so you have schemers who take advantage of people, like Jim Jones, who had the people drink that Kool-Aid in Guyana. Was it Guyana, is that where it was; do you know for sure? Somebody is nodding yes. I thought maybe I could ask a question and nobody would accept it. But there were a lot of people who drank that poison Kool-Aid because some crazy man told them to drink it. But he didn't drink it. These preachers will tell you, practice self denial, and they will be having sex with children, male and female, and you will be running around here, burning in your lust, because this lustful devil told you--

SCHEER: Time, Senator.

CHAMBERS: Thank you, Mr. President.

SCHEER: Senator Chambers, you are recognized.

CHAMBERS: Mr. President, as I look at the clock, I will quote Abraham Lincoln: The promise being made must be kept. I see by the clock on the wall, which we accept as giving the time accurately, it is 4:29. I have 60 seconds that I can do something with, and if I go beyond that 60 seconds, I will have violated my word. And my word is my bond. So in order not to take a chance of getting caught up into something and slipping beyond, I don't have to stop right at 4:30, I have to stop before it becomes 4:31. So if I've been talking and it was 4:30, it stays 4:30 until it becomes 4:31 by the clock. But if you have a more meticulous way of keeping time, you say, ah-ah, it's 4:30 plus 1 second; 4:30 plus 2 seconds. But I'm not dealing with people who think with that kind of precision. And I'm having so much fun. I'm wondering if the Lord would



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forgive me if this once I would kind of hedge on the promise that I made. But because He is as fickle as you are, Mr. President, I offer the removal of that motion if you will allow it.

SCHEER: Without objection, so ordered. Seeing no one in the queue, Senator Hilgers, you can close on AM1490. He waives closing. The question before us is adoption of AM1490 to LB583. All those in favor please vote aye; all opposed vote nay. Have all voted that wish to? Please record.

CLERK: 40 ayes, 0 nays on adoption of the amendment.

SCHEER: AM1490 is adopted. Seeing no one in the queue, Senator Hilgers, you are welcome to close on LB583. Senator Hilgers waives closing. The question before us is the advancement of LB583 to E&R Initial. All those in favor please vote aye; all those opposed vote nay. Please record.

CLERK: 40 ayes, 0 nays on the advancement of the bill.

SCHEER: LB583 is advanced to E&R Initial. Mr. Clerk for items.

CLERK: Mr. President, just one item, amendments to be printed to LB600 by Senator Bolz.

Mr. President, Senator Morfeld would move to adjourn the body until Tuesday morning at 9:00.

SCHEER: Colleagues, you've heard the motion. All those in favor please say aye. Any opposed say nay. We are adjourned.