LB1215
2024

LEGISLATIVE BILL 1215

Approved by the Governor April 2, 2024

Introduced by Hansen, 16.

A BILL FOR AN ACT relating to public health and welfare; to amend sections 38-142, 38-2854, 38-2890, 38-28,104, 42-371.01, 71-211, 71-212, 71-217, 71-220, 71-222.01, 71-223, 71-434, 71-601.01, 71-3608, 71-3610, 71-3613, and 71-3614, Reissue Revised Statutes of Nebraska, sections 28-410, 28-414, 38-1,146, 38-2001, 38-2847, 71-605, 71-2454, 71-2478, and 71-8505, Revised Statutes Cumulative Supplement, 2022, and sections 38-131, 38-1801, 38-1812, 38-2801, 68-911, 71-612, and 71-2479, Revised Statutes Supplement, 2023; to adopt the Dietitian Licensure Compact and the Physician Assistant (PA) Licensure Compact; to change requirements relating to pharmacy inventories and prescriptions for controlled substances; to provide and change requirements relating to issuance and renewal of certain credentials under the Uniform Credentialing Act; to provide requirements for self-inspection of pharmacies; to provide verification requirements for pharmacists and pharmacy technicians; to change an age requirement for pharmacy interns; to change registration requirements for pharmacy technicians; to change prescription requirements for certain legend drugs; to provide for coverage under the medical assistance program for certain breast pumps and lactation visits; to change an examination requirement for barbers; to eliminate a fee under the Health Care Facility Licensure Act; to define a term; to change the standard form for death certificates; to provide for the use of abstracts of death as prescribed; to change a requirement for prescription drug monitoring; to change a requirement for persons with communicable tuberculosis; to change powers and duties of the Department of Health and Human Services relating to the care, maintenance, and treatment of persons with communicable tuberculosis; to change a requirement relating to telehealth consultations; to harmonize provisions; to provide operative dates; to repeal the original sections; and to declare an emergency.

Be it enacted by the people of the State of Nebraska,

Section 1. This section shall be known and may be cited as the Physician Assistant (PA) Licensure Compact. The State of Nebraska adopts the Physician Assistant (PA) Licensure Compact in the form substantially as follows:

SECTION 1. PURPOSE

In order to strengthen access to Medical Services, and in recognition of the advances in the delivery of Medical Services, the Participating States of the PA Licensure Compact have allied in common purpose to develop a comprehensive process that complements the existing authority of State Licensing Boards to license and discipline PAs and seeks to enhance the portability of a License to practice as a PA while safeguarding the safety of patients. This Compact allows Medical Services to be provided by PAs, via the mutual recognition of the Licensee's Qualifying License by other Compact Participating States. This Compact also adopts the prevailing standard for PA licensure and affirms that the practice and delivery of Medical Services by the PA occurs where the patient is located at the time of the patient encounter, and therefore requires the PA to be under the jurisdiction of the State Licensing Board where the patient is located. State Licensing Boards that participate in this Compact retain the jurisdiction to impose Adverse Action against a Compact Privilege in that State issued to a PA through the procedures of this Compact. The PA Licensure Compact will alleviate burdens for military families by allowing active duty military personnel and their spouses to obtain a Compact Privilege based on having an unrestricted License in good standing from a Participating State.

SECTION 2. DEFINITIONS

In this Compact:

A. "Adverse Action" means any administrative, civil, equitable, or criminal action permitted by a State's laws which is imposed by a Licensing Board or other authority against a PA License or License application or Compact Privilege such as License denial, censure, revocation, suspension, probation, monitoring of the Licensee, or restriction on the Licensee's practice.

B. "Compact Privilege" means the authorization granted by a Remote State to allow a Licensee from another Participating State to practice as a PA to provide Medical Services and other licensed activity to a patient located in the Remote State under the Remote State's laws and regulations.

C. "Conviction" means a finding by a court that an individual is guilty of a felony or misdemeanor offense through adjudication or entry of a plea of guilty or no contest to the charge by the offender.

D. "Criminal Background Check" means the submission of fingerprints or other biometric-based information for a License applicant for the purpose of obtaining that applicant's criminal history record information, as defined in 28 C.F.R. 20.3(d), from the State's criminal history record repository as defined in 28 C.F.R. 20.3(f).

E. "Data System" means the repository of information about Licensees,

including, but not limited to, License status and Adverse Actions, which is created and administered under the terms of this Compact.

F. "Executive Committee" means a group of directors and ex officio individuals elected or appointed pursuant to Section 7.F.2.

G. "Impaired Practitioner" means a PA whose practice is adversely affected by a health-related condition that impacts the practitioner's ability to practice.

H. "Investigative Information" means information, records, or documents received or generated by a Licensing Board pursuant to an investigation.

I. "Jurisprudence Requirement" means the assessment of an individual's knowledge of the laws and Rules governing the practice of a PA in a State.

J. "License" means current authorization by a State, other than authorization pursuant to a Compact Privilege, for a PA to provide Medical Services, which would be unlawful without current authorization.

K. "Licensee" means an individual who holds a License from a State to provide Medical Services as a PA.

L. "Licensing Board" means any State entity authorized to license and otherwise regulate PAs.

M. "Medical Services" means health care services provided for the diagnosis, prevention, treatment, cure, or relief of a health condition, injury, or disease, as defined by a State's laws and regulations.

N. "Model Compact" means the model for the PA Licensure Compact on file with The Council of State Governments or other entity as designated by the Commission.

O. "Participating State" means a State that has enacted this Compact.

P. "PA" means an individual who is licensed as a physician assistant in a State. For purposes of this Compact, any other title or status adopted by a State to replace the term "physician assistant" shall be deemed synonymous with "physician assistant" and shall confer the same rights and responsibilities to the Licensee under the provisions of this Compact at the time of its enactment.

Q. "PA Licensure Compact Commission," "Compact Commission," or "Commission" mean the national administrative body created pursuant to Section 7.A of this Compact.

R. "Qualifying License" means an unrestricted License issued by a Participating State to provide Medical Services as a PA.

S. "Remote State" means a Participating State where a Licensee who is not licensed as a PA is exercising or seeking to exercise the Compact Privilege.

T. "Rule" means a regulation promulgated by an entity that has the force and effect of law.

U. "Significant Investigative Information" means Investigative Information that a Licensing Board, after an inquiry or investigation that includes notification and an opportunity for the PA to respond if required by State law, has reason to believe is not groundless and, if proven true, would indicate more than a minor infraction.

V. "State" means any state, commonwealth, district, or territory of the United States.

SECTION 3. STATE PARTICIPATION IN THIS COMPACT

A. To participate in this Compact, a Participating State shall:

1. License PAs.

2. Participate in the Compact Commission's Data System.

3. Have a mechanism in place for receiving and investigating complaints against Licensees and License applicants.

4. Notify the Commission, in compliance with the terms of this Compact and Commission Rules, of any Adverse Action against a Licensee or License applicant and the existence of Significant Investigative Information regarding a Licensee or License applicant.

5. Fully implement a Criminal Background Check requirement, within a timeframe established by Commission Rule, by its Licensing Board receiving the results of a Criminal Background Check and reporting to the Commission whether the License applicant has been granted a License.

6. Comply with the Rules of the Compact Commission.

7. Utilize passage of a recognized national exam such as the Physician Assistant National Certifying Examination (PANCE) of the National Commission on Certification of Physician Assistants (NCCPA) as a requirement for PA licensure.

8. Grant the Compact Privilege to a holder of a Qualifying License in a Participating State.

B. Nothing in this Compact prohibits a Participating State from charging a fee for granting the Compact Privilege.

SECTION 4. COMPACT PRIVILEGE

A. To exercise the Compact Privilege, a Licensee must:

1. Have graduated from a PA program accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or other programs authorized by Commission Rule.

2. Hold current National Commission on Certification of Physician Assistants (NCCPA) certification.

3. Have no felony or misdemeanor Conviction.

4. Have never had a controlled substance license, permit, or registration suspended or revoked by a State or by the United States Drug Enforcement Administration.

5. Have a unique identifier as determined by Commission Rule.

6. Hold a Qualifying License.

7. Have had no revocation of a License or limitation or restriction on any

License currently held due to an Adverse Action.

8. If a Licensee has had a limitation or restriction on a License or Compact Privilege due to an Adverse Action, two years must have elapsed from the date on which the License or Compact Privilege is no longer limited or restricted due to the Adverse Action.

9. If a Compact Privilege has been revoked or is limited or restricted in a Participating State for conduct that would not be a basis for disciplinary action in a Participating State in which the Licensee is practicing or applying to practice under a Compact Privilege, that Participating State shall have the discretion not to consider such action as an Adverse Action requiring the denial or removal of a Compact Privilege in that State.

10. Notify the Compact Commission that the Licensee is seeking the Compact Privilege in a Remote State.

11. Meet any Jurisprudence Requirement of a Remote State in which the Licensee is seeking to practice under the Compact Privilege and pay any fees applicable to satisfying the Jurisprudence Requirement.

12. Report to the Commission any Adverse Action taken by a non-Participating State within thirty days after the action is taken.

B. The Compact Privilege is valid until the expiration or revocation of the Qualifying License unless terminated pursuant to an Adverse Action. The Licensee must also comply with all of the requirements of subsection A above to maintain the Compact Privilege in a Remote State. If the Participating State takes Adverse Action against a Qualifying License, the Licensee shall lose the Compact Privilege in any Remote State in which the Licensee has a Compact Privilege until all of the following occur:

1. The License is no longer limited or restricted; and

2. Two years have elapsed from the date on which the License is no longer limited or restricted due to the Adverse Action.

C. Once a restricted or limited License satisfies the requirements of subsections B.1 and 2, the Licensee must meet the requirements of subsection A to obtain a Compact Privilege in any Remote State.

D. For each Remote State in which a PA seeks authority to prescribe controlled substances, the PA shall satisfy all requirements imposed by such State in granting or renewing such authority.

SECTION 5. DESIGNATION OF THE STATE FROM WHICH THE LICENSEE IS APPLYING FOR A COMPACT PRIVILEGE

A. Upon a Licensee's application for a Compact Privilege, the Licensee shall identify to the Commission the Participating State from which the Licensee is applying, in accordance with applicable Rules adopted by the Commission, and subject to the following requirements:

1. When applying for a Compact Privilege, the Licensee shall provide the Commission with the address of the Licensee's primary residence and thereafter shall immediately report to the Commission any change in the address of the Licensee's primary residence.

2. When applying for a Compact Privilege, the Licensee is required to consent to accept service of process by mail at the Licensee's primary residence on file with the Commission with respect to any action brought against the Licensee by the Commission or a Participating State, including a subpoena, with respect to any action brought or investigation conducted by the Commission or a Participating State.

SECTION 6. ADVERSE ACTIONS

A. A Participating State in which a Licensee is licensed shall have exclusive power to impose Adverse Action against the Qualifying License issued by that Participating State.

B. In addition to the other powers conferred by State law, a Remote State shall have the authority, in accordance with existing State due process law, to do all of the following:

1. Take Adverse Action against a PA's Compact Privilege within that State to remove a Licensee's Compact Privilege or take other action necessary under applicable law to protect the health and safety of its citizens.

2. Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses as well as the production of evidence. Subpoenas issued by a Licensing Board in a Participating State for the attendance and testimony of witnesses or the production of evidence from another Participating State shall be enforced in the latter State by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the State in which the witnesses or evidence are located.

3. Notwithstanding subsection 2, subpoenas may not be issued by a Participating State to gather evidence of conduct in another State that is lawful in that other State for the purpose of taking Adverse Action against a Licensee's Compact Privilege or application for a Compact Privilege in that Participating State.

4. Nothing in this Compact authorizes a Participating State to impose discipline against a PA's Compact Privilege or to deny an application for a Compact Privilege in that Participating State for the individual's otherwise lawful practice in another State.

C. For purposes of taking Adverse Action, the Participating State which issued the Qualifying License shall give the same priority and effect to reported conduct received from any other Participating State as it would if the conduct had occurred within the Participating State which issued the Qualifying

License. In so doing, that Participating State shall apply its own State laws to determine appropriate action.

D. A Participating State, if otherwise permitted by State law, may recover from the affected PA the costs of investigations and disposition of cases resulting from any Adverse Action taken against that PA.

E. A Participating State may take Adverse Action based on the factual findings of a Remote State, provided that the Participating State follows its own procedures for taking the Adverse Action.

F. Joint Investigations

1. In addition to the authority granted to a Participating State by its respective State PA laws and regulations or other applicable State law, any Participating State may participate with other Participating States in joint investigations of Licensees.

2. Participating States shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under this Compact.

G. If an Adverse Action is taken against a PA's Qualifying License, the PA's Compact Privilege in all Remote States shall be deactivated until two years have elapsed after all restrictions have been removed from the Qualifying License. All disciplinary orders by the Participating State which issued the Qualifying License that impose Adverse Action against a PA's License shall include a Statement that the PA's Compact Privilege is deactivated in all Participating States during the pendency of the order.

H. If any Participating State takes Adverse Action, it promptly shall notify the administrator of the Data System.

SECTION 7. ESTABLISHMENT OF THE PA LICENSURE COMPACT COMMISSION

A. The Participating States hereby create and establish a joint government agency and national administrative body known as the PA Licensure Compact Commission. The Commission is an instrumentality of the Compact States acting jointly and not an instrumentality of any one State. The Commission shall come into existence on or after the effective date of the Compact as set forth in Section 11.A.

B. Membership, Voting, and Meetings

1. Each Participating State shall have and be limited to one delegate selected by that Participating State's Licensing Board or, if the State has more than one Licensing Board, selected collectively by the Participating State's Licensing Boards.

2. The delegate shall be either:

a. A current PA, physician, or public member of a Licensing Board or PA Council/Committee; or

b. An administrator of a Licensing Board.

3. Any delegate may be removed or suspended from office as provided by the laws of the State from which the delegate is appointed.

4. The Participating State Licensing Board shall fill any vacancy occurring in the Commission within sixty days.

5. Each delegate shall be entitled to one vote on all matters voted on by the Commission and shall otherwise have an opportunity to participate in the business and affairs of the Commission. A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates' participation in meetings by telecommunications, videoconference, or other means of communication.

6. The Commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in this Compact and the bylaws.

7. The Commission shall establish by Rule a term of office for delegates.

C. The Commission shall have the following powers and duties:

1. Establish a code of ethics for the Commission;

2. Establish the fiscal year of the Commission;

3. Establish fees;

4. Establish bylaws;

5. Maintain its financial records in accordance with the bylaws;

6. Meet and take such actions as are consistent with the provisions of this Compact and the bylaws;

7. Promulgate Rules to facilitate and coordinate implementation and administration of this Compact. The Rules shall have the force and effect of law and shall be binding in all Participating States;

8. Bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any State Licensing Board to sue or be sued under applicable law shall not be affected;

9. Purchase and maintain insurance and bonds;

10. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a Participating State;

11. Hire employees and engage contractors, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of this Compact, and establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

12. Accept any and all appropriate donations and grants of money, equipment, supplies, materials, and services, and receive, utilize, and dispose of the same; provided that at all times the Commission shall avoid any appearance of impropriety or conflict of interest;

13. Lease, purchase, accept appropriate gifts or donations of, or otherwise own, hold, improve, or use, any property, real, personal, or mixed; provided that at all times the Commission shall avoid any appearance of

impropriety;

14. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property, real, personal, or mixed;

15. Establish a budget and make expenditures;

16. Borrow money;

17. Appoint committees, including standing committees composed of members, State regulators, State legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this Compact and the bylaws;

18. Provide and receive information from, and cooperate with, law enforcement agencies;

19. Elect a Chair, Vice Chair, Secretary, and Treasurer and such other officers of the Commission as provided in the Commission's bylaws;

20. Reserve for itself, in addition to those reserved exclusively to the Commission under the Compact, powers that the Executive Committee may not exercise;

21. Approve or disapprove a State's participation in the Compact based upon its determination as to whether the State's Compact legislation departs in a material manner from the Model Compact language;

22. Prepare and provide to the Participating States an annual report; and

23. Perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the State regulation of PA licensure and practice.

D. Meetings of the Commission

1. All meetings of the Commission that are not closed pursuant to this subsection shall be open to the public. Notice of public meetings shall be posted on the Commission's website at least thirty days prior to the public meeting.

2. Notwithstanding subsection D.1 of this section, the Commission may convene a public meeting by providing at least twenty-four hours prior notice on the Commission's website, and any other means as provided in the Commission's Rules, for any of the reasons it may dispense with notice of proposed rulemaking under Section 9.L.

3. The Commission may convene in a closed, nonpublic meeting or nonpublic part of a public meeting to receive legal advice or to discuss:

a. Noncompliance of a Participating State with its obligations under this Compact;

b. The employment, compensation, discipline, or other matters, practices, or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;

c. Current, threatened, or reasonably anticipated litigation;

d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;

e. Accusing any person of a crime or formally censuring any person;

f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;

g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;

h. Disclosure of investigative records compiled for law enforcement purposes;

i. Disclosure of information related to any investigative reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to this Compact;

j. Legal advice; or

k. Matters specifically exempted from disclosure by federal or Participating States' statutes.

4. If a meeting, or portion of a meeting, is closed pursuant to this provision, the chair of the meeting or the chair's designee shall certify that the meeting or portion of the meeting may be closed and shall reference each relevant exempting provision.

5. The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.

E. Financing of the Commission

1. The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

2. The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.

3. The Commission may levy on and collect an annual assessment from each Participating State and may impose Compact Privilege fees on Licensees of Participating States to whom a Compact Privilege is granted to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved by the Commission each year for which revenue is not provided by other sources. The aggregate annual assessment amount levied on Participating States shall be allocated based upon a formula to be determined by Commission Rule.

a. A Compact Privilege expires when the Licensee's Qualifying License in the Participating State from which the Licensee applied for the Compact

Privilege expires.

b. If the Licensee terminates the Qualifying License through which the Licensee applied for the Compact Privilege before its scheduled expiration, and the Licensee has a Qualifying License in another Participating State, the Licensee shall inform the Commission that it is changing to that Participating State the Participating State through which it applies for a Compact Privilege and pay to the Commission any Compact Privilege fee required by Commission Rule.

4. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the Participating States, except by and with the authority of the Participating State.

5. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the financial review and accounting procedures established under its bylaws. All receipts and disbursements of funds handled by the Commission shall be subject to an annual financial review by a certified or licensed public accountant, and the report of the financial review shall be included in and become part of the annual report of the Commission.

F. The Executive Committee

1. The Executive Committee shall have the power to act on behalf of the Commission according to the terms of this Compact and Commission Rules.

2. The Executive Committee shall be composed of nine members:

a. Seven voting members who are elected by the Commission from the current membership of the Commission;

b. One ex officio, nonvoting member from a recognized national PA professional association; and

c. One ex officio, nonvoting member from a recognized national PA certification organization.

3. The ex officio members will be selected by their respective organizations.

4. The Commission may remove any member of the Executive Committee as provided in its bylaws.

5. The Executive Committee shall meet at least annually.

6. The Executive Committee shall have the following duties and responsibilities:

a. Recommend to the Commission changes to the Commission's Rules or bylaws, changes to this Compact legislation, fees to be paid by Compact Participating States such as annual dues, and any Commission Compact fee charged to Licensees for the Compact Privilege;

b. Ensure Compact administration services are appropriately provided, contractual or otherwise;

c. Prepare and recommend the budget;

d. Maintain financial records on behalf of the Commission;

e. Monitor Compact compliance of Participating States and provide compliance reports to the Commission;

f. Establish additional committees as necessary;

g. Exercise the powers and duties of the Commission during the interim between Commission meetings, except for issuing proposed rulemaking or adopting Commission Rules or bylaws, or exercising any other powers and duties exclusively reserved to the Commission by the Commission's Rules; and

h. Perform other duties as provided in the Commission's Rules or bylaws.

7. All meetings of the Executive Committee at which it votes or plans to vote on matters in exercising the powers and duties of the Commission shall be open to the public, and public notice of such meetings shall be given as public meetings of the Commission are given.

8. The Executive Committee may convene in a closed, nonpublic meeting for the same reasons that the Commission may convene in a nonpublic meeting as set forth in Section 7.D.3 and shall announce the closed meeting as the Commission is required to under Section 7.D.4 and keep minutes of the closed meeting as the Commission is required to under Section 7.D.5.

G. Qualified Immunity, Defense, and Indemnification

1. The members, officers, executive director, employees, and representatives of the Commission shall have no greater liability than a state employee would have under the same or similar circumstances, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred, within the scope of Commission employment, duties, or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person. The procurement of insurance of any type by the Commission shall not in any way compromise or limit the immunity granted hereunder.

2. The Commission shall defend any member, officer, executive director, employee, or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or as determined by the Commission that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining their

own counsel at their own expense; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

3. The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

4. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses in any proceedings as authorized by Commission Rules.

5. Nothing herein shall be construed as a limitation on the liability of any Licensee for professional malpractice or misconduct, which shall be governed solely by any other applicable State laws.

6. Nothing herein shall be construed to designate the venue or jurisdiction to bring actions for alleged acts of malpractice, professional misconduct, negligence, or other such civil action pertaining to the practice of a PA. All such matters shall be determined exclusively by State law other than this Compact.

7. Nothing in this Compact shall be interpreted to waive or otherwise abrogate a Participating State's state action immunity or state action affirmative defense with respect to antitrust claims under the Sherman Act, the Clayton Act, or any other State or federal antitrust or anticompetitive law or regulation.

8. Nothing in this Compact shall be construed to be a waiver of sovereign immunity by the Participating States or by the Commission.

SECTION 8. DATA SYSTEM

A. The Commission shall provide for the development, maintenance, operation, and utilization of a coordinated data and reporting system containing licensure, Adverse Action, and the reporting of the existence of Significant Investigative Information on all licensed PAs and applicants denied a License in Participating States.

B. Notwithstanding any other State law to the contrary, a Participating State shall submit a uniform data set to the Data System on all PAs to whom this Compact is applicable (utilizing a unique identifier) as required by the Rules of the Commission, including:

1. Identifying information;

2. Licensure data;

3. Adverse Actions against a License or Compact Privilege;

4. Any denial of application for licensure, and the reason(s) for such denial (excluding the reporting of any criminal history record information where prohibited by law);

5. The existence of Significant Investigative Information; and

6. Other information that may facilitate the administration of this Compact, as determined by the Rules of the Commission.

C. Significant Investigative Information pertaining to a Licensee in any Participating State shall only be available to other Participating States.

D. The Commission shall promptly notify all Participating States of any Adverse Action taken against a Licensee or an individual applying for a License that has been reported to it. This Adverse Action information shall be available to any other Participating State.

E. Participating States contributing information to the Data System may, in accordance with State or federal law, designate information that may not be shared with the public without the express permission of the contributing State. Notwithstanding any such designation, such information shall be reported to the Commission through the Data System.

F. Any information submitted to the Data System that is subsequently expunged pursuant to federal law or the laws of the Participating State contributing the information shall be removed from the Data System upon reporting of such by the Participating State to the Commission.

G. The records and information provided to a Participating State pursuant to this Compact or through the Data System, when certified by the Commission or an agent thereof, shall constitute the authenticated business records of the Commission, and shall be entitled to any associated hearsay exception in any relevant judicial, quasi-judicial, or administrative proceedings in a Participating State.

SECTION 9. RULEMAKING

A. The Commission shall exercise its Rulemaking powers pursuant to the criteria set forth in this Section and the Rules adopted thereunder. Commission Rules shall become binding as of the date specified by the Commission for each Rule.

B. The Commission shall promulgate reasonable Rules in order to effectively and efficiently implement and administer this Compact and achieve its purposes. A Commission Rule shall be invalid and have no force or effect only if a court of competent jurisdiction holds that the Rule is invalid because the Commission exercised its rulemaking authority in a manner that is beyond the scope of the purposes of this Compact, or the powers granted

hereunder, or based upon another applicable standard of review.

C. The Rules of the Commission shall have the force of law in each Participating State, provided however that where the Rules of the Commission conflict with the laws of the Participating State that establish the medical services a PA may perform in the Participating State, as held by a court of competent jurisdiction, the Rules of the Commission shall be ineffective in that State to the extent of the conflict.

D. If a majority of the legislatures of the Participating States rejects a Commission Rule, by enactment of a statute or resolution in the same manner used to adopt this Compact within four years of the date of adoption of the Rule, then such Rule shall have no further force and effect in any Participating State or to any State applying to participate in the Compact.

E. Commission Rules shall be adopted at a regular or special meeting of the Commission.

F. Prior to promulgation and adoption of a final Rule or Rules by the Commission, and at least thirty days in advance of the meeting at which the Rule will be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking:

1. On the website of the Commission or other publicly accessible platform;

2. To persons who have requested notice of the Commission's notices of proposed rulemaking; and

3. In such other way(s) as the Commission may by Rule specify.

G. The Notice of Proposed Rulemaking shall include:

1. The time, date, and location of the public hearing on the proposed Rule and the proposed time, date, and location of the meeting in which the proposed Rule will be considered and voted upon;

2. The text of the proposed Rule and the reason for the proposed Rule;

3. A request for comments on the proposed Rule from any interested person and the date by which written comments must be received; and

4. The manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing or provide any written comments.

H. Prior to adoption of a proposed Rule, the Commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.

I. If the hearing is to be held via electronic means, the Commission shall publish the mechanism for access to the electronic hearing.

1. All persons wishing to be heard at the hearing shall as directed in the Notice of Proposed Rulemaking, not less than five business days before the scheduled date of the hearing, notify the Commission of their desire to appear and testify at the hearing.

2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.

3. All hearings shall be recorded. A copy of the recording and the written comments, data, facts, opinions, and arguments received in response to the proposed rulemaking shall be made available to a person upon request.

4. Nothing in this section shall be construed as requiring a separate hearing on each proposed Rule. Proposed Rules may be grouped for the convenience of the Commission at hearings required by this section.

J. Following the public hearing the Commission shall consider all written and oral comments timely received.

K. The Commission shall, by majority vote of all delegates, take final action on the proposed Rule and shall determine the effective date of the Rule, if adopted, based on the Rulemaking record and the full text of the Rule.

1. If adopted, the Rule shall be posted on the Commission's website.

2. The Commission may adopt changes to the proposed Rule provided the changes do not enlarge the original purpose of the proposed Rule.

3. The Commission shall provide on its website an explanation of the reasons for substantive changes made to the proposed Rule as well as reasons for substantive changes not made that were recommended by commenters.

4. The Commission shall determine a reasonable effective date for the Rule. Except for an emergency as provided in subsection L, the effective date of the Rule shall be no sooner than thirty days after the Commission issued the notice that it adopted the Rule.

L. Upon determination that an emergency exists, the Commission may consider and adopt an emergency Rule with twenty-four hours' prior notice, without the opportunity for comment or hearing, provided that the usual rulemaking procedures provided in this Compact and in this section shall be retroactively applied to the Rule as soon as reasonably possible, in no event later than ninety days after the effective date of the Rule. For the purposes of this provision, an emergency Rule is one that must be adopted immediately by the Commission in order to:

1. Meet an imminent threat to public health, safety, or welfare;

2. Prevent a loss of Commission or Participating State funds;

3. Meet a deadline for the promulgation of a Commission Rule that is established by federal law or Rule; or

4. Protect public health and safety.

M. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted Commission Rule for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a

period of thirty days after posting. The revision may be challenged only on grounds that the revision results in a material change to a Rule. A challenge shall be made as set forth in the notice of revisions and delivered to the Commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.

N. No Participating State's rulemaking requirements shall apply under this Compact.

SECTION 10. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

A. Oversight

1. The executive and judicial branches of State government in each Participating State shall enforce this Compact and take all actions necessary and appropriate to implement the Compact.

2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings. Nothing herein shall affect or limit the selection or propriety of venue in any action against a licensee for professional malpractice, misconduct, or any such similar matter.

3. The Commission shall be entitled to receive service of process in any proceeding regarding the enforcement or interpretation of the Compact or the Commission's Rules and shall have standing to intervene in such a proceeding for all purposes. Failure to provide the Commission with service of process shall render a judgment or order in such proceeding void as to the Commission, this Compact, or Commission Rules.

B. Default, Technical Assistance, and Termination

1. If the Commission determines that a Participating State has defaulted in the performance of its obligations or responsibilities under this Compact or the Commission Rules, the Commission shall provide written notice to the defaulting State and other Participating States. The notice shall describe the default, the proposed means of curing the default, and any other action that the Commission may take and shall offer remedial training and specific technical assistance regarding the default.

2. If a State in default fails to cure the default, the defaulting State may be terminated from this Compact upon an affirmative vote of a majority of the delegates of the Participating States, and all rights, privileges, and benefits conferred by this Compact upon such State may be terminated on the effective date of termination. A cure of the default does not relieve the offending State of obligations or liabilities incurred during the period of default.

3. Termination of participation in this Compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Commission to the governor, the majority and minority leaders of the defaulting State's legislature, and to the Licensing Board of each Participating State.

4. A State that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

5. The Commission shall not bear any costs related to a State that is found to be in default or that has been terminated from this Compact, unless agreed upon in writing between the Commission and the defaulting State.

6. The defaulting State may appeal its termination from the Compact by the Commission by petitioning the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices. The prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

7. Upon the termination of a State's participation in the Compact, the State shall immediately provide notice to all Licensees within that State of such termination.

a. Licensees who have been granted a Compact Privilege in that State shall retain the Compact Privilege for one hundred eighty days following the effective date of such termination.

b. Licensees who are licensed in that State who have been granted a Compact Privilege in a Participating State shall retain the Compact Privilege for one hundred eighty days unless the Licensee also has a Qualifying License in a Participating State or obtains a Qualifying License in a Participating State before the one-hundred-eighty-day period ends, in which case the Compact Privilege shall continue.

C. Dispute Resolution

1. Upon request by a Participating State, the Commission shall attempt to resolve disputes related to this Compact that arise among Participating States and between Participating and non-Participating States.

2. The Commission shall promulgate a Rule providing for both mediation and binding dispute resolution for disputes as appropriate.

D. Enforcement

1. The Commission, in the reasonable exercise of its discretion, shall enforce the provisions of this Compact and Rules of the Commission.

2. If compliance is not secured after all means to secure compliance have been exhausted, by majority vote, the Commission may initiate legal action in the United States District Court for the District of Columbia or the federal

district where the Commission has its principal offices, against a Participating State in default to enforce compliance with the provisions of this Compact and the Commission's promulgated Rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

3. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or State law.

E. Legal Action Against the Commission

1. A Participating State may initiate legal action against the Commission in the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices to enforce compliance with the provisions of the Compact and its Rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

2. No person other than a Participating State shall enforce this Compact against the Commission.

SECTION 11. DATE OF IMPLEMENTATION OF THE PA LICENSURE COMPACT

A. This Compact shall come into effect on the date on which this Compact statute is enacted into law in the seventh Participating State.

1. On or after the effective date of the Compact, the Commission shall convene and review the enactment of each of the States that enacted the Compact prior to the Commission convening ("Charter Participating States") to determine if the statute enacted by each such Charter Participating State is materially different than the Model Compact.

a. A Charter Participating State whose enactment is found to be materially different from the Model Compact shall be entitled to the default process set forth in Section 10.B.

b. If any Participating State later withdraws from the Compact or its participation is terminated, the Commission shall remain in existence and the Compact shall remain in effect even if the number of Participating States should be less than seven. Participating States enacting the Compact subsequent to the Commission convening shall be subject to the process set forth in Section 7.C.21 to determine if their enactments are materially different from the Model Compact and whether they qualify for participation in the Compact.

2. Participating States enacting the Compact subsequent to the seven initial Charter Participating States shall be subject to the process set forth in Section 7.C.21 to determine if their enactments are materially different from the Model Compact and whether they qualify for participation in the Compact.

3. All actions taken for the benefit of the Commission or in furtherance of the purposes of the administration of the Compact prior to the effective date of the Compact or the Commission coming into existence shall be considered to be actions of the Commission unless specifically repudiated by the Commission.

B. Any State that joins this Compact shall be subject to the Commission's Rules and bylaws as they exist on the date on which this Compact becomes law in that State. Any Rule that has been previously adopted by the Commission shall have the full force and effect of law on the day this Compact becomes law in that State.

C. Any Participating State may withdraw from this Compact by enacting a statute repealing the same.

1. A Participating State's withdrawal shall not take effect until one hundred eighty days after enactment of the repealing statute. During this period of one hundred eighty days, all Compact Privileges that were in effect in the withdrawing State and were granted to Licensees licensed in the withdrawing State shall remain in effect. If any Licensee licensed in the withdrawing State is also licensed in another Participating State or obtains a license in another Participating State within the one hundred eighty days, the Licensee's Compact Privileges in other Participating States shall not be affected by the passage of the one hundred eighty days.

2. Withdrawal shall not affect the continuing requirement of the State Licensing Board of the withdrawing State to comply with the investigative and Adverse Action reporting requirements of this Compact prior to the effective date of withdrawal.

3. Upon the enactment of a statute withdrawing a State from this Compact, the State shall immediately provide notice of such withdrawal to all Licensees within that State. Such withdrawing State shall continue to recognize all Licenses and Compact Privileges to practice within that State granted pursuant to this Compact for a minimum of one hundred eighty days after the date of such notice of withdrawal.

D. Nothing contained in this Compact shall be construed to invalidate or prevent any PA licensure agreement or other cooperative arrangement between Participating States and between a Participating State and non-Participating State that does not conflict with the provisions of this Compact.

E. This Compact may be amended by the Participating States. No amendment to this Compact shall become effective and binding upon any Participating State until it is enacted materially in the same manner into the laws of all Participating States as determined by the Commission.

SECTION 12. CONSTRUCTION AND SEVERABILITY

A. This Compact and the Commission's rulemaking authority shall be

liberally construed so as to effectuate the purposes, implementation, and administration of the Compact. Provisions of the Compact expressly authorizing or requiring the promulgation of Rules shall not be construed to limit the Commission's rulemaking authority solely for those purposes.

B. The provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision of this Compact is held by a court of competent jurisdiction to be contrary to the constitution of any Participating State, of a State seeking participation in the Compact, or of the United States, or the applicability thereof to any government, agency, person, or circumstance is held to be unconstitutional by a court of competent jurisdiction, the validity of the remainder of this Compact and the applicability thereof to any other government, agency, person, or circumstance shall not be affected thereby.

C. Notwithstanding subsection B of this section, the Commission may deny a State's participation in the Compact or, in accordance with the requirements of Section 10.B, terminate a Participating State's participation in the Compact, if it determines that a constitutional requirement of a Participating State is, or would be with respect to a State seeking to participate in the Compact, a material departure from the Compact. Otherwise, if this Compact shall be held to be contrary to the constitution of any Participating State, the Compact shall remain in full force and effect as to the remaining Participating States and in full force and effect as to the Participating State affected as to all severable matters.

SECTION 13. BINDING EFFECT OF COMPACT

A. Nothing herein prevents the enforcement of any other law of a Participating State that is not inconsistent with this Compact.

B. Any laws in a Participating State in conflict with this Compact are superseded to the extent of the conflict.

C. All agreements between the Commission and the Participating States are binding in accordance with their terms.

Sec. 2. This section shall be known and may be cited as the Dietitian Licensure Compact. The State of Nebraska adopts the Dietitian Licensure Compact in the form substantially as follows:

SECTION 1. PURPOSE

The purpose of this Compact is to facilitate interstate Practice of Dietetics with the goal of improving public access to dietetics services. This Compact preserves the regulatory authority of States to protect public health and safety through the current system of State licensure, while also providing for licensure portability through a Compact Privilege granted to qualifying professionals.

This Compact is designed to achieve the following objectives:

A. Increase public access to dietetics services;

B. Provide opportunities for interstate practice by Licensed Dietitians who meet uniform requirements;

C. Eliminate the necessity for Licenses in multiple States;

D. Reduce administrative burdens on Member States and Licensees;

E. Enhance the States' ability to protect the public's health and safety;

F. Encourage the cooperation of Member States in regulating multistate practice of Licensed Dietitians;

G. Support relocating Active Military Members and their spouses;

H. Enhance the exchange of licensure, investigative, and disciplinary information among Member States; and

I. Vest all Member States with the authority to hold a Licensed Dietitian accountable for meeting all State practice laws in the State in which the patient is located at the time care is rendered.

SECTION 2. DEFINITIONS

As used in this Compact, and except as otherwise provided, the following definitions shall apply:

A. "ACEND" means the Accreditation Council for Education in Nutrition and Dietetics or its successor organization.

B. "Active Military Member" means any individual with full-time duty status in the active armed forces of the United States, including members of the National Guard and Reserve.

C. "Adverse Action" means any administrative, civil, equitable, or criminal action permitted by a State's laws which is imposed by a Licensing Authority or other authority against a Licensee, including actions against an individual's License or Compact Privilege such as revocation, suspension, probation, monitoring of the Licensee, limitation on the Licensee's practice, or any other Encumbrance on licensure affecting a Licensee's authorization to practice, including issuance of a cease and desist action.

D. "Alternative Program" means a non-disciplinary monitoring or practice remediation process approved by a Licensing Authority.

E. "Charter Member State" means any Member State which enacted this Compact by law before the Effective Date specified in Section 12.

F. "Continuing Education" means a requirement, as a condition of License renewal, to provide evidence of participation in, and completion of, educational and professional activities relevant to practice or area of work.

G. "CDR" means the Commission on Dietetic Registration or its successor organization.

H. "Compact Commission" means the government agency whose membership consists of all States that have enacted this Compact, which is known as the Dietitian Licensure Compact Commission, as described in Section 8 of this Compact, and which shall operate as an instrumentality of the Member States.

I. "Compact Privilege" means a legal authorization, which is equivalent to

a License, permitting the Practice of Dietetics in a Remote State.

J. "Current Significant Investigative Information" means:

1. Investigative Information that a Licensing Authority, after a preliminary inquiry that includes notification and an opportunity for the subject Licensee to respond, if required by State law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or

2. Investigative Information that indicates that the subject Licensee represents an immediate threat to public health and safety regardless of whether the subject Licensee has been notified and had an opportunity to respond.

K. "Data System" means a repository of information about Licensees, including, but not limited to, Continuing Education, examination, licensure, investigative, Compact Privilege, and Adverse Action information.

L. "Encumbered License" means a License in which an Adverse Action restricts a Licensee's ability to practice dietetics.

M. "Encumbrance" means a revocation or suspension of, or any limitation on a Licensee's full and unrestricted Practice of Dietetics by a Licensing Authority.

N. "Executive Committee" means a group of delegates elected or appointed to act on behalf of, and within the powers granted to them by, this Compact, and the Compact Commission.

O. "Home State" means the Member State that is the Licensee's primary State of residence or that has been designated pursuant to Section 6 of this Compact.

P. "Investigative Information" means information, records, and documents received or generated by a Licensing Authority pursuant to an investigation.

Q. "Jurisprudence Requirement" means an assessment of an individual's knowledge of the State laws and regulations governing the Practice of Dietetics in such State.

R. "License" means an authorization from a Member State to either:

1. Engage in the Practice of Dietetics (including medical nutrition therapy); or

2. Use the title "dietitian," "licensed dietitian," "licensed dietitian nutritionist," "certified dietitian," or other title describing a substantially similar practitioner as the Compact Commission may further define by Rule.

S. "Licensee" or "Licensed Dietitian" means an individual who currently holds a License and who meets all of the requirements outlined in Section 4 of this Compact.

T. "Licensing Authority" means the board or agency of a State, or equivalent, that is responsible for the licensing and regulation of the Practice of Dietetics.

U. "Member State" means a State that has enacted the Compact.

V. "Practice of Dietetics" means the synthesis and application of dietetics, primarily for the provision of nutrition care services, including medical nutrition therapy, in person or via telehealth, to prevent, manage, or treat diseases or medical conditions and promote wellness.

W. "Registered Dietitian" means a person who:

1. Has completed applicable education, experience, examination, and recertification requirements approved by CDR;

2. Is credentialed by CDR as a registered dietitian or a registered dietitian nutritionist; and

3. Is legally authorized to use the title registered dietitian or registered dietitian nutritionist and the corresponding abbreviations "RD" or "RDN."

X. "Remote State" means a Member State other than the Home State, where a Licensee is exercising or seeking to exercise a Compact Privilege.

Y. "Rule" means a regulation promulgated by the Compact Commission that has the force of law.

Z. "Single State License" means a License issued by a Member State within the issuing State and does not include a Compact Privilege in any other Member State.

AA. "State" means any state, commonwealth, district, or territory of the United States of America.

BB. "Unencumbered License" means a License that authorizes a Licensee to engage in the full and unrestricted Practice of Dietetics.

SECTION 3. STATE PARTICIPATION IN THE COMPACT

A. To participate in the Compact, a State must currently:

1. License and regulate the Practice of Dietetics; and

2. Have a mechanism in place for receiving and investigating complaints about Licensees.

B. A Member State shall:

1. Participate fully in the Compact Commission's Data System, including using the unique identifier as defined in Rules;

2. Notify the Compact Commission, in compliance with the terms of the Compact and Rules, of any Adverse Action or the availability of Current Significant Investigative Information regarding a Licensee;

3. Implement or utilize procedures for considering the criminal history record information of applicants for an initial Compact Privilege. These procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining an applicant's criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that State's criminal records;

a. A Member State must fully implement a criminal history record information requirement, within a time frame established by Rule, which includes receiving the results of the Federal Bureau of Investigation record search and shall use those results in determining Compact Privilege eligibility.

b. Communication between a Member State and the Compact Commission or among Member States regarding the verification of eligibility for a Compact Privilege shall not include any information received from the Federal Bureau of Investigation relating to a federal criminal history record information check performed by a Member State.

4. Comply with and enforce the Rules of the Compact Commission;

5. Require an applicant for a Compact Privilege to obtain or retain a License in the Licensee's Home State and meet the Home State's qualifications for licensure or renewal of licensure, as well as all other applicable State laws; and

6. Recognize a Compact Privilege granted to a Licensee who meets all of the requirements outlined in Section 4 of this Compact in accordance with the terms of the Compact and Rules.

C. Member States may set and collect a fee for granting a Compact Privilege.

D. Individuals not residing in a Member State shall continue to be able to apply for a Member State's Single State License as provided under the laws of each Member State. However, the Single State License granted to these individuals shall not be recognized as granting a Compact Privilege to engage in the Practice of Dietetics in any other Member State.

E. Nothing in this Compact shall affect the requirements established by a Member State for the issuance of a Single State License.

F. At no point shall the Compact Commission have the power to define the requirements for the issuance of a Single State License to practice dietetics. The Member States shall retain sole jurisdiction over the provision of these requirements.

SECTION 4. COMPACT PRIVILEGE

A. To exercise the Compact Privilege under the terms and provisions of the Compact, the Licensee shall:

1. Satisfy one of the following:

a. Hold a valid current registration that gives the applicant the right to use the term Registered Dietitian; or

b. Complete all of the following:

i. An education program which is either:

a) A master's degree or doctoral degree that is programmatically accredited by (i) ACEND; or (ii) a dietetics accrediting agency recognized by the United States Department of Education, which the Compact Commission may by Rule determine, and from a college or university accredited at the time of graduation by the appropriate regional accrediting agency recognized by the Council on Higher Education Accreditation and the United States Department of Education.

b) An academic degree from a college or university in a foreign country equivalent to the degree described in subparagraph (a) that is programmatically accredited by (i) ACEND; or (ii) a dietetics accrediting agency recognized by the United States Department of Education, which the Compact Commission may by Rule determine.

ii. A planned, documented, supervised practice experience in dietetics that is programmatically accredited by (i) ACEND, or (ii) a dietetics accrediting agency recognized by the United States Department of Education which the Compact Commission may by Rule determine and which involves at least one thousand hours of practice experience under the supervision of a Registered Dietitian or a Licensed Dietitian.

iii. Successful completion of either: (i) the Registration Examination for Dietitians administered by CDR, or (ii) a national credentialing examination for dietitians approved by the Compact Commission by Rule; such completion being no more than five years prior to the date of the Licensee's application for initial licensure and accompanied by a period of continuous licensure thereafter, all of which may be further governed by the Rules of the Compact Commission.

2. Hold an Unencumbered License in the Home State;

3. Notify the Compact Commission that the Licensee is seeking a Compact Privilege within a Remote State(s);

4. Pay any applicable fees, including any State fee, for the Compact Privilege;

5. Meet any Jurisprudence Requirements established by the Remote State(s) in which the Licensee is seeking a Compact Privilege; and

6. Report to the Compact Commission any Adverse Action, Encumbrance, or restriction on a License taken by any non-Member State within thirty days from the date the action is taken.

B. The Compact Privilege is valid until the expiration date of the Home State License. To maintain a Compact Privilege, renewal of the Compact Privilege shall be congruent with the renewal of the Home State License as the Compact Commission may define by Rule. The Licensee must comply with the requirements of subsection 4(A) to maintain the Compact Privilege in the Remote State(s).

C. A Licensee exercising a Compact Privilege shall adhere to the laws and regulations of the Remote State. Licensees shall be responsible for educating themselves on, and complying with, any and all State laws relating to the

Practice of Dietetics in such Remote State.

D. Notwithstanding anything to the contrary provided in this Compact or State law, a Licensee exercising a Compact Privilege shall not be required to complete Continuing Education Requirements required by a Remote State. A Licensee exercising a Compact Privilege is only required to meet any Continuing Education Requirements as required by the Home State.

SECTION 5. OBTAINING A NEW HOME STATE LICENSE BASED ON A COMPACT PRIVILEGE

A. A Licensee may hold a Home State License, which allows for a Compact Privilege in other Member States, in only one Member State at a time.

B. If a Licensee changes Home State by moving between two Member States:

1. The Licensee shall file an application for obtaining a new Home State License based on a Compact Privilege, pay all applicable fees, and notify the current and new Home State in accordance with the Rules of the Compact Commission.

2. Upon receipt of an application for obtaining a new Home State License by virtue of a Compact Privilege, the new Home State shall verify that the Licensee meets the criteria in Section 4 of this Compact via the Data System, and require that the Licensee complete the following:

a. Federal Bureau of Investigation fingerprint based criminal history record information check;

b. Any other criminal history record information required by the new Home State; and

c. Any Jurisprudence Requirements of the new Home State.

3. The former Home State shall convert the former Home State License into a Compact Privilege once the new Home State has activated the new Home State License in accordance with applicable Rules adopted by the Compact Commission.

4. Notwithstanding any other provision of this Compact, if the Licensee cannot meet the criteria in Section 4 of this Compact, the new Home State may apply its requirements for issuing a new Single State License.

5. The Licensee shall pay all applicable fees to the new Home State in order to be issued a new Home State License.

C. If a Licensee changes their State of residence by moving from a Member State to a non-Member State, or from a non-Member State to a Member State, the State criteria shall apply for issuance of a Single State License in the new State.

D. Nothing in this Compact shall interfere with a Licensee's ability to hold a Single State License in multiple States; however, for the purposes of this Compact, a Licensee shall have only one Home State License.

E. Nothing in this Compact shall affect the requirements established by a Member State for the issuance of a Single State License.

SECTION 6. ACTIVE MILITARY MEMBERS OR THEIR SPOUSES

An Active Military Member, or their spouse, shall designate a Home State where the individual has a current License in good standing. The individual may retain the Home State designation during the period the service member is on active duty.

SECTION 7. ADVERSE ACTIONS

A. In addition to the other powers conferred by State law, a Remote State shall have the authority, in accordance with existing State due process law, to:

1. Take Adverse Action against a Licensee's Compact Privilege within that Member State; and

2. Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses as well as the production of evidence. Subpoenas issued by a Licensing Authority in a Member State for the attendance and testimony of witnesses or the production of evidence from another Member State shall be enforced in the latter State by any court of competent jurisdiction, according to the practice and procedure applicable to subpoenas issued in proceedings pending before that court. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the State in which the witnesses or evidence are located.

B. Only the Home State shall have the power to take Adverse Action against a Licensee's Home State License.

C. For purposes of taking Adverse Action, the Home State shall give the same priority and effect to reported conduct received from a Member State as it would if the conduct had occurred within the Home State. In so doing, the Home State shall apply its own State laws to determine appropriate action.

D. The Home State shall complete any pending investigations of a Licensee who changes Home States during the course of the investigations. The Home State shall also have authority to take appropriate action(s) and shall promptly report the conclusions of the investigations to the administrator of the Data System. The administrator of the Data System shall promptly notify the new Home State of any Adverse Actions.

E. A Member State, if otherwise permitted by State law, may recover from the affected Licensee the costs of investigations and dispositions of cases resulting from any Adverse Action taken against that Licensee.

F. A Member State may take Adverse Action based on the factual findings of another Remote State, provided that the Member State follows its own procedures for taking the Adverse Action.

G. Joint Investigations:

1. In addition to the authority granted to a Member State by its respective State law, any Member State may participate with other Member States in joint investigations of Licensees.

2. Member States shall share any investigative, litigation, or compliance

materials in furtherance of any joint investigation initiated under the Compact.

H. If Adverse Action is taken by the Home State against a Licensee's Home State License resulting in an Encumbrance on the Home State License, the Licensee's Compact Privilege(s) in all other Member States shall be revoked until all Encumbrances have been removed from the Home State License. All Home State disciplinary orders that impose Adverse Action against a Licensee shall include a statement that the Licensee's Compact Privileges are revoked in all Member States during the pendency of the order.

I. Once an Encumbered License in the Home State is restored to an Unencumbered License (as certified by the Home State's Licensing Authority), the Licensee must meet the requirements of Section 4(A) of this Compact and follow the administrative requirements to reapply to obtain a Compact Privilege in any Remote State.

J. If a Member State takes Adverse Action, it shall promptly notify the administrator of the Data System. The administrator of the Data System shall promptly notify the other Member States State of any Adverse Actions.

K. Nothing in this Compact shall override a Member State's decision that participation in an Alternative Program may be used in lieu of Adverse Action.

SECTION 8. ESTABLISHMENT OF THE DIETITIAN LICENSURE COMPACT COMMISSION

A. The Compact Member States hereby create and establish a joint government agency whose membership consists of all Member States that have enacted the Compact known as the Dietitian Licensure Compact Commission. The Compact Commission is an instrumentality of the Compact States acting jointly and not an instrumentality of any one State. The Compact Commission shall come into existence on or after the effective date of the Compact as set forth in Section 12 of this Compact.

B. Membership, Voting, and Meetings

1. Each Member State shall have and be limited to one delegate selected by that Member State's Licensing Authority.

2. The delegate shall be the primary administrator of the Licensing Authority or their designee.

3. The Compact Commission shall by Rule or bylaw establish a term of office for delegates and may by Rule or bylaw establish term limits.

4. The Compact Commission may recommend removal or suspension of any delegate from office.

5. A Member State's Licensing Authority shall fill any vacancy of its delegate occurring on the Compact Commission within sixty days of the vacancy.

6. Each delegate shall be entitled to one vote on all matters before the Compact Commission requiring a vote by the delegates.

7. Delegates shall meet and vote by such means as set forth in the bylaws. The bylaws may provide for delegates to meet and vote in-person or by telecommunication, video conference, or other means of communication.

8. The Compact Commission shall meet at least once during each calendar year. Additional meetings may be held as set forth in the bylaws. The Compact Commission may meet in person or by telecommunication, video conference, or other means of communication.

C. The Compact Commission shall have the following powers:

1. Establish the fiscal year of the Compact Commission;

2. Establish code of conduct and conflict of interest policies;

3. Establish and amend Rules and bylaws;

4. Maintain its financial records in accordance with the bylaws;

5. Meet and take such actions as are consistent with the provisions of this Compact, the Compact Commission's Rules, and the bylaws;

6. Initiate and conclude legal proceedings or actions in the name of the Compact Commission, provided that the standing of any Licensing Authority to sue or be sued under applicable law shall not be affected;

7. Maintain and certify records and information provided to a Member State as the authenticated business records of the Compact Commission, and designate an agent to do so on the Compact Commission's behalf;

8. Purchase and maintain insurance and bonds;

9. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a Member State;

10. Conduct an annual financial review;

11. Hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the Compact, and establish the Compact Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

12. Assess and collect fees;

13. Accept any and all appropriate donations, grants of money, other sources of revenue, equipment, supplies, materials, services, and gifts, and receive, utilize, and dispose of the same; provided that at all times the Compact Commission shall avoid any actual or appearance of impropriety or conflict of interest;

14. Lease, purchase, retain, own, hold, improve, or use any property, real, personal, or mixed, or any undivided interest therein;

15. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;

16. Establish a budget and make expenditures;

17. Borrow money;

18. Appoint committees, including standing committees, composed of members, State regulators, State legislators or their representatives, and

consumer representatives, and such other interested persons as may be designated in this Compact or the bylaws;

19. Provide and receive information from, and cooperate with, law enforcement agencies;

20. Establish and elect an Executive Committee, including a chair and a vice chair;

21. Determine whether a State's adopted language is materially different from the model compact language such that the State would not qualify for participation in the Compact; and

22. Perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact.

D. The Executive Committee

1. The Executive Committee shall have the power to act on behalf of the Compact Commission according to the terms of this Compact. The powers, duties, and responsibilities of the Executive Committee shall include:

a. Oversee the day-to-day activities of the administration of the Compact including enforcement and compliance with the provisions of the Compact, its Rules and bylaws, and other such duties as deemed necessary;

b. Recommend to the Compact Commission changes to the Rules or bylaws, changes to this Compact legislation, fees charged to Compact Member States, fees charged to Licensees, and other fees;

c. Ensure Compact administration services are appropriately provided, including by contract;

d. Prepare and recommend the budget;

e. Maintain financial records on behalf of the Compact Commission;

f. Monitor Compact compliance of Member States and provide compliance reports to the Compact Commission;

g. Establish additional committees as necessary;

h. Exercise the powers and duties of the Compact Commission during the interim between Compact Commission meetings, except for adopting or amending Rules, adopting or amending bylaws, and exercising any other powers and duties expressly reserved to the Compact Commission by Rule or bylaw; and

i. Other duties as provided in the Rules or bylaws of the Compact Commission.

2. The Executive Committee shall be composed of nine members:

a. The chair and vice chair of the Compact Commission shall be voting members of the Executive Committee;

b. Five voting members from the current membership of the Compact Commission, elected by the Compact Commission;

c. One ex officio, nonvoting member from a recognized professional association representing dietitians; and

d. One ex officio, nonvoting member from a recognized national credentialing organization for dietitians.

3. The Compact Commission may remove any member of the Executive Committee as provided in the Compact Commission's bylaws.

4. The Executive Committee shall meet at least annually.

a. Executive Committee meetings shall be open to the public, except that the Executive Committee may meet in a closed, nonpublic meeting as provided in subsection (F)(2).

b. The Executive Committee shall give thirty days' notice of its meetings, posted on the website of the Compact Commission and as determined to provide notice to persons with an interest in the business of the Compact Commission.

c. The Executive Committee may hold a special meeting in accordance with subsection (F)(1)(b).

E. The Compact Commission shall adopt and provide to the Member States an annual report.

F. Meetings of the Compact Commission

1. All meetings shall be open to the public, except that the Compact Commission may meet in a closed, nonpublic meeting as provided in subsection (F)(2).

a. Public notice for all meetings of the full Compact Commission shall be given in the same manner as required under the rulemaking provisions in Section 10, except that the Compact Commission may hold a special meeting as provided in subsection (F)(1)(b).

b. The Compact Commission may hold a special meeting when it must meet to conduct emergency business by giving twenty-four hours' notice to all Member States, on the Compact Commission's website, and by other means as provided in the Compact Commission's Rules. The Compact Commission's legal counsel shall certify that the Compact Commission's need to meet qualifies as an emergency.

2. The Compact Commission or the Executive Committee or other committees of the Compact Commission may convene in a closed, nonpublic meeting for the Compact Commission or Executive Committee or other committees of the Compact Commission to receive legal advice or to discuss:

a. Non-compliance of a Member State with its obligations under the Compact;

b. The employment, compensation, discipline, or other matters, practices, or procedures related to specific employees;

c. Current or threatened discipline of a Licensee by the Compact Commission or by a Member State's Licensing Authority;

d. Current, threatened, or reasonably anticipated litigation;

e. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;

f. Accusing any person of a crime or formally censuring any person;

g. Trade secrets or commercial or financial information that is privileged or confidential;

h. Information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;

i. Investigative records compiled for law enforcement purposes;

j. Information related to any investigative reports prepared by or on behalf of or for use of the Compact Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact;

k. Matters specifically exempted from disclosure by federal or Member State law; or

l. Other matters as specified in the Rules of the Compact Commission.

3. If a meeting, or portion of a meeting, is closed, the presiding officer shall state that the meeting will be closed and reference each relevant exempting provision, and such reference shall be recorded in the minutes.

4. The Compact Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release only by a majority vote of the Compact Commission or order of a court of competent jurisdiction.

G. Financing of the Compact Commission

1. The Compact Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

2. The Compact Commission may accept any and all appropriate revenue sources as provided in subsection (C)(13).

3. The Compact Commission may levy on and collect an annual assessment from each Member State and impose fees on Licensees of Member States to whom it grants a Compact Privilege to cover the cost of the operations and activities of the Compact Commission and its staff, which must, in a total amount, be sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount for Member States shall be allocated based upon a formula that the Compact Commission shall promulgate by Rule.

4. The Compact Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Compact Commission pledge the credit of any of the Member States, except by and with the authority of the Member State.

5. The Compact Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Compact Commission shall be subject to the financial review and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Compact Commission shall be subject to an annual financial review by a certified or licensed public accountant, and the report of the financial review shall be included in and become part of the annual report of the Compact Commission.

H. Qualified Immunity, Defense, and Indemnification

1. The members, officers, executive director, employees and representatives of the Compact Commission shall have no greater liability than a state employee would have under the same or similar circumstances, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Compact Commission employment, duties, or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person. The procurement of insurance of any type by the Compact Commission shall not in any way compromise or limit the immunity granted hereunder.

2. The Compact Commission shall defend any member, officer, executive director, employee, and representative of the Compact Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Compact Commission employment, duties, or responsibilities, or as determined by the Compact Commission that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Compact Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining their own counsel at their own expense; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

3. The Compact Commission shall indemnify and hold harmless any member, officer, executive director, employee, and representative of the Compact Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of Compact Commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Compact Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

4. Nothing herein shall be construed as a limitation on the liability of

any Licensee for professional malpractice or misconduct, which shall be governed solely by any other applicable State laws.

5. Nothing in this Compact shall be interpreted to waive or otherwise abrogate a Member State's state action immunity or state action affirmative defense with respect to antitrust claims under the Sherman Act, Clayton Act, or any other State or federal antitrust or anticompetitive law or regulation.

6. Nothing in this Compact shall be construed to be a waiver of sovereign immunity by the Member States or by the Compact Commission.

SECTION 9. DATA SYSTEM

A. The Compact Commission shall provide for the development, maintenance, operation, and utilization of a coordinated Data System.

B. The Compact Commission shall assign each applicant for a Compact Privilege a unique identifier, as determined by the Rules.

C. Notwithstanding any other provision of State law to the contrary, a Member State shall submit a uniform data set to the Data System on all individuals to whom this Compact is applicable as required by the Rules of the Compact Commission, including:

1. Identifying information;

2. Licensure data;

3. Adverse Actions against a License or Compact Privilege and information related thereto;

4. Nonconfidential information related to Alternative Program participation, the beginning and ending dates of such participation, and other information related to such participation not made confidential under Member State law;

5. Any denial of application for licensure, and the reason(s) for such denial;

6. The presence of Current Significant Investigative Information; and

7. Other information that may facilitate the administration of this Compact or the protection of the public, as determined by the Rules of the Compact Commission.

D. The records and information provided to a Member State pursuant to this Compact or through the Data System, when certified by the Compact Commission or an agent thereof, shall constitute the authenticated business records of the Compact Commission, and shall be entitled to any associated hearsay exception in any relevant judicial, quasi-judicial, or administrative proceedings in a Member State.

E. Current Significant Investigative Information pertaining to a Licensee in any Member State will only be available to other Member States.

F. It is the responsibility of the Member States to report any Adverse Action against a Licensee and to monitor the Data System to determine whether any Adverse Action has been taken against a Licensee. Adverse Action information pertaining to a Licensee in any Member State will be available to any other Member State.

G. Member States contributing information to the Data System may designate information that may not be shared with the public without the express permission of the contributing State.

H. Any information submitted to the Data System that is subsequently expunged pursuant to federal law or the laws of the Member State contributing the information shall be removed from the Data System.

SECTION 10. RULEMAKING

A. The Compact Commission shall promulgate reasonable Rules in order to effectively and efficiently implement and administer the purposes and provisions of the Compact. A Rule shall be invalid and have no force or effect only if a court of competent jurisdiction holds that the Rule is invalid because the Compact Commission exercised its rulemaking authority in a manner that is beyond the scope and purposes of the Compact, or the powers granted hereunder, or based upon another applicable standard of review.

B. The Rules of the Compact Commission shall have the force of law in each Member State, provided however that where the Rules conflict with the laws or regulations of a Member State that relate to the procedures, actions, and processes a Licensed Dietitian is permitted to undertake in that State and the circumstances under which they may do so, as held by a court of competent jurisdiction, the Rules of the Compact Commission shall be ineffective in that State to the extent of the conflict.

C. The Compact Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Section and the Rules adopted thereunder. Rules shall become binding on the day following adoption or as of the date specified in the Rule or amendment, whichever is later.

D. If a majority of the legislatures of the Member States rejects a Rule or portion of a Rule, by enactment of a statute or resolution in the same manner used to adopt the Compact within four years of the date of adoption of the Rule, then such Rule shall have no further force and effect in any Member State.

E. Rules shall be adopted at a regular or special meeting of the Compact Commission.

F. Prior to adoption of a proposed Rule, the Compact Commission shall hold a public hearing and allow persons to provide oral and written comments, data, facts, opinions, and arguments.

G. Prior to adoption of a proposed Rule by the Compact Commission, and at least thirty days in advance of the meeting at which the Compact Commission will hold a public hearing on the proposed Rule, the Compact Commission shall provide a Notice of Proposed rulemaking:

1. On the website of the Compact Commission or other publicly accessible platform;

2. To persons who have requested notice of the Compact Commission's notices of proposed rulemaking; and

3. In such other way(s) as the Compact Commission may by Rule specify.

H. The Notice of Proposed rulemaking shall include:

1. The time, date, and location of the public hearing at which the Compact Commission will hear public comments on the proposed Rule and, if different, the time, date, and location of the meeting where the Compact Commission will consider and vote on the proposed Rule;

2. If the hearing is held via telecommunication, video conference, or other means of communication, the Compact Commission shall include the mechanism for access to the hearing in the Notice of Proposed rulemaking;

3. The text of the proposed Rule and the reason therefore;

4. A request for comments on the proposed Rule from any interested person; and

5. The manner in which interested persons may submit written comments.

I. All hearings will be recorded. A copy of the recording and all written comments and documents received by the Compact Commission in response to the proposed Rule shall be available to the public.

J. Nothing in this Section shall be construed as requiring a separate hearing on each Rule. Rules may be grouped for the convenience of the Compact Commission at hearings required by this Section.

K. The Compact Commission shall, by majority vote of all members, take final action on the proposed Rule based on the rulemaking record and the full text of the Rule.

1. The Compact Commission may adopt changes to the proposed Rule provided the changes do not enlarge the original purpose of the proposed Rule.

2. The Compact Commission shall provide an explanation of the reasons for substantive changes made to the proposed Rule as well as reasons for substantive changes not made that were recommended by commenters.

3. The Compact Commission shall determine a reasonable effective date for the Rule. Except for an emergency as provided in subsection 10(L), the effective date of the Rule shall be no sooner than thirty days after issuing the notice that it adopted or amended the Rule.

L. Upon determination that an emergency exists, the Compact Commission may consider and adopt an emergency Rule with twenty-four hours' notice, with opportunity to comment, provided that the usual rulemaking procedures provided in the Compact and in this Section shall be retroactively applied to the Rule as soon as reasonably possible, in no event later than ninety days after the effective date of the Rule. For the purposes of this provision, an emergency Rule is one that must be adopted immediately in order to:

1. Meet an imminent threat to public health, safety, or welfare;

2. Prevent a loss of Compact Commission or Member State funds;

3. Meet a deadline for the promulgation of a Rule that is established by federal law or rule; or

4. Protect public health and safety.

M. The Compact Commission or an authorized committee of the Compact Commission may direct revision to a previously adopted Rule for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revision shall be posted on the website of the Compact Commission. The revision shall be subject to challenge by any person for a period of thirty days after posting. The revision may be challenged only on grounds that the revision results in a material change to a Rule. A challenge shall be made in writing and delivered to the Compact Commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Compact Commission.

N. No Member State's rulemaking requirements shall apply under this Compact.

SECTION 11. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

A. Oversight

1. The executive and judicial branches of State government in each Member State shall enforce this Compact and take all actions necessary and appropriate to implement this Compact.

2. Except as otherwise provided in this Compact, venue is proper and judicial proceedings by or against the Compact Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Compact Commission is located. The Compact Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings. Nothing herein shall affect or limit the selection or propriety of venue in any action against a Licensee for professional malpractice, misconduct, or any such similar matter.

3. The Compact Commission shall be entitled to receive service of process in any proceeding regarding the enforcement or interpretation of the Compact and shall have standing to intervene in such a proceeding for all purposes. Failure to provide the Compact Commission service of process shall render a judgment or order void as to the Compact Commission, this Compact, or promulgated Rules.

B. Default, Technical Assistance, and Termination

1. If the Compact Commission determines that a Member State has defaulted in the performance of its obligations or responsibilities under this Compact or

the promulgated Rules, the Compact Commission shall provide written notice to the defaulting State. The notice of default shall describe the default, the proposed means of curing the default, and any other action that the Compact Commission may take and shall offer training and specific technical assistance regarding the default.

2. The Compact Commission shall provide a copy of the notice of default to the other Member States.

C. If a State in default fails to cure the default, the defaulting State may be terminated from the Compact upon an affirmative vote of a majority of the delegates of the Member States, and all rights, privileges, and benefits conferred on that State by this Compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending State of obligations or liabilities incurred during the period of default.

D. Termination of membership in the Compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Compact Commission to the governor, the majority and minority leaders of the defaulting State's legislature, the defaulting State's Licensing Authority, and each of the Member States' Licensing Authority.

E. A State that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

F. Upon the termination of a State's membership from this Compact, that State shall immediately provide notice to all Licensees within that State of such termination. The terminated State shall continue to recognize all Compact Privileges granted pursuant to this Compact for a minimum of six months after the date of said notice of termination.

G. The Compact Commission shall not bear any costs related to a State that is found to be in default or that has been terminated from the Compact, unless agreed upon in writing between the Compact Commission and the defaulting State.

H. The defaulting State may appeal the action of the Compact Commission by petitioning the United States District Court for the District of Columbia or the federal district where the Compact Commission has its principal offices. The prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

I. Dispute Resolution

1. Upon request by a Member State, the Compact Commission shall attempt to resolve disputes related to the Compact that arise among Member States and between Member and non-Member States.

2. The Compact Commission shall promulgate a Rule providing for both mediation and binding dispute resolution for disputes as appropriate.

J. Enforcement

1. By supermajority vote, the Compact Commission may initiate legal action against a Member State in default in the United States District Court for the District of Columbia or the federal district where the Compact Commission has its principal offices to enforce compliance with the provisions of the Compact and its promulgated Rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees. The remedies herein shall not be the exclusive remedies of the Compact Commission. The Compact Commission may pursue any other remedies available under federal or the defaulting Member State's law.

2. A Member State may initiate legal action against the Compact Commission in the United States District Court for the District of Columbia or the federal district where the Compact Commission has its principal offices to enforce compliance with the provisions of the Compact and its promulgated Rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

3. No party other than a Member State shall enforce this Compact against the Compact Commission.

SECTION 12. EFFECTIVE DATE, WITHDRAWAL, AND AMENDMENT

A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the seventh Member State.

1. On or after the effective date of the Compact, the Compact Commission shall convene and review the enactment of each of the first seven Member States ("Charter Member States") to determine if the statute enacted by each such Charter Member State is materially different than the model Compact statute.

a. A Charter Member State whose enactment is found to be materially different from the model Compact statute shall be entitled to the default process set forth in Section 11 of this Compact.

b. If any Member State is later found to be in default, or is terminated, or withdraws from the Compact, the Compact Commission shall remain in existence and the Compact shall remain in effect even if the number of Member States should be less than seven.

2. Member States enacting the Compact subsequent to the seven initial Charter Member States shall be subject to the process set forth in Section 8(C)(21) of this Compact to determine if their enactments are materially different from the model Compact statute and whether they qualify for participation in the Compact.

3. All actions taken for the benefit of the Compact Commission or in furtherance of the purposes of the administration of the Compact prior to the

effective date of the Compact or the Compact Commission coming into existence shall be considered to be actions of the Compact Commission unless specifically repudiated by the Compact Commission.

4. Any State that joins the Compact subsequent to the Compact Commission's initial adoption of the Rules and bylaws shall be subject to the Rules and bylaws as they exist on the date on which the Compact becomes law in that State. Any Rule that has been previously adopted by the Compact Commission shall have the full force and effect of law on the day the Compact becomes law in that State.

B. Any Member State may withdraw from this Compact by enacting a statute repealing the same.

1. A Member State's withdrawal shall not take effect until one hundred eighty days after enactment of the repealing statute.

2. Withdrawal shall not affect the continuing requirement of the withdrawing State's Licensing Authority to comply with the investigative and Adverse Action reporting requirements of this Compact prior to the effective date of withdrawal.

3. Upon the enactment of a statute withdrawing from this Compact, a State shall immediately provide notice of such withdrawal to all Licensees within that State. Notwithstanding any subsequent statutory enactment to the contrary, such withdrawing State shall continue to recognize all Compact Privileges granted pursuant to this Compact for a minimum of one hundred eighty days after the date of such notice of withdrawal.

C. Nothing contained in this Compact shall be construed to invalidate or prevent any licensure agreement or other cooperative arrangement between a Member State and a non-Member State that does not conflict with the provisions of this Compact.

D. This Compact may be amended by the Member States. No amendment to this Compact shall become effective and binding upon any Member State until it is enacted into the laws of all Member States.

SECTION 13. CONSTRUCTION AND SEVERABILITY

A. This Compact and the Compact Commission's rulemaking authority shall be liberally construed so as to effectuate the purposes and the implementation and administration of the Compact. Provisions of the Compact expressly authorizing or requiring the promulgation of Rules shall not be construed to limit the Compact Commission's rulemaking authority solely for those purposes.

B. The provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision of this Compact is held by a court of competent jurisdiction to be contrary to the constitution of any Member State, a State seeking participation in the Compact, or of the United States, or the applicability thereof to any government, agency, person, or circumstance is held to be unconstitutional by a court of competent jurisdiction, the validity of the remainder of this Compact and the applicability thereof to any other government, agency, person, or circumstance shall not be affected thereby.

C. Notwithstanding subsection 13(B), the Compact Commission may deny a State's participation in the Compact or, in accordance with the requirements of Section 11(B) of this Compact, terminate a Member State's participation in the Compact, if it determines that a constitutional requirement of a Member State is a material departure from the Compact. Otherwise, if this Compact shall be held to be contrary to the constitution of any Member State, the Compact shall remain in full force and effect as to the remaining Member States and in full force and effect as to the Member State affected as to all severable matters.

SECTION 14. CONSISTENT EFFECT AND CONFLICT WITH OTHER STATE LAWS

A. Nothing herein shall prevent or inhibit the enforcement of any other law of a Member State that is not inconsistent with the Compact.

B. Any laws, statutes, regulations, or other legal requirements in a Member State in conflict with the Compact are superseded to the extent of the conflict.

C. All permissible agreements between the Compact Commission and the Member States are binding in accordance with their terms.

Sec. 3. Section 28-410, Revised Statutes Cumulative Supplement, 2022, is amended to read:

28-410 (1) Each registrant manufacturing, distributing, or dispensing controlled substances in Schedule I, II, III, IV, or V of section 28-405 shall keep and maintain a complete and accurate record of all stocks of such controlled substances on hand. Such records shall be maintained for five years.

(2) Each registrant manufacturing, distributing, storing, or dispensing such controlled substances shall prepare a biennial ~~an annual~~ inventory of each controlled substance in the registrant's ~~his or her~~ possession in accordance with 21 C.F.R. 1304.11, as such regulation existed on January 1, 2024. Such inventory shall ~~(a)~~ be taken within two years ~~one year~~ after the previous ~~annual~~ inventory date~~, (b) contain such information as shall be required by the Board of Pharmacy, (c) be copied and such copy forwarded to the department within thirty days after completion, (d) be maintained at the location listed on the registration for a period of five years, (e) contain the name, address, and Drug Enforcement Administration number of the registrant, the date and time of day the inventory was completed, and the signature of the person responsible for taking the inventory, (f) list the exact count or measure of all controlled substances listed in Schedules I, II, III, IV, and V of section 28-405, and (g) be maintained in permanent, read-only format separating the inventory for controlled substances listed in Schedules I and II of section 28-405 from the inventory for controlled substances listed in Schedules III, IV, and V of section 28-405~~. A registrant whose inventory fails to comply with this

subsection shall be guilty of a Class IV misdemeanor.

(3) This section shall not apply to practitioners who prescribe or administer, as a part of their practice, controlled substances listed in Schedule II, III, IV, or V of section 28-405 unless such practitioner regularly engages in dispensing any such drug or drugs to his or her patients.

(4) Controlled substances shall be stored in accordance with the following:

(a) All controlled substances listed in Schedule I of section 28-405 must be stored in a locked cabinet; and

(b) All controlled substances listed in Schedule II, III, IV, or V of section 28-405 must be stored in a locked cabinet or distributed throughout the inventory of noncontrolled substances in a manner which will obstruct theft or diversion of the controlled substances or both.

(5) Each pharmacy which is registered with the administration and in which controlled substances are stored or dispensed shall complete a controlled-substances inventory when there is a change in the pharmacist-in-charge. The inventory shall contain the information required in the annual inventory, and the original copy shall be maintained in the pharmacy for five years after the date it is completed.

Sec. 4. Section 28-414, Revised Statutes Cumulative Supplement, 2022, is amended to read:

28-414 (1) Except as otherwise provided in this section or section 28-412 or when administered directly by a practitioner to an ultimate user, a controlled substance listed in Schedule II of section 28-405 shall not be dispensed without a prescription from a practitioner authorized to prescribe. All ~~Beginning January 1, 2022, all~~ such prescriptions shall be subject to section 38-1,146~~, except that all such prescriptions issued by a practitioner who is a dentist shall be subject to section 38-1,146 beginning January 1, 2024~~. No prescription for a controlled substance listed in Schedule II of section 28-405 shall be filled more than six months from the date of issuance. A prescription for a controlled substance listed in Schedule II of section 28-405 shall not be refilled.

(2)(a) Except as provided in subdivision (2)(b) of this section, a ~~(2) A~~ prescription for controlled substances listed in Schedule II of section 28-405 must contain the following information prior to being filled by a pharmacist or dispensing practitioner: (i) ~~(a)~~ Patient's name and address, (ii) ~~(b)~~ name of the drug, device, or biological, (iii) ~~(c)~~ strength of the drug or biological, if applicable, (iv) ~~(d)~~ dosage form of the drug or biological, (v) ~~(e)~~ quantity of the drug, device, or biological prescribed, (vi) ~~(f)~~ directions for use, (vii) ~~(g)~~ date of issuance, (viii) ~~(h)~~ prescribing practitioner's name and address, and (ix) ~~(i)~~ Drug Enforcement Administration number of the prescribing practitioner.

(b) After consultation with the prescribing practitioner, a pharmacist may add or change the dosage form, drug strength, drug quantity, directions for use, and issue date for a prescription for a controlled substance listed in Schedule II of section 28-405.

(c) If the prescription is a written paper prescription, the paper prescription must contain the prescribing practitioner's manual signature. If the prescription is an electronic prescription, the electronic prescription must contain all of the elements in subdivision (2)(a) of this section ~~subdivisions (a) through (i) of this subsection~~, must be digitally signed, and must be transmitted to and received by the pharmacy electronically to meet all of the requirements of the Controlled Substances Act, 21 U.S.C. 801 et seq., as it existed on January 1, 2014, pertaining to electronic prescribing of controlled substances.

(3)(a) In emergency situations, a controlled substance listed in Schedule II of section 28-405 may be dispensed pursuant to an oral prescription reduced to writing in accordance with subsection (2) of this section, except for the prescribing practitioner's signature, and bearing the word "emergency".

(b) For purposes of this section, emergency situation means a situation in which a prescribing practitioner determines that (i) immediate administration of the controlled substance is necessary for proper treatment of the patient, (ii) no appropriate alternative treatment is available, including administration of a drug which is not a controlled substance listed in Schedule II of section 28-405, and (iii) it is not reasonably possible for the prescribing practitioner to provide a signed, written or electronic prescription to be presented to the person dispensing the controlled substance prior to dispensing.

(4)(a) In nonemergency situations:

(i) A controlled substance listed in Schedule II of section 28-405 may be dispensed pursuant to a facsimile of a written, signed paper prescription if the original written, signed paper prescription is presented to the pharmacist for review before the controlled substance is dispensed, except as provided in subdivision (a)(ii) or (iii) of this subsection;

(ii) A narcotic drug listed in Schedule II of section 28-405 may be dispensed pursuant to a facsimile of a written, signed paper prescription (A) to be compounded for direct parenteral administration to a patient for the purpose of home infusion therapy or (B) for administration to a patient enrolled in a hospice care program and bearing the words "hospice patient"; and

(iii) A controlled substance listed in Schedule II of section 28-405 may be dispensed pursuant to a facsimile of a written, signed paper prescription for administration to a resident of a long-term care facility.

(b) For purposes of subdivisions (a)(ii) and (iii) of this subsection, a

LB1215
2024

facsimile of a written, signed paper prescription shall serve as the original written prescription and shall be maintained in accordance with subsection (1) of section 28-414.03.

(5)(a) A prescription for a controlled substance listed in Schedule II of section 28-405 may be partially filled if the pharmacist does not supply the full quantity prescribed and he or she makes a notation of the quantity supplied on the face of the prescription or in the electronic record. The remaining portion of the prescription may be filled no later than thirty days after the date on which the prescription is written. The pharmacist shall notify the prescribing practitioner if the remaining portion of the prescription is not or cannot be filled within such period. No further quantity may be supplied after such period without a new written, signed paper prescription or electronic prescription.

(b) A prescription for a controlled substance listed in Schedule II of section 28-405 written for a patient in a long-term care facility or for a patient with a medical diagnosis documenting a terminal illness may be partially filled. Such prescription shall bear the words "terminally ill" or "long-term care facility patient" on its face or in the electronic record. If there is any question whether a patient may be classified as having a terminal illness, the pharmacist shall contact the prescribing practitioner prior to partially filling the prescription. Both the pharmacist and the prescribing practitioner have a corresponding responsibility to assure that the controlled substance is for a terminally ill patient. For each partial filling, the dispensing pharmacist shall record on the back of the prescription or on another appropriate record, uniformly maintained and readily retrievable, the date of the partial filling, quantity dispensed, remaining quantity authorized to be dispensed, and the identification of the dispensing pharmacist. The total quantity of controlled substances listed in Schedule II which is dispensed in all partial fillings shall not exceed the total quantity prescribed. A prescription for a Schedule II controlled substance for a patient in a long-term care facility or a patient with a medical diagnosis documenting a terminal illness is valid for sixty days from the date of issuance or until discontinuance of the prescription, whichever occurs first.

Sec. 5. Section 38-131, Revised Statutes Supplement, 2023, is amended to read:

38-131 (1) An applicant for an initial license to practice as a physician assistant, a registered nurse, a licensed practical nurse, a physical therapist, a physical therapy assistant, a psychologist, an advanced emergency medical technician, an emergency medical technician, an audiologist, a speech-language pathologist, a licensed independent mental health practitioner, an occupational therapist, an occupational therapy assistant, a dietitian, or a paramedic or to practice a profession which is authorized to prescribe controlled substances shall be subject to a criminal background check. Except as provided in subsection (4) of this section, such an applicant for an initial license shall submit a full set of fingerprints to the Nebraska State Patrol for a criminal history record information check. The applicant shall authorize release of the results of the national criminal history record information check by the Federal Bureau of Investigation to the department. The applicant shall pay the actual cost of the fingerprinting and criminal background check.

(2) The Nebraska State Patrol is authorized to submit the fingerprints of such applicants to the Federal Bureau of Investigation and to issue a report to the department that includes the criminal history record information concerning the applicant. The Nebraska State Patrol shall forward submitted fingerprints to the Federal Bureau of Investigation for a national criminal history record information check. The Nebraska State Patrol shall issue a report to the department that includes the criminal history record information concerning the applicant.

(3) This section shall not apply to a dentist who is an applicant for a dental locum tenens under section 38-1122, to a physician or osteopathic physician who is an applicant for a physician locum tenens under section 38-2036, or to a veterinarian who is an applicant for a veterinarian locum tenens under section 38-3335.

(4) An applicant for a temporary educational permit as defined in section 38-2019 shall have ninety days from the issuance of the permit to comply with subsection (1) of this section and shall have such permit suspended after such ninety-day period if the criminal background check is not complete or revoked if the criminal background check reveals that the applicant was not qualified for the permit.

(5) The department and the Nebraska State Patrol may adopt and promulgate rules and regulations concerning costs associated with the fingerprinting and the national criminal history record information check.

(6) For purposes of interpretation by the Federal Bureau of Investigation, the term department in this section means the Division of Public Health of the Department of Health and Human Services.

Sec. 6. Section 38-142, Reissue Revised Statutes of Nebraska, is amended to read:

38-142 (1) The credential to practice a profession shall be renewed biennially upon request of the credentialed person and upon documentation of continuing competency pursuant to sections 38-145 and 38-146. The renewals provided for in this section shall be accomplished in such manner and on such date as the department, with the recommendation of the appropriate board, may establish.

The request for renewal shall be accompanied by the renewal fee and

include all information required by the department ~~and shall be accompanied by the renewal fee~~. Requests to renew licenses for licensed practical nurses, registered nurses, and advanced practice registered nurses shall include evidence that the licensee has registered with the electronic database utilized by the department for the purpose of providing the licensee with current license status and nursing workforce data collection. The renewal ~~Such~~ fee shall be paid not later than the date of the expiration of such credential, except that persons actively engaged in the military service of the United States, as defined in the Servicemembers Civil Relief Act, 50 U.S.C. App. 501 et seq., as the act existed on January 1, 2007, shall not be required to pay the renewal fee.

(2) At least thirty days before the expiration of a credential, the department shall notify each credentialed person at his or her last address of record. If a credentialed person fails to notify the department of his or her desire to have his or her credential placed on inactive status upon its expiration, fails to meet the requirements for renewal on or before the date of expiration of his or her credential, or otherwise fails to renew his or her credential, it shall expire. When a person's credential expires, the right to represent himself or herself as a credentialed person and to practice the profession in which a credential is required shall terminate. Any credentialed person who fails to renew the credential by the expiration date and desires to resume practice of the profession shall apply to the department for reinstatement of the credential.

(3) When a person credentialed pursuant to the Uniform Credentialing Act desires to have his or her credential placed on inactive status, he or she shall notify the department of such desire in writing. The department shall notify the credentialed person in writing of the acceptance or denial of the request to allow the credential to be placed on inactive status. When the credential is placed on inactive status, the credentialed person shall not engage in the practice of such profession, but he or she may represent himself or herself as having an inactive credential. A credential may remain on inactive status for an indefinite period of time.

Sec. 7. Section 38-1,146, Revised Statutes Cumulative Supplement, 2022, is amended to read:

38-1,146 (1) For purposes of this section, prescriber means a health care practitioner authorized to prescribe controlled substances in the practice for which credentialed under the Uniform Credentialing Act.

(2) Except as otherwise provided in subsection (3) or (6) of this section, no prescriber shall, in this state, issue any prescription as defined in section 38-2840 for a controlled substance as defined in section 28-401 unless such prescription is issued (a) using electronic prescription technology, (b) from the prescriber issuing the prescription to a pharmacy, and (c) in accordance with all requirements of state law and the rules and regulations adopted and promulgated pursuant to such state law.

(3) The requirements of subsection (2) of this section shall not apply to prescriptions:

(a) Issued by veterinarians;

(b) Issued in circumstances where electronic prescribing is not available due to temporary technological or electrical failure;

(c) Issued when the prescriber and the dispenser are the same entity;

(d) Issued that include elements that are not supported by the Prescriber/Pharmacist Interface SCRIPT Standard of the National Council for Prescription Drug Programs as such standard existed on January 1, 2021;

(e) Issued for a drug for which the federal Food and Drug Administration requires the prescription to contain certain elements that are not able to be accomplished with electronic prescribing;

(f) Issued for dispensing a non-patient-specific prescription which is (i) an approved protocol for drug therapy or (ii) in response to a public health emergency;

(g) Issued for a drug for purposes of a research protocol;

(h) Issued under circumstances in which, notwithstanding the prescriber's ability to make an electronic prescription as required by this section, such prescriber reasonably determines (i) that it would be impractical for the patient to obtain substances prescribed by electronic prescription in a timely manner and (ii) that such delay would adversely impact the patient's medical condition; ~~or~~

(i) Issued for drugs requiring compounding; or ~~.~~

(j) Issued by a prescriber who issues fewer than fifty prescriptions in one calendar year otherwise subject to subsection (2) of this section.

(4) A pharmacist who receives a written, oral, or faxed prescription is not required to verify that the prescription falls under one of the exceptions listed in subsection (3) of this section. A pharmacist may continue to dispense medication from any otherwise valid written, oral, or faxed prescription consistent with the law and rules and regulations as they existed prior to January 1, 2022.

(5) A violation of this section shall not be grounds for disciplinary action under the Uniform Credentialing Act.

(6) A dentist shall not be subject to this section until January 1, 2024.

Sec. 8. Section 38-1801, Revised Statutes Supplement, 2023, is amended to read:

38-1801 Sections 38-1801 to 38-1822 and section 9 of this act shall be known and may be cited as the Medical Nutrition Therapy Practice Act.

Sec. 9. (1) A person holding a Compact Privilege under the Dietitian

Licensure Compact may engage in the Practice of Dietetics in Nebraska as authorized pursuant to such compact.

(2) The board may approve, and the department may adopt and promulgate, rules and regulations as necessary to carry out this section.

Sec. 10. Section 38-1812, Revised Statutes Supplement, 2023, is amended to read:

38-1812 No person shall practice medical nutrition therapy unless such person is licensed for such purpose pursuant to the Uniform Credentialing Act or holds a Compact Privilege under the Dietitian Licensure Compact. The practice of medical nutrition therapy shall be provided with the consultation of a physician licensed pursuant to section 38-2026 or sections 38-2029 to 38-2033, a nurse practitioner licensed pursuant to section 38-2317, or a physician assistant licensed pursuant to section 38-2049. The Medical Nutrition Therapy Practice Act shall not be construed to require a license under the act in order to:

(1) Practice medical nutrition therapy within the scope of the official duties of an employee of the state or federal government or while serving in the armed forces of the United States;

(2) Engage in practice within the scope of a credential issued under the Uniform Credentialing Act;

(3) Practice medical nutrition therapy as a student while pursuing a course of study leading to a degree in dietetics, nutrition, or an equivalent major course of study from an accredited school or program as part of a supervised course of study, if all of the following apply: (a) The person is not engaged in the unrestricted practice of medical nutrition therapy; (b) the person uses a title clearly indicating the person's status as a student or trainee; and (c) the person is in compliance with appropriate supervision requirements developed by the board, including the requirement that the supervised practice experience must be under the order, control, and full professional responsibility of such supervisor. Nothing in this subdivision shall be construed to permit students, trainees, or supervisees to practice medical nutrition therapy other than as specifically allowed in this subdivision and as provided in section 38-1822;

(4) Be employed as a nutrition or dietetic technician or other food service professional who is working in a hospital setting or other regulated health care facility or program and who has been trained and is supervised while engaged in the provision of medical nutrition therapy by an individual licensed pursuant to the Medical Nutrition Therapy Practice Act whose services are retained by that facility or program on a full-time or regular, part-time, or consultant basis;

(5) Provide individualized nutrition information, guidance, motivation, nutrition recommendations, behavior change management, health coaching, holistic and wellness education, or other nutrition-care services that do not constitute medical nutrition therapy as long as such activity is being performed by a person who is not licensed under the Medical Nutrition Therapy Practice Act and who is not acting in the capacity of or claiming to be a licensed dietitian nutritionist or licensed nutritionist;

(6) Accept or transmit written, verbal, delegated, or electromagnetically transmitted orders for medical nutrition therapy from a referring provider by a registered nurse or licensed practical nurse;

(7) Provide medical nutrition therapy without remuneration to family members;

(8) Aide in the provision of medical nutrition therapy if:

(a) The person performs nutrition-care services at the direction of an individual licensed under the Uniform Credentialing Act whose scope of practice includes provision of medical nutrition therapy; and

(b) The person performs only support activities of medical nutrition therapy that do not require the exercise of independent judgment for which a license under the Medical Nutrition Therapy Practice Act is required;

(9) Practice medical nutrition therapy if the practitioner is licensed in another state, United States territory, or country, has received at least a baccalaureate degree, and is in this state for the purpose of:

(a) Consultation, if the practice in this state is limited to consultation; or

(b) Conducting a teaching clinical demonstration in connection with a program of basic clinical education, graduate education, or postgraduate education which is sponsored by a dietetic education program or a major course of study in human nutrition, food and nutrition, or dietetics, or an equivalent major course of study approved by the board;

(10) Perform individualized general nutrition-care services, not constituting medical nutrition therapy, incidental to the practice of the profession insofar as it does not exceed the scope of the person's education and training;

(11) Market or distribute food, food materials, or dietary supplements, advise regarding the use of those products or the preparation of those products, or counsel individuals or groups in the selection of products to meet general nutrition needs;

(12) Conduct classes or disseminate general nonmedical nutrition information;

(13) Provide care for the sick in accordance with the tenets and practices of any bona fide church or religious denomination;

(14) Practice medical nutrition therapy for the limited purpose of education and research by any person with a master's or doctoral degree from a

United States accredited college or university with a major course of study in nutrition or an equivalent course of study as approved by the department;

(15) Provide information and instructions regarding food intake or exercise as a part of a weight control program;

(16) Participate in academic teaching or research with an advanced postgraduate degree; and

(17) Present a general program of instruction for medical weight control for an individual with prediabetes or obesity if the program has been approved in writing by, consultation is available from, and no program change is initiated without prior approval from, any one of the following:

(a) A licensed dietitian nutritionist or a licensed nutritionist;

(b) A registered dietitian or registered dietitian nutritionist;

(c) A certified nutritionist specialist; or

(d) A licensed health care practitioner acting within the scope of such practitioner's license as part of a plan of care.

Sec. 11. Section 38-2001, Revised Statutes Cumulative Supplement, 2022, is amended to read:

38-2001 Sections 38-2001 to 38-2064 and section 12 of this act shall be known and may be cited as the Medicine and Surgery Practice Act.

Sec. 12. A person holding a compact privilege to practice in Nebraska under the Physician Assistant (PA) Licensure Compact may act as a physician assistant as authorized pursuant to such compact.

Sec. 13. Section 38-2801, Revised Statutes Supplement, 2023, is amended to read:

38-2801 Sections 38-2801 to 38-28,107 and section 14 of this act and the Nebraska Drug Product Selection Act shall be known and may be cited as the Pharmacy Practice Act.

Sec. 14. Effective January 1, 2025, any self-inspection of a pharmacy or a hospital pharmacy shall be made using a form authorized by the board. The board shall authorize the form for use beginning January 1, 2025, on or before November 1, 2024, and such form shall remain in effect for a period of at least one year. Any updates to the form for subsequent years shall be authorized on or before November 1 of that year. If the board fails to authorize the form on or before November 1 of any year, any inspection of a pharmacy or hospital pharmacy for the following calendar year shall be conducted by the board or department, as applicable.

Sec. 15. Section 38-2847, Revised Statutes Cumulative Supplement, 2022, is amended to read:

38-2847 (1) Verification means the confirmation by a supervising pharmacist of the accuracy and completeness of the acts, tasks, or functions undertaken by a pharmacy technician to assist the pharmacist in the practice of pharmacy.

(2) Verification shall occur by a pharmacist on duty in the facility, except that verification may occur by means of a real-time audiovisual communication system if (a) a pharmacy technician performs authorized activities or functions to assist a pharmacist and the prescribed drugs or devices will be administered to persons who are patients or residents of a facility by a credentialed individual authorized to administer medications, ~~or~~ (b) a pharmacy technician is engaged in remote dispensing in compliance with section 71-436.02, or (c) all of the following conditions are met: (i) The pharmacist performing the verification is located in Nebraska, (ii) the physical product verification occurs in person at the location where the prescription is prepared, and (iii) the pharmacy maintains manual or electronic records that identify, individually for each order processed, the name, initials, or identification code of each pharmacist, pharmacist intern, or pharmacy technician who took part in all acts, tasks, or functions undertaken to fulfill a prescription.

Sec. 16. Section 38-2854, Reissue Revised Statutes of Nebraska, is amended to read:

38-2854 (1) A pharmacist intern shall be (a) at least eighteen years of age and (b)(i) ~~(a)~~ a student currently enrolled in an accredited pharmacy program, (ii) ~~(b)~~ a graduate of an accredited pharmacy program serving his or her internship, or (iii) ~~(c)~~ a graduate of a pharmacy program located outside the United States which is not accredited and who has successfully passed equivalency examinations approved by the board. Intern registration based on enrollment in or graduation from an accredited pharmacy program shall expire not later than fifteen months after the date of graduation or at the time of professional licensure, whichever comes first. Intern registration based on graduation from a pharmacy program located outside of the United States which is not accredited shall expire not later than fifteen months after the date of issuance of the registration or at the time of professional licensure, whichever comes first.

(2) A pharmacist intern may compound and dispense drugs or devices and fill prescriptions only in the presence of and under the immediate personal supervision of a licensed pharmacist. Such licensed pharmacist shall either be (a) the person to whom the pharmacy license is issued or a person in the actual employ of the pharmacy licensee or (b) the delegating pharmacist designated in a delegated dispensing agreement by a hospital with a delegated dispensing permit.

(3) Performance as a pharmacist intern under the supervision of a licensed pharmacist shall be predominantly related to the practice of pharmacy and shall include the keeping of records and the making of reports required under state and federal statutes. The department, with the recommendation of the board,

shall adopt and promulgate rules and regulations as may be required to establish standards for internship.

Sec. 17. Section 38-2890, Reissue Revised Statutes of Nebraska, is amended to read:

38-2890 (1) All pharmacy technicians employed by a health care facility licensed under the Health Care Facility Licensure Act shall be registered with the Pharmacy Technician Registry created in section 38-2893. In order to be employed as a pharmacy technician in such a health care facility, a pharmacy technician (a) shall be certified by a state or national certifying body which is approved by the board (i) by January 1, 2017, if the pharmacy technician ~~he or she~~ was registered with the Pharmacy Technician Registry on January 1, 2016, or (ii) within one year after being registered with the Pharmacy Technician Registry, if the pharmacy technician ~~he or she~~ was so registered after January 1, 2016, and (b) upon being so certified, shall maintain current certification during the time the pharmacy technician ~~he or she~~ is so registered.

(2) To register as a pharmacy technician, an individual shall (a) be at least eighteen years of age, (b) be a high school graduate or be officially recognized by the State Department of Education as possessing the equivalent degree of education, (c) not have ~~never~~ been convicted of any nonalcohol, drug-related ~~misdemeanor or~~ felony, (d) not have been convicted of any nonalcohol, drug-related misdemeanor within five years prior to application, (e) ~~(d)~~ file an application with the Division of Public Health of the Department of Health and Human Services, and (f) ~~(e)~~ pay the applicable fee.

Sec. 18. Section 38-28,104, Reissue Revised Statutes of Nebraska, is amended to read:

38-28,104 A prescription for a legend drug which is not a controlled substance must contain the following information prior to being filled by a pharmacist or a practitioner who holds a pharmacy license under subdivision (1) of section 38-2850: Patient's name, or if not issued for a specific patient, the words "for emergency use" or "for use in immunizations"; name of the drug, device, or biological; strength of the drug or biological, if applicable; dosage form of the drug or biological; quantity of drug, device, or biological prescribed; number of authorized refills; directions for use; date of issuance; prescribing practitioner's name; and if the prescription is written, prescribing practitioner's signature. Prescriptions for controlled substances must meet the requirements of sections 28-414 and 28-414.01.

Sec. 19. Section 42-371.01, Reissue Revised Statutes of Nebraska, is amended to read:

42-371.01 (1) An obligor's duty to pay child support for a child terminates when (a) the child reaches nineteen years of age, (b) the child marries, (c) the child dies, or (d) the child is emancipated by a court of competent jurisdiction, unless the court order for child support specifically extends child support after such circumstances.

(2) The termination of child support does not relieve the obligor from the duty to pay any unpaid child support obligations owed or in arrears.

(3) The obligor may provide written application for termination of a child support order when the child being supported reaches nineteen years of age, marries, dies, or is otherwise emancipated. The application shall be filed with the clerk of the district court where child support was ordered. A certified copy of the birth certificate, marriage license, death certificate, or court order of emancipation or an abstract of marriage or abstract of death as defined in section 71-601.01 shall accompany the application for termination of the child support. The clerk of the district court shall send notice of the filing of the child support termination application to the last-known address of the obligee. The notice shall inform the obligee that if he or she does not file a written objection within thirty days after the date the notice was mailed, child support may be terminated without further notice. The court shall terminate child support if no written objection has been filed within thirty days after the date the clerk's notice to the obligee was mailed, the forms and procedures have been complied with, and the court believes that a hearing on the matter is not required.

(4) The State Court Administrator shall develop uniform procedures and forms to be used to terminate child support.

Sec. 20. Section 68-911, Revised Statutes Supplement, 2023, is amended to read:

68-911 (1) Medical assistance shall include coverage for health care and related services as required under Title XIX of the federal Social Security Act, including, but not limited to:

(a) Inpatient and outpatient hospital services;
(b) Laboratory and X-ray services;
(c) Nursing facility services;
(d) Home health services;
(e) Nursing services;
(f) Clinic services;
(g) Physician services;
(h) Medical and surgical services of a dentist;
(i) Nurse practitioner services;
(j) Nurse midwife services;
(k) Pregnancy-related services;
(l) Medical supplies;
(m) Mental health and substance abuse services;
(n) Early and periodic screening and diagnosis and treatment services for children which shall include both physical and behavioral health screening,

diagnosis, and treatment services;

(o) Rural health clinic services; and

(p) Federally qualified health center services.

(2) In addition to coverage otherwise required under this section, medical assistance may include coverage for health care and related services as permitted but not required under Title XIX of the federal Social Security Act, including, but not limited to:

(a) Prescribed drugs;

(b) Intermediate care facilities for persons with developmental disabilities;

(c) Home and community-based services for aged persons and persons with disabilities;

(d) Dental services;

(e) Rehabilitation services;

(f) Personal care services;

(g) Durable medical equipment;

(h) Medical transportation services;

(i) Vision-related services;

(j) Speech therapy services;

(k) Physical therapy services;

(l) Chiropractic services;

(m) Occupational therapy services;

(n) Optometric services;

(o) Podiatric services;

(p) Hospice services;

(q) Mental health and substance abuse services;

(r) Hearing screening services for newborn and infant children; and

(s) Administrative expenses related to administrative activities, including outreach services, provided by school districts and educational service units to students who are eligible or potentially eligible for medical assistance.

(3) No later than July 1, 2009, the department shall submit a state plan amendment or waiver to the federal Centers for Medicare and Medicaid Services to provide coverage under the medical assistance program for community-based secure residential and subacute behavioral health services for all eligible recipients, without regard to whether the recipient has been ordered by a mental health board under the Nebraska Mental Health Commitment Act to receive such services.

(4) On or before October 1, 2014, the department, after consultation with the State Department of Education, shall submit a state plan amendment to the federal Centers for Medicare and Medicaid Services, as necessary, to provide that the following are direct reimbursable services when provided by school districts as part of an individualized education program or an individualized family service plan: Early and periodic screening, diagnosis, and treatment services for children; medical transportation services; mental health services; nursing services; occupational therapy services; personal care services; physical therapy services; rehabilitation services; speech therapy and other services for individuals with speech, hearing, or language disorders; and vision-related services.

(5) No later than January 1, 2023, the department shall provide coverage for continuous glucose monitors under the medical assistance program for all eligible recipients who have a prescription for such device.

(6) On or before October 1, 2023, the department shall seek federal approval for federal matching funds from the federal Centers for Medicare and Medicaid Services through a state plan amendment or waiver to extend postpartum coverage for beneficiaries from sixty days to at least six months. Nothing in this subsection shall preclude the department from submitting a state plan amendment for twelve months.

(7)(a) No later than January 1, 2025, the department shall provide coverage for an electric personal-use breast pump for every pregnant woman covered under the medical assistance program, or child covered under the medical assistance program if the pregnant woman is not covered, beginning at thirty-six weeks gestation or the child's date of birth, whichever is earlier. The electric personal-use breast pump shall be capable of (i) sufficiently supporting milk supply, (ii) double and single side pumping, and (iii) suction power ranging from zero mmHg to two hundred fifty mmHg. No later than January 1, 2025, the department shall provide coverage for a minimum of ten lactation consultation visits for every mother covered under the medical assistance program or child covered under the medical assistance program, if the mother is not covered under such program.

(b) It is the intent of the Legislature that the appropriation for lactation consultation visits shall be equal to an amount that is a one hundred forty-five percent rate increase over the current lactation consultation rate paid by the department.

Sec. 21. Section 71-211, Reissue Revised Statutes of Nebraska, is amended to read:

71-211 Whenever the provisions of the Barber Act ~~sections 71-201 to 71-224~~ have been complied with, the Board of Barber Examiners shall issue a certificate of registration as a registered barber instructor or registered barber, or a certificate of approval of a barber school.

Sec. 22. Section 71-212, Reissue Revised Statutes of Nebraska, is amended to read:

71-212 A person who (1) is of good moral character and temperate habits,

(2) has a diploma showing graduation from high school or its equivalent as determined by successfully passing a general educational development test, and (3) has a license and certificate of registration as a practicing barber from another state or country which has substantially the same requirements for licensing or registering barbers as required by the Barber Act, shall upon payment of the required fee be given an examination by the board at the next regular examination to determine his or her fitness to receive a certificate of registration to practice barbering. If any person fails to pass a required examination, he or she shall be entitled to submit himself or herself for examination by the board at the next examination given by the board. ~~If he or she fails at the third examination, no further examination shall be granted.~~ If an applicant fails to appear when requested for an examination, he or she shall be notified by the board as to the time of the next regular examination, at which he or she shall appear.

Sec. 23. Section 71-217, Reissue Revised Statutes of Nebraska, is amended to read:

71-217 The board may either refuse to issue or renew or may suspend or revoke any certificate of registration or approval for any one or a combination of the following causes: (1) Conviction of a felony shown by a certified copy of the record of the court of conviction; (2) gross malpractice or gross incompetency; (3) continued practice by a person knowingly having an infectious or contagious disease; (4) advertising by means of knowingly false or deceptive statements or in violation of section 71-223.02; (5) advertising, practicing, or attempting to practice under a trade name or any name other than one's own; (6) habitual drunkenness or habitual addiction to the use of morphine, cocaine, or other habit-forming drugs; (7) immoral or unprofessional conduct; (8) violation of any of the provisions of the Barber Act ~~sections 71-201 to 71-237~~ or of any valid regulation promulgated by the board pertaining to service charges, sanitation, and the elimination of unfair practices; and (9) any check presented to the board as a fee for either an original license or renewal license or for examination for license or any other fee authorized in the Barber Act ~~sections 71-201 to 71-237~~ which is returned to the State Treasurer unpaid.

Sec. 24. Section 71-220, Reissue Revised Statutes of Nebraska, is amended to read:

71-220 Any person, firm, ~~or~~ corporation, or their agents that ~~or servants, who shall~~ violate any provision ~~of the provisions~~ of the Barber Act ~~sections 71-201 to 71-237~~ shall be ~~deemed~~ guilty of a Class III misdemeanor.

Sec. 25. Section 71-222.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-222.01 The director, under the supervision of the Board of Barber Examiners, shall administer the Barber Act ~~provisions of sections 71-201 to 71-237,~~ and shall serve at the pleasure of the board. His or her salary shall be fixed by the board. The director shall devote full time to the duties of the ~~his~~ office. No person shall be eligible to the office of director who has not been engaged in the active practice of barbering as a registered barber in the state for at least five years immediately preceding ~~his~~ appointment. No member of the Board of Barber Examiners shall be eligible to the office of director during the member's ~~his or her~~ term. The director shall be bonded or insured as required by section 11-201. The premium shall be paid as an expense of the board.

Sec. 26. Section 71-223, Reissue Revised Statutes of Nebraska, is amended to read:

71-223 The board shall have authority to adopt and promulgate reasonable rules and regulations for the administration of the Barber Act ~~provisions of sections 71-201 to 71-224~~. Any member of the board, its agents, or its assistants shall have authority to enter upon and to inspect any barber shop or barber school at any time during business hours. A copy of the rules and regulations adopted by the board shall be furnished to the owner or manager of each barber shop and barber school, and it shall be posted in a conspicuous place in such barber shop or barber school. The board shall keep a record of proceedings relating to the issuance, refusal, renewal, suspension, and revocation of registrations and licenses and inspections. Such record shall also contain the name, place of business, and residence of each registered barber instructor and licensed barber and the date and number of his or her registration or license.

Sec. 27. Section 71-434, Reissue Revised Statutes of Nebraska, is amended to read:

71-434 (1) Licensure activities under the Health Care Facility Licensure Act shall be funded by license fees. An applicant for an initial or renewal license under section 71-433 shall pay a license fee as provided in this section.

(2) License fees shall include a base fee of fifty dollars and an additional fee based on:

(a) Variable costs to the department of inspections, architectural plan reviews, and receiving and investigating complaints, including staff salaries, travel, and other similar direct and indirect costs;

(b) The number of beds available to persons residing at the health care facility;

(c) The program capacity of the health care facility or health care service; or

(d) Other relevant factors as determined by the department.

Such additional fee shall be no more than two thousand six hundred dollars

LB1215
2024

for a hospital or a health clinic operating as an ambulatory surgical center, no more than two thousand dollars for an assisted-living facility, a health clinic providing hemodialysis or labor and delivery services, an intermediate care facility, an intermediate care facility for persons with developmental disabilities, a nursing facility, or a skilled nursing facility, no more than one thousand dollars for home health agencies, hospice services, and centers for the developmentally disabled, and no more than seven hundred dollars for all other health care facilities and health care services.

(3) If the licensure application is denied, the license fee shall be returned to the applicant, except that the department may retain up to twenty-five dollars as an administrative fee and may retain the entire license fee if an inspection has been completed prior to such denial.

(4) The department shall also collect the fee provided in subsection (1) of this section for reinstatement of a license that has lapsed or has been suspended or revoked. The department shall collect a fee of ten dollars for a duplicate original license.

~~(5) The department shall collect a fee from any applicant or licensee requesting an informal conference with a representative peer review organization under section 71-452 to cover all costs and expenses associated with such conference.~~

(5) ~~(6)~~ The department shall adopt and promulgate rules and regulations for the establishment of license fees under this section.

(6) ~~(7)~~ The department shall remit all license fees collected under this section to the State Treasurer for credit to the Health and Human Services Cash Fund. License fees collected under this section shall only be used for activities related to the licensure of health care facilities and health care services.

Sec. 28. Section 71-601.01, Reissue Revised Statutes of Nebraska, is amended to read:

71-601.01 For purposes of the Vital Statistics Act:

(1) Abstract of death means a certified document that summarizes the facts of death, including, but not limited to, the name of the decedent, the date of the death, and the place of the death. An abstract of death does not include signatures;

(2) ~~(1)~~ Abstract of marriage means a certified document that summarizes the facts of marriage, including, but not limited to, the name of the bride and groom, the date of the marriage, the place of the marriage, and the name of the office filing the original marriage license. An abstract of marriage does not include signatures;

(3) ~~(2)~~ Certificate means the record of a vital event. Certificate does not include a commemorative certificate;

(4) ~~(3)~~ Certification means the process of recording, filing, amending, or preserving a certificate, which process may be by any means, including, but not limited to, microfilm, electronic, imaging, photographic, typewritten, or other means designated by the department;

(5) ~~(4)~~ Commemorative certificate means a document commemorating a nonviable birth;

(6) ~~(5)~~ Department means the Department of Health and Human Services; and

(7) ~~(6)~~ Nonviable birth means an unintentional, spontaneous fetal demise occurring prior to the twentieth week of gestation during a pregnancy that has been verified by a health care practitioner.

Sec. 29. Section 71-605, Revised Statutes Cumulative Supplement, 2022, is amended to read:

71-605 (1) The funeral director and embalmer in charge of the funeral of any person dying in the State of Nebraska shall cause a certificate of death to be filled out with all the particulars contained in the standard form adopted and promulgated by the department. Such standard form shall include a space for veteran status ~~and the period of service~~ in the armed forces of the United States and a statement of the cause of death made by a person holding a valid license as a physician, physician assistant, or nurse practitioner who last attended the deceased. The standard form shall also include the deceased's social security number and a notice that, pursuant to section 30-2413, demands for notice which may affect the estate of the deceased are filed with the county court in the county where the decedent resided at the time of death. Death and fetal death certificates shall be completed by the funeral directors and embalmers and physicians, physician assistants, or nurse practitioners for the purpose of filing with the department and providing child support enforcement information pursuant to section 43-3340.

(2) The physician, physician assistant, or nurse practitioner shall have the responsibility and duty to complete and sign by electronic means pursuant to section 71-603.01, within twenty-four hours from the time of death, that part of the certificate of death entitled medical certificate of death. In the case of a death when no person licensed as a physician, physician assistant, or nurse practitioner was in attendance, the funeral director and embalmer shall refer the case to the county attorney who shall have the responsibility and duty to complete and sign the death certificate by electronic means pursuant to section 71-603.01.

No cause of death shall be certified in the case of the sudden and unexpected death of a child between the ages of one week and three years until an autopsy is performed at county expense by a qualified pathologist pursuant to section 23-1824. The parents or guardian shall be notified of the results of the autopsy by their physician, physician assistant, nurse practitioner, community health official, or county coroner within forty-eight hours. The term

LB1215
2024

sudden infant death syndrome shall be entered on the death certificate as the principal cause of death when the term is appropriately descriptive of the pathology findings and circumstances surrounding the death of a child.

If the circumstances show it possible that death was caused by neglect, violence, or any unlawful means, the case shall be referred to the county attorney for investigation and certification. The county attorney shall, within twenty-four hours after taking charge of the case, state the cause of death as ascertained, giving as far as possible the means or instrument which produced the death. All death certificates shall show clearly the cause, disease, or sequence of causes ending in death. If the cause of death cannot be determined within the period of time stated above, the death certificate shall be filed to establish the fact of death. As soon as possible thereafter, and not more than six weeks later, supplemental information as to the cause, disease, or sequence of causes ending in death shall be filed with the department to complete the record. For all certificates stated in terms that are indefinite, insufficient, or unsatisfactory for classification, inquiry shall be made to the person completing the certificate to secure the necessary information to correct or complete the record.

(3) A completed death certificate shall be filed with the department within five business days after the date of death. If it is impossible to complete the certificate of death within five business days, the funeral director and embalmer shall notify the department of the reason for the delay and file the certificate as soon as possible.

(4) Before any dead human body may be cremated, a cremation permit shall first be signed electronically by the county attorney, or by his or her authorized representative as designated by the county attorney in writing, of the county in which the death occurred on an electronic form prescribed and furnished by the department.

(5) A permit for disinterment shall be required prior to disinterment of a dead human body. The permit shall be issued by the department to a licensed funeral director and embalmer upon proper application. The request for disinterment shall be made by the person listed in section 30-2223 or a county attorney on a form furnished by the department. The application shall be signed by the funeral director and embalmer who will be directly supervising the disinterment. When the disinterment occurs, the funeral director and embalmer shall sign the permit giving the date of disinterment and file the permit with the department within ten days of the disinterment.

(6) When a request is made under subsection (5) of this section for the disinterment of more than one dead human body, an order from a court of competent jurisdiction shall be submitted to the department prior to the issuance of a permit for disinterment. The order shall include, but not be limited to, the number of bodies to be disinterred if that number can be ascertained, the method and details of transportation of the disinterred bodies, the place of reinterment, and the reason for disinterment. No sexton or other person in charge of a cemetery shall allow the disinterment of a body without first receiving from the department a disinterment permit properly completed.

(7) No dead human body shall be removed from the state for final disposition without a transit permit issued by the funeral director and embalmer having charge of the body in Nebraska, except that when the death is subject to investigation, the transit permit shall not be issued by the funeral director and embalmer without authorization of the county attorney of the county in which the death occurred. No agent of any transportation company shall allow the shipment of any body without the properly completed transit permit prepared in duplicate.

(8) The interment, disinterment, or reinterment of a dead human body shall be performed under the direct supervision of a licensed funeral director and embalmer, except that hospital disposition may be made of the remains of a child born dead pursuant to section 71-20,121.

(9) All transit permits issued in accordance with the law of the place where the death occurred in a state other than Nebraska shall be signed by the funeral director and embalmer in charge of burial and forwarded to the department within five business days after the interment takes place.

(10) The changes made to this section by Laws 2019, LB593, shall apply retroactively to August 24, 2017.

Sec. 30. Section 71-612, Revised Statutes Supplement, 2023, is amended to read:

71-612 (1) The department, as the State Registrar, shall preserve permanently and index all certificates received. The department shall supply to any applicant for any proper purpose, as defined by rules and regulations of the department, a certified copy of the record of any birth, death, marriage, annulment, or dissolution of marriage or an abstract of marriage or abstract of death. The department shall supply a copy of a public vital record for viewing purposes at its office upon an application signed by the applicant and upon proof of the identity of the applicant. The application may include the name, address, and telephone number of the applicant, purpose for viewing each record, and other information as may be prescribed by the department by rules and regulations to protect the integrity of vital records and prevent their fraudulent use. Except as provided in subsections (2), (3), (5), (6), (7), and (9) of this section, the department shall be entitled to charge and collect in advance a fee of sixteen dollars to be paid by the applicant for each certified copy, ~~or~~ abstract of marriage, or abstract of death supplied to the applicant or for any search made at the applicant's request for access to or a certified

LB1215
2024

copy of any record, ~~or~~ abstract of marriage, or abstract of death whether or not the record or abstract is found on file with the department.

(2) The department shall, free of charge, search for and furnish a certified copy of any record, ~~or~~ abstract of marriage, or abstract of death on file with the department upon the request of (a) the United States Department of Veterans Affairs or any lawful service organization empowered to represent veterans if the copy of the record or abstract of marriage is to be issued, for the welfare of any member or veteran of the armed forces of the United States or in the interests of any member of his or her family, in connection with a claim growing out of service in the armed forces of the nation or (b) the Military Department.

(3) The department may, free of charge, search for and furnish a certified copy of any record or an abstract of marriage or abstract of death on file with the department when in the opinion of the department it would be a hardship for the claimant of old age, survivors, or disability benefits under the federal Social Security Act to pay the fee provided in this section.

(4) A strict account shall be kept of all funds received by the department. Funds received pursuant to subsections (1), (5), (6), and (8) of this section shall be remitted to the State Treasurer for credit to the Health and Human Services Cash Fund. Money credited to the fund pursuant to this section shall be used for the purpose of administering the laws relating to vital statistics and may be used to create a petty cash fund administered by the department to facilitate the payment of refunds to individuals who apply for copies or abstracts of records. The petty cash fund shall be subject to section 81-104.01, except that the amount in the petty cash fund shall not be less than twenty-five dollars nor more than one thousand dollars.

(5) The department shall, upon request, conduct a search of death certificates or abstracts of death for stated individuals for the Nebraska Medical Association or any of its allied medical societies or any inhospital staff committee pursuant to sections 71-3401 to 71-3403. If such death certificate is found, the department shall provide a noncertified copy. The department shall charge a fee for each search or copy sufficient to cover its actual direct costs, except that the fee shall not exceed three dollars per individual search or copy requested.

(6) The department may permit use of data from vital records for statistical or research purposes under section 71-602 or disclose data from certificates or records to federal, state, county, or municipal agencies of government for use in administration of their official duties and charge and collect a fee that will recover the department's cost of production of the data. The department may provide access to public vital records for viewing purposes by electronic means, if available, under security provisions which shall assure the integrity and security of the records and database and shall charge and collect a fee that shall recover the department's costs.

(7) In addition to the fees charged under subsection (1) of this section, the department shall charge and collect an additional fee of one dollar for any certified copy of the record of any birth or for any search made at the applicant's request for access to or a certified copy of any such record, whether or not the record is found on file with the department. Any county containing a city of the metropolitan class which has an established city-county or county health department pursuant to sections 71-1626 to 71-1636 which has an established system of registering births and deaths shall charge and collect in advance a fee of one dollar for any certified copy of the record of any birth or for any search made at the applicant's request for such record, whether or not the record is found on file with the county. All fees collected under this subsection shall be remitted to the State Treasurer for credit to the Nebraska Child Abuse Prevention Fund.

(8) The department shall not charge other state agencies the fees authorized under subsections (1) and (7) of this section for automated review of any certificates, ~~or~~ abstracts of marriage, or abstracts of death. The department shall charge and collect a fee from other state agencies for such automated review that will recover the department's cost.

(9) The department shall not charge any fee for a certified copy of a birth record if the applicant does not have a current Nebraska driver's license or state identification card and indicates in the application that the applicant needs a certified copy of the birth record to apply for a state identification card for voting purposes.

Sec. 31. Section 71-2454, Revised Statutes Cumulative Supplement, 2022, is amended to read:

71-2454 (1) An entity described in section 71-2455 shall establish a system of prescription drug monitoring for the purposes of (a) preventing the misuse of controlled substances that are prescribed, (b) allowing prescribers and dispensers to monitor the care and treatment of patients for whom such a prescription drug is prescribed to ensure that such prescription drugs are used for medically appropriate purposes, (c) providing information to improve the health and safety of patients, and (d) ensuring that the State of Nebraska remains on the cutting edge of medical information technology.

(2) Such system of prescription drug monitoring shall be implemented as follows: Except as provided in subsection (4) of this section, all prescription drug information shall be reported to the prescription drug monitoring system. The prescription drug monitoring system shall include, but not be limited to, provisions that:

(a) Prohibit any patient from opting out of the prescription drug monitoring system;

LB1215
2024

(b) Require any prescription drug that is dispensed in this state or to an address in this state to be entered into the system by the dispenser or his or her delegate no less frequently than daily after such prescription drug is sold, including prescription drugs for patients paying cash or otherwise not relying on a third-party payor for payment, except that prescriptions labeled "for emergency use" or "for use in immunizations" are not required to be reported;

(c) Allow all prescribers or dispensers of prescription drugs to access the system at no cost to such prescriber or dispenser;

(d) Ensure that such system includes information relating to all payors, including, but not limited to, the medical assistance program established pursuant to the Medical Assistance Act; and

(e) Make the prescription drug information available to the statewide health information exchange described in section 71-2455 for access by its participants if such access is in compliance with the privacy and security protections set forth in the provisions of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder, except that if a patient opts out of the statewide health information exchange, the prescription drug information regarding that patient shall not be accessible by the participants in the statewide health information exchange.

(3) Except as provided in subsection (4) of this section, prescription drug information that shall be submitted electronically to the prescription drug monitoring system shall be determined by the entity described in section 71-2455 and shall include, but not be limited to:

(a) The patient's name, address, telephone number, if a telephone number is available, gender, and date of birth;

(b) A patient identifier such as a military identification number, driver's license number, state identification card number, or other valid government-issued identification number, insurance identification number, pharmacy software-generated patient-specific identifier, or other identifier associated specifically with the patient;

(c) The name and address of the pharmacy dispensing the prescription drug;

(d) The date the prescription is issued;

(e) The date the prescription is filled;

(f) The date the prescription is sold to the patient;

(g) The number of refills authorized;

(h) The prescription number of the prescription drug;

(i) The National Drug Code number as published by the federal Food and Drug Administration of the prescription drug;

(j) The strength of the prescription drug prescribed;

(k) The quantity of the prescription drug prescribed and the number of days' supply;

(l) The prescriber's name and National Provider Identifier number or Drug Enforcement Administration number when reporting a controlled substance; and

(m) Additional information as determined by the Health Information Technology Board and as published in the submitter guide for the prescription drug monitoring system.

(4) Beginning July 1, 2018, a veterinarian licensed under the Veterinary Medicine and Surgery Practice Act shall be required to report the dispensing of prescription drugs which are controlled substances listed on Schedule II, Schedule III, Schedule IV, or Schedule V pursuant to section 28-405. Each such veterinarian shall indicate that the prescription is an animal prescription and shall include the following information in such report:

(a) The first and last name and address, including city, state, and zip code, of the individual to whom the prescription drug is dispensed in accordance with a valid veterinarian-client-patient relationship;

(b) Reporting status;

(c) The first and last name of the prescribing veterinarian and his or her federal Drug Enforcement Administration number;

(d) The National Drug Code number as published by the federal Food and Drug Administration of the prescription drug and the prescription number;

(e) The date the prescription is written and the date the prescription is filled;

(f) The number of refills authorized, if any; and

(g) The quantity of the prescription drug and the number of days' supply.

(5)(a) All prescription drug information submitted pursuant to this section, all data contained in the prescription drug monitoring system, and any report obtained from data contained in the prescription drug monitoring system are confidential, are privileged, are not public records, and may be withheld pursuant to section 84-712.05 except for information released as provided in subsection (9) or (10) of this section.

(b) No patient-identifying data as defined in section 81-664, including the data collected under subsection (3) of this section, shall be disclosed, made public, or released to any public or private person or entity except to the statewide health information exchange described in section 71-2455 and its participants, to prescribers and dispensers as provided in subsection (2) of this section, or as provided in subsection (7), (9), or (10) of this section.

(c) All other data is for the confidential use of the department and the statewide health information exchange described in section 71-2455 and its participants. The department, or the statewide health information exchange in accordance with policies adopted by the Health Information Technology Board and in collaboration with the department, may release such information in

accordance with the privacy and security provisions set forth in the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder, as Class I, Class II, or Class IV data in accordance with section 81-667, except for purposes in accordance with subsection (9) or (10) of this section, to the private or public persons or entities that the department or the statewide health information exchange, in accordance with policies adopted by the Health Information Technology Board, determines may view such records as provided in sections 81-663 to 81-675. In addition, the department, or the statewide health information exchange in accordance with policies adopted by the Health Information Technology Board and in collaboration with the department, may release such information as provided in subsection (9) or (10) of this section.

(6) The statewide health information exchange described in section 71-2455, in accordance with policies adopted by the Health Information Technology Board and in collaboration with the department, shall establish the minimum administrative, physical, and technical safeguards necessary to protect the confidentiality, integrity, and availability of prescription drug information.

(7) If the entity receiving the prescription drug information has privacy protections at least as restrictive as those set forth in this section and has implemented and maintains the minimum safeguards required by subsection (6) of this section, the statewide health information exchange described in section 71-2455, in accordance with policies adopted by the Health Information Technology Board and in collaboration with the department, may release the prescription drug information and any other data collected pursuant to this section to:

(a) Other state prescription drug monitoring programs;

(b) State and regional health information exchanges;

(c) The medical director and pharmacy director of the Division of Medicaid and Long-Term Care of the department, or their designees;

(d) The medical directors and pharmacy directors of medicaid-managed care entities, the state's medicaid drug utilization review board, and any other state-administered health insurance program or its designee if any such entities have a current data-sharing agreement with the statewide health information exchange described in section 71-2455, and if such release is in accordance with the privacy and security provisions of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and all regulations promulgated thereunder;

(e) Organizations which facilitate the interoperability and mutual exchange of information among state prescription drug monitoring programs or state or regional health information exchanges; or

(f) Electronic health record systems or pharmacy-dispensing software systems for the purpose of integrating prescription drug information into a patient's medical record.

(8) The department, or the statewide health information exchange described in section 71-2455, in accordance with policies adopted by the Health Information Technology Board and in collaboration with the department, may release to patients their prescription drug information collected pursuant to this section. Upon request of the patient, such information may be released directly to the patient or a personal health record system designated by the patient which has privacy protections at least as restrictive as those set forth in this section and that has implemented and maintains the minimum safeguards required by subsection (6) of this section.

(9) In accordance with the privacy and security provisions set forth in the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder, the department, or the statewide health information exchange described in section 71-2455 under policies adopted by the Health Information Technology Board, may release data collected pursuant to this section for statistical, public policy, or educational purposes after removing information which identifies or could reasonably be used to identify the patient, prescriber, dispenser, or other person who is the subject of the information, except as otherwise provided in subsection (10) of this section.

(10) In accordance with the privacy and security provisions set forth in the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder, the department, or statewide health information exchange described in section 71-2455 under policies adopted by the Health Information Technology Board, may release data collected pursuant to this section for quality measures as approved or regulated by state or federal agencies or for patient quality improvement or research initiatives approved by the Health Information Technology Board.

(11) The statewide health information exchange described in section 71-2455, entities described in subsection (7) of this section, or the department may request and receive program information from other prescription drug monitoring programs for use in the prescription drug monitoring system in this state in accordance with the privacy and security provisions set forth in the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder.

(12) The statewide health information exchange described in section 71-2455, in collaboration with the department, shall implement technological improvements to facilitate the secure collection of, and access to, prescription drug information in accordance with this section.

(13) Before accessing the prescription drug monitoring system, any user

shall undergo training on the purpose of the system, access to and proper usage of the system, and the law relating to the system, including confidentiality and security of the prescription drug monitoring system. Such training shall be administered by the statewide health information exchange described in section 71-2455 or the department. The statewide health information exchange described in section 71-2455 shall have access to the prescription drug monitoring system for training operations, maintenance, and administrative purposes. Users who have been trained prior to May 10, 2017, or who are granted access by an entity receiving prescription drug information pursuant to subsection (7) of this section, are deemed to be in compliance with the training requirement of this subsection.

(14) For purposes of this section:

(a) Deliver or delivery means to actually, constructively, or attempt to transfer a drug or device from one person to another, whether or not for consideration;

(b) Department means the Department of Health and Human Services;

(c) Delegate means any licensed or registered health care professional credentialed under the Uniform Credentialing Act designated by a prescriber or dispenser to act as an agent of the prescriber or dispenser for purposes of submitting or accessing data in the prescription drug monitoring system and who is supervised by such prescriber or dispenser;

(d) Prescription drug or drugs means a prescription drug or drugs dispensed by delivery to the ultimate user or caregiver by or pursuant to the lawful order of a prescriber but does not include (i) the delivery of such prescription drug for immediate use for purposes of inpatient hospital care or emergency department care, (ii) the administration of a prescription drug by an authorized person upon the lawful order of a prescriber, (iii) a wholesale distributor of a prescription drug monitored by the prescription drug monitoring system, or (iv) the dispensing to a nonhuman patient of a prescription drug which is not a controlled substance listed in Schedule II, Schedule III, Schedule IV, or Schedule V of section 28-405;

(e) Dispenser means a person authorized in the jurisdiction in which he or she is practicing to deliver a prescription drug to the ultimate user or caregiver by or pursuant to the lawful order of a prescriber;

(f) Participant means an individual or entity that has entered into a participation agreement with the statewide health information exchange described in section 71-2455 which requires the individual or entity to comply with the privacy and security protections set forth in the provisions of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and regulations promulgated thereunder; and

(g) Prescriber means a health care professional authorized to prescribe in the profession which he or she practices.

Sec. 32. Section 71-2478, Revised Statutes Cumulative Supplement, 2022, is amended to read:

71-2478 (1) Except as otherwise provided in this section or the Uniform Controlled Substances Act or except when administered directly by a practitioner to an ultimate user, a legend drug which is not a controlled substance shall not be dispensed without a written, oral, or electronic prescription. Such prescription shall be valid for twelve months after the date of issuance.

(2) A prescription for a legend drug which is not a controlled substance shall contain the following information prior to being filled by a pharmacist or practitioner who holds a pharmacy license under subdivision (1) of section 38-2850: (a) Patient's name, or if not issued for a specific patient, the words, "for emergency use" or "for use in immunizations", (b) name of the drug, device, or biological, (c) strength of the drug or biological, if applicable, (d) dosage form of the drug or biological, (e) quantity of the drug, device, or biological prescribed, (f) directions for use, (g) date of issuance, (h) number of authorized refills, including pro re nata or PRN refills, (i) prescribing practitioner's name, and (j) if the prescription is written, prescribing practitioner's signature. Prescriptions for controlled substances must meet the requirements of sections 28-414 and 28-414.01.

(3)(a) A pharmacist who is exercising reasonable care and who has obtained patient consent may do the following:

(i) Change the quantity of a drug prescribed if:

(A) The prescribed quantity or package size is not commercially available; or

(B) The change in quantity is related to a change in dosage form;

(ii) Change the dosage form of the prescription if it is in the best interest of the patient and if the directions for use are also modified to equate to an equivalent amount of drug dispensed as prescribed;

(iii) Dispense multiple months' supply of a drug if a prescription is written with sufficient refills; and

(iv) Substitute any chemically equivalent drug product for a prescribed drug to comply with a drug formulary which is covered by the patient's health insurance plan unless the prescribing practitioner specifies "no substitution", "dispense as written", or "D.A.W." to indicate that substitution is not permitted. If a pharmacist substitutes any chemically equivalent drug product as permitted under this subdivision, the pharmacist shall provide notice to the prescribing practitioner or the prescribing practitioner's designee. If drug product selection occurs involving a generic substitution, the drug product selection shall comply with section 38-28,111.

(b) A pharmacist who adapts a prescription in accordance with this

subsection shall document the adaptation in the patient's pharmacy record.

(4) A written, signed paper prescription may be transmitted to the pharmacy via facsimile which shall serve as the original written prescription. An electronic prescription may be electronically or digitally signed and transmitted to the pharmacy and may serve as the original prescription.

(5) It shall be unlawful for any person knowingly or intentionally to possess or to acquire or obtain or to attempt to acquire or obtain, by means of misrepresentation, fraud, forgery, deception, or subterfuge, possession of any drug substance not classified as a controlled substance under the Uniform Controlled Substances Act which can only be lawfully dispensed, under federal statutes in effect on January 1, 2015, upon the written or oral prescription of a practitioner authorized to prescribe such substances.

Sec. 33. Section 71-2479, Revised Statutes Supplement, 2023, is amended to read:

71-2479 (1) Any prescription for a legend drug which is not a controlled substance shall be kept by the pharmacy or the practitioner who holds a pharmacy license in a readily retrievable format and shall be maintained for a minimum of five years. The pharmacy or practitioner shall make all such files readily available to the department and law enforcement for inspection without a search warrant.

(2) Before dispensing a legend drug which is not a controlled substance pursuant to a written, oral, or electronic prescription, a label shall be affixed to the container in which the drug is dispensed. Such label shall bear (a) the name, address, and telephone number of the pharmacy or practitioner and the name and address of the central fill pharmacy if central fill is used, (b) the name of the patient, or if not issued for a specific patient, the words "for emergency use" or "for use in immunizations", (c) the date of filling, (d) the serial number of the prescription under which it is recorded in the practitioner's prescription records, (e) the name of the prescribing practitioner, (f) the directions for use, (g) the name of the drug, device, or biological unless instructed to omit by the prescribing practitioner, (h) the strength of the drug or biological, if applicable, (i) the quantity of the drug, device, or biological in the container, except unit-dose containers, (j) the dosage form of the drug or biological, and (k) any cautionary statements contained in the prescription.

(3) For multidrug containers, more than one drug, device, or biological may be dispensed in the same container when (a) such container is prepackaged by the manufacturer, packager, or distributor and shipped directly to the pharmacy in this manner or (b) the container does not accommodate greater than a thirty-one-day supply of compatible dosage units and is labeled to identify each drug or biological in the container in addition to all other information required by law.

Sec. 34. Section 71-3608, Reissue Revised Statutes of Nebraska, is amended to read:

71-3608 No person having communicable tuberculosis who in his or her home or elsewhere obeys the rules, regulations, and orders of the department for the control of tuberculosis or who voluntarily accepts hospitalization or treatment in a health care facility which is licensed and approved for such use under the Health Care Facility Licensure Act by the department, or other location as approved by the Governor, and obeys the rules, regulations, and orders of the department for the control of communicable tuberculosis shall be committed under the Tuberculosis Detection and Prevention Act.

Sec. 35. Section 71-3610, Reissue Revised Statutes of Nebraska, is amended to read:

71-3610 The expenses incurred in the care, maintenance, and treatment of patients committed under the Tuberculosis Detection and Prevention Act shall be paid from state funds appropriated to the department for the purpose of entering into agreements ~~with qualified health care facilities so as~~ to provide for the care, maintenance, and treatment of such patients and those other persons having communicable tuberculosis who voluntarily agree to and accept care and treatment.

Sec. 36. Section 71-3613, Reissue Revised Statutes of Nebraska, is amended to read:

71-3613 The department shall have and may exercise the following powers and duties in its administration of the Tuberculosis Detection and Prevention Act:

(1) To adopt and promulgate rules and regulations relating to the care, maintenance, and treatment of ~~contract with qualified hospitals or other health care facilities which are licensed and approved for such use under the Health Care Facility Licensure Act by the department for the purpose of caring for, maintaining, and treating~~ patients committed under the Tuberculosis Detection and Prevention Act~~,~~ and ~~for those~~ other persons having communicable tuberculosis who voluntarily agree to and accept care and treatment ~~in such a health care facility~~ on either an inpatient or an outpatient basis;

(2) To inspect and supervise to the extent necessary the facilities, operations, and administration of those health care facilities ~~under contract to or otherwise~~ receiving support from the department for the purpose of providing care, treatment, or maintenance for persons infected with communicable tuberculosis;

(3) To provide visiting nursing services to those persons having communicable tuberculosis who are being treated on an outpatient basis;

(4) To adopt rules and regulations, and issue orders based thereon, relative to reports and statistics on tuberculosis from counties and the care,

LB1215
2024

treatment, and maintenance of persons having tuberculosis, especially of those in the communicable or contagious stage thereof; and

(5) To set standards by rule and regulation for the types and level of medical care and treatment to be used by those health care facilities caring for tuberculous persons and to set standards by rule and regulation ~~governing contracts mentioned in subdivision (1) of this section~~ dealing with such matters as program standards, maximum and minimum costs and rates, administrative procedures to be followed and reports to be made, and arbitration by third parties.

~~Rules, regulations, and orders in effect under this section prior to July 16, 2004, shall continue to be effective until revised, amended, repealed, or nullified pursuant to law.~~

Sec. 37. Section 71-3614, Reissue Revised Statutes of Nebraska, is amended to read:

71-3614 (1) When any person who has communicable tuberculosis and who has relatives, friends, or a private or public agency or organization willing to undertake the obligation to support him or her or to aid in supporting him or her in any other state or country, the department may furnish him or her with the cost of transportation to such other state or country if it finds that the interest of the State of Nebraska and the welfare of such person will be promoted thereby. The expense of such transportation shall be paid by the department out of funds appropriated to it for the purpose of carrying out the Tuberculosis Detection and Prevention Act.

(2) No funds appropriated to the department for the purpose of carrying out the act shall be used for meeting the cost of the care, maintenance, or treatment of any person who has communicable tuberculosis ~~in a health care facility on either an inpatient or an outpatient basis, or otherwise~~, for directed health measures, or for transportation to another state or country, to the extent that such cost is covered by an insurer or other third-party payor or any other entity under obligation to such person by contract, policy, certificate, or any other means whatsoever. The department in no case shall expend any such funds to the extent that any such person is able to bear the cost of such care, maintenance, treatment, or transportation. To protect the health and safety of the public, the department may pay, in part or in whole, the cost of drugs and medical care used to treat any person for or to prevent the spread of communicable tuberculosis and for evaluation and diagnosis of persons who have been identified as contacts of a person with communicable tuberculosis. The department shall determine the ability of a person to pay by consideration of the following factors: (a) The person's age, (b) the number of his or her dependents and their ages and physical condition, (c) the person's length of care, maintenance, or treatment, (d) his or her liabilities, (e) the extent that such cost is covered by an insurer or other third-party payor, and (f) his or her assets. Pursuant to the Administrative Procedure Act, the department shall adopt and promulgate rules and regulations for making the determinations required by this subsection.

~~Rules, regulations, and orders in effect under this section prior to July 16, 2004, shall continue to be effective until revised, amended, repealed, or nullified pursuant to law.~~

Sec. 38. Section 71-8505, Revised Statutes Cumulative Supplement, 2022, is amended to read:

71-8505 (1) Prior to an initial telehealth consultation under section 71-8506, a health care practitioner who delivers a health care service to a patient through telehealth shall ensure that the following written information is provided to the patient:

(a) A statement that the patient retains the option to refuse the telehealth consultation at any time without affecting the patient's right to future care or treatment and without risking the loss or withdrawal of any program benefits to which the patient would otherwise be entitled;

(b) A statement that all existing confidentiality protections shall apply to the telehealth consultation;

(c) A statement that the patient shall have access to all medical information resulting from the telehealth consultation as provided by law for patient access to his or her medical records; and

(d) A statement that dissemination of any patient identifiable images or information from the telehealth consultation to researchers or other entities shall not occur without the written consent of the patient.

(2) The patient shall sign a statement prior to or during an initial telehealth consultation, or give verbal consent during the telehealth consultation, indicating that the patient understands the written information provided pursuant to subsection (1) of this section and that this information has been discussed with the health care practitioner or the practitioner's designee. ~~The signed statement may be collected by paper or electronic signature and shall become a part of the patient's medical record. If the patient gives verbal consent during the initial telehealth consultation, the signed statement shall be collected within ten days after such telehealth consultation.~~

(3) If the patient is a minor or is incapacitated or mentally incompetent such that he or she is unable to sign the statement or give verbal consent as required by subsection (2) of this section, such statement shall be signed, or such verbal consent given, by the patient's legally authorized representative.

(4) This section shall not apply in an emergency situation in which the patient is unable to sign the statement or give verbal consent as required by subsection (2) of this section and the patient's legally authorized

representative is unavailable.

Sec. 39. Sections 1, 2, 5, 8, 9, 10, 11, 12, and 42 of this act become operative on January 1, 2025. Sections 3, 4, 6, 7, 13, 14, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, and 40 of this act become operative three calendar months after the adjournment of this legislative session. The other sections of this act become operative on their effective date.

Sec. 40. Original sections 38-142, 38-2854, 38-2890, 38-28,104, 42-371.01, 71-211, 71-212, 71-217, 71-220, 71-222.01, 71-223, 71-434, 71-601.01, 71-3608, 71-3610, 71-3613, and 71-3614, Reissue Revised Statutes of Nebraska, sections 28-410, 28-414, 38-1,146, 71-605, 71-2454, 71-2478, and 71-8505, Revised Statutes Cumulative Supplement, 2022, and sections 38-2801, 68-911, 71-612, and 71-2479, Revised Statutes Supplement, 2023, are repealed.

Sec. 41. Original section 38-2847, Revised Statutes Cumulative Supplement, 2022, is repealed.

Sec. 42. Original section 38-2001, Revised Statutes Cumulative Supplement, 2022, and sections 38-131, 38-1801, and 38-1812, Revised Statutes Supplement, 2023, are repealed.

Sec. 43. Since an emergency exists, this act takes effect when passed and approved according to law.