ONE HUNDRED NINTH LEGISLATURE - FIRST SESSION - 2025 COMMITTEE STATEMENT LB332

Hearing Date: Wednesday February 19, 2025 **Committee On:** Health and Human Services

Introducer: Hardin

One Liner: Require medicaid coverage for psychology services provided by certain practitioners

Roll Call Vote - Final Committee Action:

Advanced to General File with amendment(s)

Vote Results:

Aye: 6 Senators Hardin, Ballard, Fredrickson, Meyer, Quick, Riepe

Nay:

Absent: 1 Senator Hansen

Present Not Voting:

Testimony:

Proponents:Representing:Senator Brian HardinOpening PresenterAnne TalbotOptions in PsychologyAnne DeMaranvilleOptions in Psychology

Opponents: Representing:

Neutral: Representing:

Summary of purpose and/or changes:

LB 332 requires Medicaid coverage for psychology services provided by advanced level practitioners who have completed doctoral requirements and are being supervised by a licensed psychologist.

Sec. 1: No later than January 1, 2026, DHHS shall provide Medicaid coverage for psychology services provided by advanced level practitioners who have completed advanced training requirements for a doctoral internship in an accredited training program or a post-doctoral fellowship and who are under current supervision by a licensed psychologist.

Sec. 2: Repealer

Explanation of amendments:

LB697 would increase the board's membership from five to eight by adding an additional pharmacist, a pharmacy technician, and an additional public representative; authorize outsourcing facilities under 21 U.S.C. 353b or section 71-470 to compound drugs for office use; expand prescribing authority under a delegated dispensing permit to include affiliated practitioners not physically present at the clinic; and clarify compounding standards, permissible activities,



^{*} ADA Accommodation Written Testimony

and prohibitions on compounding certain drugs.

Sec. 1: The Pharmacy Board is increased from 5 to 8 members. These members shall now be composed of 5 actively practicing pharmacists, one pharmacy technician, and 2 public members.

Sec. 2: Any person authorized to compound shall compound for office use only and not for resale by an outsourcing facility pursuant to federal and state law.

Sec. 3: Delegating dispensing permits may be dispensed if the drug/device is by a practitioner licensed in Nebraska working in affiliation with a public health clinic pursuant to a delegated dispensing permit.

Sec. 4: Repealer

AM 613 to LB 697 strikes Sec. 2 relating to compounding.

Testifiers on LB697:

Proponents:

Senator Paul Strommen, Opening Presenter
Haley Pertzborn, Nebraska Pharmacists Association
Mariel Harding, Reproductive Health Collaborative Nebraska
Dr. Jessi Hitchins, Family Health Service, Inc.

Opponents: None Neutral: None

Committee vote to attach LB697: Yes - 7; No - 0; Absent - 0; Present Not Voting - 0;

LB 154 allows a licensed hearing instrument specialist to provide cerumen removal, provide tinnitus care, and dispense and fit hearing instruments. A licensed hearing instrument specialist is required to have an arrangement with a medical liaison. Examination and hearing assessment requirements are provided.

- Sec. 1: Allows a licensed hearing instrument specialist to order hearing instruments.
- Sec. 2: Includes new sections of bill within Hearing Instrument Specialists Practice Act.
- Sec. 3: Includes definitions within this Act.
- Sec. 4: Hearing instrument definition is changed to allow wearable instrument represented as aiding persons.
- Sec. 5 Hearing instrument specialist is defined as a person who engages in the practice of ordering the use and fitting of hearing instruments.
- Sec. 6: Medical liaison is defined as an otolaryngologist (health care professional who treats conditions relating to ears, nose and throat; ENT) or a licensed physician, if no otolaryngologist is available, with whom a cooperative arrangement for consultation is established by a hearing instrument specialist.
- Sec. 7: Practice of ordering the use and fitting of hearing instruments includes activities relating to patient histories; otoscopy; human hearing tests; candidacy for hearing instruments; ordering, selecting, and fitting hearing instruments; efficacy of hearing instruments; hearing instrument benefits; ear impressions or electronic scans; earmolds; services in the use and care; tinnitus care; training; and any other act of hearing assessment.
- Sec. 8: Providing tinnitus care is defined as the selection of tinnitus care devices. Language relating to sale and distribution of these devices is removed.
- Sec. 9: Board membership is changed to 3 licensed hearing instrument specialists.
- Sec. 10: Makes it unlawful for any person to engage in the practice of ordering the use and filling of hearing instruments and strikes language on the sale or practice of fitting. A person represents that the person is a hearing



instrument specialist if the person holds out to the public that he/she is engaging in the practice of ordering the use and fitting of hearing instruments. Changes audiologist requirements of being exempt from hearing instrument licensure. Requires organizations such as corporations or associations to annually file a list of their employed hearing instrument specialists.

Sec. 11: Requires a licensed hearing instrument specialist who provides tinnitus care or cerumen removal to only provide such service to an individual 18 years of age or older. Also, the Hearing Instrument Specialist does not change the scope of practice of a licensed audiologist.

Sec. 12: A licensed hearing instrument specialist shall enter into a written contract for each sale of a hearing instrument which states the terms of the sale. At the time of the delivery, this specialist shall provide the patient with a receipt and confirm the operational performance of the instrument. The packaging of the instrument must comply with state and federal law. In-person fitting requirements are provided.

Testifiers on LB154:

Proponents:

Senator Brian Hardin, Opening Presenter Scott Jones, Nebraska Hearing Society NHS Misti Chmiel, Nebraska Hearing Society and self

Opponents:

Cynthia A Johnson, Academy of Doctors of Audiology and self Leisha Eiten, self

Dr. Kate Gamerl, Norfolk Audiology

Dr. Nikki Kopetzky, Nebraska Speech Language Hearing Association

Neutral: None

Committee vote to attach LB154: Yes - 4; No - 3; Absent - 0; Present Not Voting - 0;

LB 555 creates regulation and oversight of assistant funeral directors, including their eligibility, supervision, permitted activities, and the responsibilities of licensed funeral directors under the Funeral Directing and Embalming Practice Act.

- Sec. 1: Adds new sections into the current Funeral Directing and Embalming Practice Act.
- Sec. 2: Adds the definition of assistant funeral director to the Funeral Directing and Embalming Practice Act, and elsewhere in the Uniform Credentialing Act.
- Sec. 3: Defines assistant funeral director as a person who assists a funeral director licensed under this Act.
- Sec. 4: Supervision definition includes embalmings performed by an apprentice.
- Sec. 5: To be eligible to enter into a collaborative agreement to act as an assistant funeral director, an individual shall provide evidence of successful completion of an approved jurisprudence examination in Nebraska law.
- Sec. 6: Prior to acting as an assistant funeral director, the assistant funeral director shall be employed by a licensed funeral director and be party to a signed collaborative agreement. An assistant funeral director may be so employed by more than one funeral director in Nebraska by being a party to a signed collaborative agreement.



Sec. 7: An assistant funeral director may assist a licensed funeral director with one or more of their principal functions (i.e. arranging interments, working with families, daily management). The assistant funeral director shall perform all work under the supervision and control of the licensed funeral director. An assistant funeral director shall not engage in the practice of embalming and if found in violation, shall have their collaborative agreement terminated as well as their employment.

Sec. 8: A funeral director who is employing an assistant funeral director is required to enter into a collaborative agreement with the assistant funeral director supervise the assistant funeral director, and keep records of the agreement and functions.

Sec. 9: Failure to comply with this act is grounds for disciplinary action.

Sec. 10: Repealer

Sec. 11: Emergency clause

Testifiers on LB555:

Proponents:

Senator Merv Riepe , Opening Presenter Chris Klingler, NeFDA Nebr Funeral Directors Association Paul Seger, NeFDA Nebr Funeral Directors Association

Opponents: None Neutral: None

Committee vote to attach LB555: Yes - 7; No - 0; Absent - 0; Present Not Voting - 0;

LB 515 provides requirements for emergency prescription refills.

Sec. 1: If a pharmacist receives a request for a prescription refill with no refill authorization and the pharmacist is unable to readily obtain refill authorization from the prescribing practitioner, the pharmacist may dispense an emergency refill of no more than a 30 day supply of the prescription, or the amount dispensed on the most recent refill, whichever is less, if the pharmacist obtains prescription information from a prescription label or common database; the refill is not a controlled substance; the refill is for a maintenance medication; and in the pharmacist's professional judgement, the interruption of therapy may produce undesirable consequences or may be detrimental to the patient's welfare and cause physical or mental discomfort.

Sec. 2: Repealer

AM 227 to LB 515 adds new language that allows the pharmacist to make reasonable efforts to obtain a refill authorization. Also, this amendment adds new conditions for dispensing emergency refills: failure to dispense will disrupt the patient's drug therapy; the pharmacist notifies patient of no authorization; refill is documented in the patient's record; pharmacist informs the prescriber within 72 hours; and refill is dispensed in person or delivered by the pharmacy staff.

A refill shall not be dispensed in an amount greater than a 7 day supply unless packaged in a greater form and dispensed to the same patient more than one time in any 6 month period.

The prescriber of a drug shall not be liable or subject to disciplinary action for an act or omission in connection with dispensing a refill under this subsection.

Testifiers on LB515:
Proponents:
Senator Dan Quick, Opening Presenter
Haley Pertzborn, Nebraska Pharmacists Association

Opponents: None
Neutral:
Dr. Leslie Spry, Nebraska Medical Association

Committee vote to attach LB515: Yes - 7; No - 0; Absent - 0; Present Not Voting - 0;



Brian Hardin, Chairperson