

ONE HUNDRED NINTH LEGISLATURE - FIRST SESSION - 2025
COMMITTEE STATEMENT (CORRECTED)
LB41

Hearing Date: Thursday January 23, 2025
Committee On: Health and Human Services
Introducer: Riepe
One Liner: Change blood test requirements for pregnant women

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:

Aye: 7 Senators Ballard, Fredrickson, Hansen, Hardin, Meyer, Quick, Riepe
Nay:
Absent:
Present Not Voting:

Testimony:

Proponents:

Senator Merv Riepe
Josephine Litwinowicz
Matthew Jeffrey
Dr. Ann Anderson Berry
Leah Casanave
Bob Rauner
Sara Howard

Representing:

Opening Presenter
Higher Power Church
self
Nebraska Medical Association and NPQIC
Douglas County Public Health Department
Healthy Nebraska
First Five Nebraska

Opponents:

Representing:

Neutral:

Representing:

* ADA Accommodation Written Testimony

Summary of purpose and/or changes:

LB 41 addresses State requirements for testing pregnant women for syphilis and human immunodeficiency virus in the following ways:

Current law provides that all physicians and legally authorized obstetric practitioners within the state shall be required to conduct syphilis testing on pregnant patients during the initial examination.

LB41 would require that in addition to testing for syphilis at the time of the initial examination, testing shall also be completed at the third trimester examination and at birth.

Explanation of amendments:



AM62 substitutes for the bill and provides:

Section 1.1 - The phrase "cause to be taken" has been replaced with "shall direct an authorized person to take" on page 1, line 9. Additionally, further in the section, the word "cause" has been replaced with the word "direct" on page 1, line 14. The purpose of these changes is to provide clarity and remove any need of interpretation of the law by the medical provider.

Sections 1.2 and 1.4.b are amended by striking current language that provides that a pregnant woman may give written consent that they do not wish to be tested for the human immunodeficiency virus. New language is added to clarify for both the provider and the patient that tests for syphilis and the human immunodeficiency virus infection are voluntary for the patient, the communication shall be clear and understandable, and the patient may decline testing verbally or in writing.

Brian Hardin, Chairperson

