LEGISLATIVE BILL 594

Approved by the Governor May 25, 1999

Introduced by Health and Human Services Committee: Jensen, 20, Chairperson; Byars, 30; Dierks, 40; Price, 26; Suttle, 10; Thompson, 14; Tyson, 19

AN ACT relating to health and human services; to amend sections 42-371, 43-101, 43-102, 43-104, 43-104.01, 43-104.03 to 43-104.05, 43-104.11, 43-3314, 43-3318, 43-3326, 43-3327, 71-1,132.09, 71-1,132.11, 71-1,132.20, 71-1,132.21, 71-1,132.27, 71-1,147, 71-1,147.09, 71-1,147.10, 71-1,147.33, 71-1,147.34, 71-2407, 71-2417, 71-7803, and 75-302 to 75-303.02, Reissue Revised Statutes of Nebraska, sections 28-405, 28-406, 28-414, 28-728, 68-1020, 71-1,132.13, 71-1,132.30, 71-1,132.37, 71-1,142, 71-1774, 71-1909, 71-1910, 71-1911, 71-1913, 71-1913.01, 71-1913.02, 71-1915, 71-1917, 71-5830.01, 71-8228, 71-8231, 71-8236, 71-8243, 81-502, and 81-2602, Revised Statutes Supplement, 1998, section 28-415, Reissue Revised Statutes of Nebraska, as amended by section 3, Legislative Bill 379, Ninety-sixth Legislature, First Session, 1999, and section 28-412, Revised Statutes Supplement, 1998, as amended by section 2, Legislative Bill 379, Ninety-sixth Legislature, First Session, 1999; to change provisions relating to controlled substances, child abuse and neglect teams, adoption, patrien, child custody, juvenile justice system goals, child care and school-age-care programs, the License Suspension Act, the medical assistance program, nursing, pharmacy interns, health care certificates of need, dialysis drug or device workers, hospice services, the statewide trauma system, transportation of certain persons needing assistance, and the Geographic Information System Steering Committee; to provide full faith and credit to foreign support orders; to provide for pharmacy technicians; to eliminate provisions relating to supportive pharmacy personnel; to harmonize provisions; to provide operative dates; to repeal the original sections; to repeal sections 71-1,147.37 and 71-1,147.38, Reissue Revised Statutes of Nebraska; and to declare an emergency.

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

Section 1. Section 28-405, Revised Statutes Supplement, 1998, is amended to read:

28-405. The following are the schedules of controlled substances referred to in the Uniform Controlled Substances Act:

Schedule I

(a) Any of the following opiates, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, unless specifically excepted, whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation: (1) Acetylmethadol; (2) allylproline; (3) alphacetylmethadol, except levo-alphacetylmethadol which is also known as levo-alpha-acetylmethadol, levomethadyl acetate, and LAAM; (4) alphaprodine; (5) alphamethadol; (6) benzethidine; (7) betacetylmethadol; (8) betaprodine; (9) betamethadol; (10) betaprodine; (11) clonitazene; (12) dextromoramide; (13) difenoxin; (14) diapromide; (15) diethylthiambutene; (16) dimenoxadol; (17) dimethamphetamine; (18) dimethylthiambutene; (19) dioxaphenyl butyrate; (20) dipipanone; (21) ethylmethylthiambutene; (22) eutomitazene; (23) etoxeridine; (24) furethidine; (25) hydroxyphenetidine; (26) ketobemidone; (27) levorphanol; (28) levophencyclidine; (29) morphirole; (30) noracemethadol; (31) norlevorphanol; (32) normethadone; (33) nornorphine; (34) phendensamine; (35) phenampromide; (36) phenomenorph; (37) phenoperidine; (38) piracetamine; (39) prohexazine; (40) propiritene; (41) propiram; (42) racemoramide; (43) trimperidine; (44) alpha-methylfentanyl, N-(1-(alpha-methyl-beta-phenyl)ethyl-4-piperidyl) propionanilide, 1-(1-methyl-2-phenylethyl)-4-(N-propanilido) piperidine; (45) tilidine; (46) 3-Methylfentanyl, N-(3-methyl-1-(2-phenylethyl)-4-piperidyl)-N-phenylpropanamide, its optical and geometric isomers, salts, and salts of isomers; (47) 1-methyl-4-phenyl-4-propionoxypiperidine (MPPP), its optical isomers, salts, and salts of isomers; (48) 1-(2-phenylethyl)-4-phenyl-4-acetyloxydipiperidine (PEPAP), its optical isomers, salts, and salts of isomers; (49)
N-(1-(1-methyl-2-phenyl)ethyl-4-piperidyl)-N-phenylacetamide (acetyl-alpha-methylfentanyl), its optical isomers, salts, and salts of isomers; (50) N-(1-(1-methyl-2-(2-thienyl)ethyl)-4-piperidyl)-N-phenylpropanamide (benzylfentanyl), its optical isomers, salts, and salts of isomers; (51) N-(1-benzyl-4-piperidyl)-N-phenylpropanamide (benzylfentanyl), its optical isomers, salts, and salts of isomers; (52) N-(1-(2-hydroxy-2-phenyl)ethyl-4-piperidyl)-N-phenylpropanamide (beta-hydroxyfentanyl), its optical and geometric isomers, salts, and salts of isomers; (53) N-(3-methyl-1-(2-hydroxy-2-phenyl)ethyl-4-piperidyl)-N-phenylpropanamide (beta-hydroxy-3-methylfentanyl), its optical and geometric isomers, salts, and salts of isomers; (54) N-(3-methyl-1-(2-(2-thienyl)ethyl)-4-piperidyl)-N-phenylpropanamide (3-methylthiofentanyl), its optical and geometric isomers, salts, and salts of isomers; (55) N-(1-(2-thienyl)methyl-4-piperidyl)-N-phenylpropanamide (thienylfentanyl), its optical isomers, salts, and salts of isomers; (56) N-(1-(2-(2-thienyl)ethyl)-4-piperidyl)-N-phenylpropanamide (thiofentanyl), its optical isomers, salts, and salts of isomers; (57) N-(1-(2-phenylethyl)-4-piperidyl)-N-(4-fluorophenyl)-propanamide (para-fluorofentanyl), its optical isomers, salts, and salts of isomers.

(b) Any of the following opium derivatives, their salts, isomers, and salts of isomers, unless specifically excepted, whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: (1) Acetorphine; (2) acetyldihydrocodeine; (3) benzylmorphine; (4) codeine methylbromide; (5) codeine-N-Oxide; (6) cyprenorphine; (7) desomorphine; (8) dihydromorphine; (9) drotubanol; (10) etorphine, except hydrochloride salt; (11) heroin; (12) hydromorphinol; (13) methyldesorphine; (14) methyldihydromorphine; (15) morphine methylbromide; (16) morphine methylsulfonate; (17) morphia-N-Oxide; (18) myrophine; (19) nicocodeine; (20) nicomorphine; (21) normorphine; (22) pholcodine; and (23) thebacon.

(c) Any material, compound, mixture, or preparation which contains any quantity of the following hallucinogenic substances, their salts, isomers, and salts of isomers, unless specifically excepted, whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation, and, for purposes of this subdivision only, isomer shall include the optical, position, and geometric isomers: (1) Bufotenine. Trade and other names shall include, but are not limited to: N, N-dimethylserotonin; 5-hydroxy-N, N-dimethyltryptamine; and mappine; (2) diethyltryptamine. Trade and other names shall include, but are not limited to: N, N-diethyltryptamine; and DET; (3) dimethyltryptamine. Trade and other names shall include, but are not limited to: DMT; (4) 4-bromo-2,5-dimethoxyamphetamine. Trade and other names shall include, but are not limited to: 4-bromo-2,5-dimethoxy-a-methylphenethylamine; and paramethoxyamphetamine, PMA; (6) 4-methyl-2,5-dimethoxyamphetamine. Trade and other names shall include, but are not limited to: 4-methyl-2,5-dimethoxy-a-methylphenethylamine; DOM; and STP; (7) 5-methoxy-N-N,N-dimethyltryptamine; and paramethoxyamphetamine, PMA; (8) ibogaine. Trade and other names shall include, but are not limited to: 7-ethyl-6,8B,9,10,12,13-octahydro-2-methoxy-6-methano-5H-pyrido (1',2':1,2) azepino (5,4-b) indole; and tabernanthe iboga; (9) lysergic acid diethylamide; (10) marijuan; (11) mescaline; (12) peyote. Peyote shall mean all parts of the plant presently classified botanically as Lophophora williamsii Lemaire, whether growing or not, the seeds thereof, any extract from any part of such plant, and every compound, manufacture, salts, derivative, mixture, or preparation of such plant or its seeds or extracts; (13) psilocybin; (14) psilocycin; (15) tetrahydrocannabinols, including, but not limited to, synthetic equivalents of the substances contained in the plant or in the resinous extracts of cannabis, sp. or synthetic substances, derivatives and their isomers with similar chemical structure and pharmacological activity such as the following: Delta 1 cis or trans tetrahydrocannabinol and their optical isomers, excluding dronabinol in sesame oil and encapsulated in a soft gelatin capsule in a drug product approved by the federal Food and Drug Administration; Delta 6 cis or trans tetrahydrocannabinol and their optical isomers, and Delta 3 cis or trans tetrahydrocannabinol and their optical isomers. Since nomenclature of these substances is not internationally standardized, compounds of these structures shall be included regardless of the numerical designation of atomic positions covered; (16) 3,4-methylendioxy amphetamine; (17) 5-methoxy-3,4-methylendioxy amphetamine; (18) 3,4,5-trimethoxyamphetamine; (19) N-methyl-3,4,5-trimethoxyamphetamine; (20) N-methyl-3,4,5-trimethoxybenzilate; and (21) thiophene analog of phencyclidine. Trade and other names shall include, but
are not limited to: 1-(1-(2-thienyl)-cyclohexyl)-piperidine; 2-thienylanalog of phencyclidine; TPCP; and TCP; (22) 2,5-dimethoxyamphetamine. Trade and other names shall include, but are not limited to: 2,5-dimethoxy-α-methylphenethylamine; and 2,5-DMA; (23) 2,5-dimethoxyamphetamine. Trade and other names shall include, but are not limited to: 3-Hexyl-1-hydroxy-7,8,9,10-tetrahydro-6,6,9-trimethyl-6H-dibenzo(b,d)pyran; and synhexyl; (25) Ethylamine analog of phencyclidine. Trade and other names shall include, but are not limited to: 1-(1-phenylcyclohexyl)-pyrrolidine; PCPy; and PHP; and (27) ——— 3,4-methylenedioxymethamphetamine (MDMA), its optical, positional, and geometric isomers, salts, and salts of isomers; and (28) Phenethylamine. Trade and other names shall include, but are not limited to: 4-bromo-2,5-dimethoxyphenethylamine; 2-CB; Venus; Bromo; Erox; and Nexus. ________________________________________________________________________

(d) Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: (1) Mecloqualone; and (2) methaqualone.

(e) Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers, and salts of isomers: (1) Fenethylline; and (2) N-ethylamphetamine.

(f) Gamma hydroxy butyrate (GHB).

(g) Any controlled substance analogue to the extent intended for human consumption. __________________________

Schedule II

(a) Any of the following substances except those narcotic drugs listed in other schedules whether produced directly or indirectly by extraction from substances of vegetable origin, independently by means of chemical synthesis, or by combination of extraction and chemical synthesis: (1) Opium and opiate, and any salt, compound, derivative, or preparation of opium or opiate, excluding apomorphine, buprenorphine, nalbuphine, naloxone, and naltrexone and their salts, but including the following: (i) Raw opium; (ii) opium extracts; (iii) opium fluid extracts; (iv) powdered opium; (v) granulated opium; (vi) tincture of opium; (vii) codeine; (viii) ethylmorphine; (ix) etorphine hydrochloride; (x) dihydrocodeinone which is also known as hydrocodone; (xi) hydromorphone; (xii) metopon; (xiii) morphine; (xiv) oxycodone; (xv) oxymorphone; and (xvi) thebaines;

(2) Any salt, compound, derivative, or preparation thereof which is chemically equivalent to or identical with any of the substances referred to in subdivision (1) of this subdivision, except that these substances shall not include the isoquinoline alkaloids of opium;

(3) Opium poppy and poppy straw;

(4) Coca leaves and any salt, compound, derivative, or preparation of coca leaves, and any salt, compound, derivative, or preparation thereof which is chemically equivalent to or identical with any of these substances, including cocaine and its salts, optical isomers, and salts of optical isomers, except that the substances shall not include decocainized coca leaves or extractions which do not contain cocaine or ecgonine; and

(5) Concentrate of poppy straw, the crude extract of poppy straw in either liquid, solid, or powder form which contains the phenanthrene alkaloids of the opium poppy.

(b) Unless specifically excepted or unless in another schedule any of the following opiates, including their isomers, esters, ethers, salts, and salts of their isomers, esters, and ethers whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation, dextrophan and levopropoxyphene excepted: (1) Alphaprodine; (2) anileridine; (3) bezitramide; (4) diphenoxylate; (5) fentanyl; (6) isomethadone; (7) levomethorphan; (8) levorphanol; (9) metazocine; (10) methadone; (11) methadone-Intermediate, 4-cyano-2-dimethylamino-4,4-diphenylbutane; (12) moramide-Intermediate, 2-methyl-3-morpholino-1,1-diphenyl-propanoic acid; (13) pethidine or meperidine; (14) pethidine-Intermediate-A, 4-cyano-1-methyl-4-phenylpiperidine; (15) pethidine-Intermediate-B, ethyl-4-phenylpiperidine-4-carboxylate; (16) pethidine-Intermediate-C, 1-ethyl-4-phenylpiperidine-4-carboxylic acid; (17) phenazocine; (18) piminodine; (19) racemethorphan; (20) racemorphine; (21)
dihydrocodeine; (22) bulk dextropropoxyphene in nondosage forms; (23) sufentanil; (24) alfentanil; and (25) levo-alphacetylmethadol which is also known as levo-alpha-acetylmethadol, levomethadyl acetate, and LAAM.

(c) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a potential for abuse associated with a stimulant effect on the central nervous system: (1) Amphetamine, its salts, optical isomers, and salts of its optical isomers; (2) phenmetrazine and its salts; (3) methamphetamine, its salts, isomers, and salts of its isomers; and (4) methylphenidate.

(d) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a potential for abuse associated with a depressant effect on the central nervous system, including their salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designations: (1) Amobarbital; (2) secobarbital; (3) pentobarbital; (4) phenylbutazone; and (5) glutethimide.

(e) Hallucinogenic substances known as: (1) Dronabinol, synthetic, in sesame oil and encapsulated in a soft gelatin capsule in a Food and Drug Administration approved drug product. Some other names for dronabinol are (6aR-trans)-6a,7,8,10a-tetrahydro-6,6,9-trimethyl-3-penty1-6H-dibenz(b,d)pyran-1-ol or (-)-delta-9-(trans)-tetrahydrocannabinol; and (2) nabulone. Another name for nabulone is (+)-trans-3-[1,1-dimethylheptyl]-6,6,7,8,9,10a-hexahydro-1-hydroxy-6,6-dimethyl-9H-dibenz(b,d)pyran-9-one.

(f) Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances: (1) Immediate precursor to amphetamine and methamphetamine: Phenylacetone. Trade and other names shall include, but are not limited to: Phenyl-2-propanone; P2P; benzyl methyl ketone; and methyl benzyl ketone; or (2) immediate precursors to phencyclidine, PCP: (i) 1-phenylcyclohexylamine; or (ii) 1-piperidinocyclohexanecarbonitrile, PCC.

Schedule III

(a) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a potential for abuse associated with a stimulant effect on the central nervous system, including their salts, isomers, whether optical, position, or geometric, and salts of such isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: (1) Benztropine; (2) chlorphenetermine; (3) chlortermine; and (4) phenylpropanolamine.

(b) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a potential for abuse associated with a depressant effect on the central nervous system: (1) Any substance which contains any quantity of a derivative of barbituric acid or any salt of a derivative of barbituric acid, except those substances which are specifically listed in other schedules of this section; (2) chlorohexadol; (3) lysergic acid; (4) lysergic acid amide; (5) methyprylon; (6) sulfondiethylmethane; (7) sulfonethylmethane; (8) sulfonmethane; (9) nalorphine; (10) any compound, mixture, or preparation containing amobarbital, secobarbital, pentobarbital, or any salt thereof and one or more other active medicinal ingredients which are not listed in any schedule; (11) any suppository dosage form containing amobarbital, secobarbital, pentobarbital, or any salt of any of these substances and approved by the Food and Drug Administration for marketing only as a suppository; and (12) tiletamine and zolazepam or any salt thereof. Trade or other names for a tiletamine-zolazepam combination product shall include, but not be limited to: telazol. Trade or other names for tiletamine shall include, but not be limited to: 2-(ethylamino)-2-(2-thienyl)-cyclohexanone. Trade or other names for zolazepam shall include, but not be limited to: 4-[(2-fluorophenyl)-6,8-dihydro-1,3,8-trimethylpyrazolo-3,4-e]-1,4-diazepin-7(11H)-one, and flupyrazapox.

(c) Any material, compound, mixture, or preparation containing limited quantities of any of the following narcotic drugs, or any salts calculated as the free anhydrous base or alkaloid, in limited quantities as set forth below:

1. Not more than one and eight-tenths grams of codeine per one hundred milliliters or not more than ninety milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium;

2. Not more than one and eight-tenths grams of codeine per one hundred milliliters or not more than ninety milligrams per dosage unit, with one or more other nonnarcotic ingredients in recognized therapeutic amounts;

3. Not more than three hundred milligrams of dihydrocodeine none which
is also known as hydrocodone per one hundred milliliters or not more than fifteen milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium;

(4) Not more than three hundred milligrams of dihydrocodeineone which is also known as hydrocodone per one hundred milliliters or not more than fifteen milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(5) Not more than one and eight-tenths grams of dihydrocodeine per one hundred milliliters or not more than ninety milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(6) Not more than three hundred milligrams of ethylmorphine per one hundred milliliters or not more than fifteen milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(7) Not more than five hundred milligrams of opium per one hundred milliliters or per one hundred grams, or not more than twenty-five milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts; and

(8) Not more than fifty milligrams of morphine per one hundred milliliters or per one hundred grams with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(d) Any anabolic steroid, which shall include any material, compound, mixture, or preparation containing any quantity of the following substances, including its salts, isomers, and salts of isomers whenever the existence of such salts of isomers is possible within the specific chemical designation: (1) Boldenone; (2) chlorotestosterone (4-chlortestosterone); (3) clotebol; (4) dehydrochormethyltestosterone; (5) dihydrotestosterone (4-dihydrotestosterone); (6) drostanolone; (7) ethylestrenol; (8) fluoxymesterone; (9) formebolone (formebolone); (10) mesterolone; (11) methandienone; (12) methandranone; (13) methandriol; (14) methandrostenolone; (15) methenolone; (16) methyltestosterone; (17) nandrolone; (18) norethandrolone; (19) oxandrolone; (20) oxymetholone; (21) stanolone; (22) testosterone; (23) trenbolone; and (28) any salt, ester, or isomer of a drug or substance described or listed in this subdivision if the salt, ester, or isomer promotes muscle growth.

Schedule IV

(a) Any material, compound, mixture, or preparation containing any quantity of the following substances, including their salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: (1) Barbital; (2) chloral betaine; (3) chloral hydrate; (4) chloridiazepoxide, but not including Librax (chloridiazepoxide hydrochloride and clindinium bromide) or fencamfamin; (5) clonazepam; (6) clorazepate; (7) diazepam; (8) ethchlorvynol; (9) ethinamate; (10) flurazepam; (11) mebutamate; (12) meprobamate; (13) mephedrine; (14) methylenedioxibarbitral; (15) oxazepam; (16) paraldehyde; (17) phencyclidine; (18) phenobarbital; (19) prazepam; (20) alprazolam; (21) bromazepam; (22) camazepam; (23) clobazam; (24) clonazepam; (25) clorazepate; (26) delorazepate; (27) estazolam; (28) ethyl loflazepate; (29) fludiazepam; (30) flunitrazepam; (31) halazepam; (32) haloxazolam; (33) ketazolam; (34) lorazepam; (35) lormetazepam; (36) medazepam; (37) nimetazepam; (38) nitrazepam; (39) nordiazepam; (40) oxazepam; (41) oxazolam; (42) pinazepam; (43) temazepam; (44) tizazepam; (45) triazolam; (46) midazolam; (47) quazepam; and (48) zolpidem.

(b) Any material, compound, mixture, or preparation which contains any quantity of the following substances, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible: Fenfluramine.

(c) Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including their salts, isomers, whether optical, position, or geometric, and salts of such isomers, whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: (1) Diethylpropion; (2) phentermine; (3) pemoline, including organonitrogen complexes and chelates thereof; (4) mazindol; (5) pipradrol; (6) SPA, (1R)-1-diphenylmethanol; (7) citalopram. Another name for citalopram is (+)-norpseudoephedrine; (8) fendamfamin; (9) fenproporex; and (10) mfenorex.

(d) Unless specifically excepted or unless listed in another
schedule, any material, compound, mixture, or preparation which contains any
quantity of the following narcotic drugs, or their salts or isomers calculated
as the free anhydrous base or alkaloid, in limited quantities as set forth
below: (1) Propoxyphene; and (2) not more than one milligram of difenoxin and
not less than twenty-five micrograms of atropine sulfate per dosage unit.
(e) Unless specifically excepted or unless listed in another
schedule, any material, compound, mixture, or preparation which contains any
quantity of the following substance, including its salts: Pentazocine.
(f) Unless specifically excepted or unless listed in another
schedule, any material, compound, mixture, or preparation which contains any
quantity of the following substance, including its salts, isomers, and salts
of such isomers: Butorphanol.
(g)(1) Unless specifically excepted or unless listed in another
schedule, any material, compound, mixture, or preparation which contains any
quantity of the following substance, including its salts, optical isomers, and
salts of such optical isomers: Ephedrine.
(2) The following drug products containing ephedrine, its salts,
optical isomers, and salts of such optical isomers are excepted from
subdivision (g)(1) of Schedule IV if they may lawfully be sold over the
counter without a prescription under the Federal Food, Drug, and Cosmetic Act;
are labeled and marketed in a manner consistent with the pertinent OTC
Tentative Final or Final Monograph; are manufactured and distributed for
legitimate medicinal use in a manner that reduces or eliminates the likelihood
of abuse; and are not marketed, advertised, or labeled for the indication of
stimulation, mental alertness, weight loss, muscle enhancement, appetite
control, or energy:
(A) Solid oral dosage forms, including soft gelatin capsules, that
combine active ingredients in the following ranges for each dosage unit:
(i) Not less than one hundred milligrams nor more than one hundred
thirty milligrams of theophylline and not less than twelve and five-tenths
milligrams nor more than twenty-four milligrams of ephedrine;
(ii) Not less than sixty milligrams nor more than one hundred
milligrams of theophylline, not less than twelve and five-tenths milligrams
nor more than twenty-four milligrams of ephedrine, and not less than two
hundred milligrams nor more than four hundred milligrams of guaifenesin;
(iii) Not less than twelve and five-tenths milligrams nor more than
twenty-five milligrams of ephedrine and not less than two hundred milligrams
nor more than four hundred milligrams of guaifenesin; and
(iv) Not more than eight milligrams of phenobarbital in combination
with the ingredients of subdivision (g)(2)(A)(i) or (g)(2)(A)(ii) of Schedule
IV;
(B) Liquid oral dosage forms that combine active ingredients in the
following ranges for each five-milliliter dose:
(i) Not more than forty-five milligrams of theophylline, not more
than thirty milligrams of ephedrine, not more than one hundred milligrams
of guaifenesin, and not more than twelve milligrams of phenobarbital; and
(ii) Not more than five milligrams of phenylephrine, not more than
five milligrams of phenylpropanolamine, not more than ten milligrams of dextromethorphan, not more
than forty milligrams of ammonium chloride, and not more than five
one-thousandths of a milligram of ipecac fluid extract; and
(C) Anorectal preparations containing less than five percent
ephedrine.
Schedule V
(a) Unless specifically excepted or unless listed in another
schedule, any material, compound, mixture, or preparation containing any of
the following narcotic drug and its salts: (1) Buprenorphine.
(b) Any compound, mixture, or preparation containing any of the
following limited quantities of narcotic drugs or salts calculated as the free
anhydrous base or alkaloid, which shall include one or more nonnarcotic active
medicinal ingredients in sufficient proportion to confer upon the compound,
mixture, or preparation valuable medicinal qualities other than those
possessed by the narcotic drug alone:
(1) Not more than two hundred milligrams of codeine per one hundred
milliliters or per one hundred grams;
(2) Not more than one hundred milligrams of dihydrocodeine per one
hundred milliliters or per one hundred grams;
(3) Not more than one hundred milligrams of ethylmorphine per one
hundred milliliters or per one hundred grams;
(4) Not more than two and five-tenths milligrams of diphenoxylate
and not less than twenty-five micrograms of atropine sulfate per
dosage unit;
(5) Not more than one hundred milligrams of opium per one hundred milliliters or per one hundred grams; and
(b) Not more than five-tenths milligram of difenoxin and not less than twenty-five micrograms of atropine sulfate per dosage unit.

Sec. 2. Section 28-406, Revised Statutes Supplement, 1998, is amended to read:

28-406. (1) The department is authorized to promulgate rules and regulations relating to the registration and control of the manufacture, distribution, prescribing, and dispensing of controlled substances within this state. Registrations shall issue registrations and reregistrations to manufacture, distribute, prescribe, and dispense controlled substances within this state which become effective on or after September 1, 1997, shall be issued on a biennial basis.

(2) The various fees to be paid by applicants for registrations and reregistrations, as required under the Uniform Controlled Substances Act, shall be as follows:

(a) Registration or reregistration to manufacture controlled substances, not less than one hundred dollars and not more than three hundred dollars, except as provided in subdivision (f) of this subsection;
(b) Registration or reregistration to distribute controlled substances, not less than one hundred dollars and not more than three hundred dollars, except as provided in subdivision (f) of this subsection;
(c) Registration or reregistration to prescribe, administer, or dispense controlled substances, not less than twenty dollars and not more than one hundred fifty dollars, except as provided in subdivision (f) of this subsection;
(d) Registration or reregistration to engage in research on the use and effects of controlled substances, not less than fifty dollars and not more than two hundred dollars, except as provided in subdivision (f) of this subsection;
(e) Registration or reregistration to engage in laboratory and analytical analysis of controlled substances, not less than fifty dollars and not more than two hundred dollars, except as provided in subdivision (f) of this subsection; and
(f) Registration as provided in subdivisions (a) through (e) of this subsection which becomes effective on or after May 30, 1997, and expires on August 31, 1997, an amount equal to one-half of the fees established under such subdivisions or reregistration to provide detoxification treatment or maintenance treatment, not less than twenty dollars and not more than one hundred fifty dollars.

(3) All registrations and reregistrations effective prior to September 1, 1997, shall expire on August 31, 1997. All registrations and reregistrations which become effective on or after September 1, 1997, shall expire on August 31 of each odd-numbered year. Registration shall be automatically denied without a hearing for nonpayment of fees. Any registration or reregistration not renewed by payment of renewal fees by October 1 of odd-numbered years shall be automatically denied and canceled on October 1 of odd-numbered years without a hearing.

(4) The department is authorized to adopt rules and regulations necessary to implement this section.

Sec. 3. Section 28-412, Revised Statutes Supplement, 1998, as amended by section 2, Legislative Bill 379, Ninety-sixth Legislature, First Session, 1999, is amended to read:

28-412. It shall be unlawful for any duly licensed practicing physician to prescribe, or for any duly licensed practicing physician, pharmacist, assistant dentist, or veterinarian, to administer in any manner or form, any cocaine, alpha or beta eucaine, morphine, or opium, or any salt, compound, or derivative of any of the foregoing substances, or any preparation, product, or compound containing any of the foregoing substances or any of their salts, compounds, or derivatives, for, to, or by any person addicted to the habitual use of cocaine, alpha or beta eucaine, morphine, or opium, or any salt, compound, or derivative of any of the foregoing substances, or any preparation, product, or compound containing any of the foregoing substances or any of their salts, compounds, or derivatives, except that a reputable and duly licensed practicing physician may personally administer to a patient who is a habitual user of such drugs, or any of them, necessary drugs therefor, when it has been in good faith determined by two reputable and duly licensed participating physicians, in consultation, to be absolutely necessary in the medical treatment of such patient, in which case, the physician administering such drugs, or any of them, shall make and keep a record in writing of the name and address of the person to whom such drugs, or any of them, were administered, the date administered, the form and quantity
of drug administered, the name and address of the consulting physician, and the date and place of consultation. Such record shall be retained and preserved within the State of Nebraska, and the county where administered, for a period of at least seven years, and shall always be open for inspection by the Department of Health and Human Services Regulation and Licensure, state, county, and city health officers, county attorneys, grand juries, and all officers of the law, and by agents appointed by them, or any of them, for the purpose of making an inspection. The record shall be made at the time of each administration of such drugs, and a copy of each record shall be kept within five days after each administration of such drugs, or any of them, as in this section provided; be filed with the county attorney of the county in which the administering took place, by the physician administering the drugs, or any of them, and shall have affixed thereto the signature and address of the administering physician.

(1) It is unlawful to prescribe any narcotic drug listed in section 28-405 for the purpose of detoxification treatment, or maintenance treatment except as provided in this section.

(2) A narcotic drug may be administered or dispensed to a narcotic-dependent person for detoxification treatment or maintenance treatment as prescribed by a practitioner who is registered to provide detoxification treatment or maintenance treatment pursuant to section 28-406.

(3) A narcotic drug may be administered or dispensed to a narcotic-dependent person when necessary to relieve acute withdrawal symptoms pending the referral of such person for detoxification treatment or maintenance treatment as prescribed by a physician who is not registered to provide detoxification treatment or maintenance treatment under section 28-406. Not more than one day’s supply of narcotic drugs shall be administered or dispensed for such person’s use at one time. Such treatment shall not be continued for more than three successive calendar days and may not be renewed or extended.

(4) A narcotic drug may be prescribed, administered, or dispensed in a hospital to maintain or detoxify a person as an incident adjunct to medical or surgical treatment conditions other than dependence.

(5) Any person violating any of the provisions or requirements of this section or any part thereof shall be guilty of a Class IV felony.

(6) For purposes of this section:

(a) Detoxification treatment means the prescribing, administering, or dispensing of a narcotic drug in decreasing doses to a person for a specified period of time to alleviate adverse physiological or psychological effects incident to withdrawal from the continuous or sustained use of a narcotic and to bring such person to a narcotic drug-free state within such period of time. Detoxification treatment includes short-term detoxification treatment and long-term detoxification treatment;

(b) Long-term detoxification treatment means detoxification treatment for a period of more than thirty days but not more than one hundred eighty days;

(c) Maintenance treatment means the prescribing, administering, or dispensing of a narcotic drug in the treatment of a narcotic-dependent person for a period of more than twenty-one days; and

(d) Short-term detoxification treatment means detoxification treatment for a period of not more than thirty days.
(i) A controlled substance included listed in Schedule II of section 28-405 may be transmitted by the practitioner to a pharmacy by facsimile equipment, dispensed pursuant to an authorized transmitted copy of a written, signed prescription if the original written, signed prescription is presented to the pharmacist for review prior to the actual dispensing of before the controlled substance is dispensed, except as provided in subdivision (3)(b)(i) or (3)(b)(ii) of this section.

(ii) A prescription written for a narcotic drug listed in Schedule II of section 28-405 may be dispensed pursuant to an authorized transmitted copy of a written, signed prescription (A) to be compounded for the direct parenteral administration to a patient by parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion may be transmitted by the practitioner to the pharmacy by facsimile equipment for the purpose of home infusion therapy or (B) for administration to a patient in a hospice licensed under the Hospice Licensure Act or certified under Title XVIII of the federal Social Security Act, as amended, and bearing the words "hospice patient": The facsimile shall serve as the original written prescription for purposes of subdivision (1)(b)(ii) of this section and shall be maintained in accordance with the provisions of subdivision 44(a) of this section.

(iii) A prescription written for a controlled substance included listed in Schedule II of section 28-405 for may be dispensed pursuant to an authorized transmitted copy of a written, signed prescription for administration to a resident of a long-term care facility and for a patient with a medical diagnosis documenting a terminal illness shall be is________

(iv) For purposes of subdivisions (1)(c)(i) and (1)(c)(ii) of this section, an authorized transmitted copy of a written, signed prescription may be transmitted by the practitioner to the dispensing pharmacy by facsimile equipment. The facsimile shall serve as the original written prescription for purposes of subdivision (1)(b)(iii) of this section and it shall be maintained in accordance with the provisions of subdivision 44(a) of this section.

(iv) The partial filling of a (d)(i) A prescription for a controlled substance included listed in Schedule II of section 28-405 is permissible may be partially filled if the pharmacist does not supply the full quantity called for in a written or facsimile prescription prescribed and he or she makes a notation of the quantity supplied on the face of the written prescription or written record of the emergency oral or facsimile prescription. The remaining portion of the prescription may be filled within seventy-two hours of the first partial filling. The however, if the remaining portion is not or cannot be filled within the seventy-two-hour period, 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 beyond seventy-two hours after such period without a new prescription.

(iii) A prescription for a controlled substance included 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. In partial quantities to include individual dosage units. 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. The pharmacist shall record on the prescription whether the patient is terminally ill or long-term care facility patient. Except as provided in subdivision (1)(b)(iv) of this section, a prescription that is partially filled and does not contain the notation terminally ill or long-term care facility patient shall be deemed to have been filled in violation of the Uniform Controlled Substances Act. 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. Prior to any subsequent partial filling the pharmacist is to determine that the additional partial filling is necessary. The total quantity of Schedule II controlled substances listed in Schedule II which are dispensed the day the partial fillings shall not exceed the total quantity prescribed. A prescription for a Schedule II controlled substance for patients a patient in a long-term care facility or patients a patient with a medical diagnosis documenting a terminal illness shall be is valid for a period not to exceed sixty days from the date of issuance unless
sooner terminated by the practitioner or until discontinuance of medication the prescription, whichever occurs first.

(2)(a) Except as otherwise provided in this subsection subdivision (2)(b) of this section or when administered directly by a practitioner, other than a pharmacist, to an ultimate user, no other controlled substance listed in Schedule III, or IV, or V of section 28-405 which is a prescription drug as determined under the laws of this state or the laws of the United States may not be dispensed without a written or oral prescription. Such prescription must not be filled more than once valid for six months after the date of the prescription issuance. Practitioner authorization shall be required to refill any such prescription. Such refills may not occur prescriptions shall not be refilled more than five times within six months after the date of the prescription issuance.

Original prescription information for any controlled substance listed in Schedule III, IV, or V of section 28-405 may be transferred between pharmacies for purposes of refill dispensing pursuant to subsection (5) of this section.

(b) A prescription for a controlled substance listed in Schedule III, or IV, or V of section 28-405 may be transmitted by the practitioner to a pharmacy by facsimile equipment. The facsimile dispensed pursuant to an authorized transmitted copy of a written, signed prescription. The authorized transmitted copy of a written, signed prescription shall serve as the original written prescription for purposes of this subdivision and shall be maintained in accordance with the provisions of subdivision (4)(e) of this section.

(c) A prescription for a controlled substance listed in Schedule III, or IV, or V of section 28-405 may be partially filled in partial quantities if (i) each partial filling is recorded in the same manner as a refilling, (ii) the total quantity dispensed in all partial fillings does not exceed the total quantity prescribed, and (iii) each partial filling is dispensed within six months after the date on which the prescription was issued.

(3)(a) Except as provided in subdivision (2)(b) of this section or when administered directly by a practitioner, other than a pharmacist, to an ultimate user, no controlled substance included in Schedule V of section 28-405 may be dispensed without a written or oral prescription.

(b) A prescription for a controlled substance included in Schedule V of section 28-405 may be transmitted by the practitioner to a pharmacy by facsimile equipment. The facsimile shall serve as the original written prescription for purposes of this subdivision and shall be maintained in accordance with the provisions of subdivision (4)(e) of this section.

(c) A prescription for a controlled substance listed in Schedule II of section 28-405 shall be kept in a separate file by the dispensing practitioner and shall be maintained for a minimum of seven five years. The practitioner shall make all such files readily available and shall be authorized to authorized agents of the department and the Division of Drug Control law enforcement for inspection without any requirement for obtaining a search warrant.

(b) All prescriptions for controlled substances listed in Schedule II of section 28-405 shall contain the name and address of the patient, and the name and address of the prescribing practitioner, including the registry number under the federal narcotic laws the Drug Enforcement Administration number of the prescribing practitioner, the date of issuance, and the prescribing practitioner's signature. The pharmacist or practitioner filling the such prescription shall write the date of filling and his or her own signature on the face of the prescription. If the prescription is for an animal, it shall also state the name and address of the owner of the animal and the species of the animal.

(c) Prescriptions for all controlled substances listed in Schedules III, IV, and V of section 28-405 shall be filed separately from other prescriptions in a single file by the dispensing practitioner and shall be maintained for a minimum of seven five years. The practitioner shall be required to make all prescription such files readily available to authorized agents of the Department of Drug Control and the Drug Enforcement Administration number of the prescribing practitioner, the date of issuance, and the prescribing practitioner's signature, including the registry number under the federal narcotics laws. If the prescription is for an animal, it shall also state the owner's name and address and species of the animal.
(e) The registrant who is the owner of any stock of controlled substances listed in Schedules II, III, IV, V of section 28-405: upon discontinuance of the dealing in such substances, may sell such substances to a manufacturer, wholesaler, or apothecary but only on an official order form as required by section 28-413 transfer such controlled substance to another registrant as provided by law or by rule and regulation of the department.

(f) No pharmacist or dispensing practitioner shall dispense before dispensing any controlled substance contained in Schedules II, III, IV, V of section 28-405 without affixing the dispensing practitioner shall affix a label to the container in which the controlled substance is dispensed. Such label shall bear the name and address of the pharmacy or dispensing practitioner, the name of the patient, date of filling, the consecutive number of the prescription under which it is recorded in the practitioner's prescription files, the name of the physician, dentist, veterinarian, or other prescribing practitioner who prescribes it, and the directions for the use of the drug. Unless the prescribing practitioner writes “do not label” or words of similar import on the original written prescription or so designates in an oral or telephonic transmission of the prescription, all prescriptions for a controlled substance contained in Schedule II of section 28-405 shall bear upon the label such label shall also bear the name of the controlled substance.

(4) For purposes of this section, authorized transmitted copy means a paper copy of a written, signed prescription produced by an electronic or electromagnetic transmission or other means as authorized by rule and regulation of the department upon recommendation of the Board of Examiners in Pharmacy.

(5) Original prescription information for any controlled substances listed in Schedules III, IV, V of section 28-405 and other prescription drugs or devices not listed in section 28-405 may be transferred between pharmacies for the purpose of refill dispensing on a one-time basis. Pharmacies electronically accessing a real-time, on-line data base may transfer up to the maximum refills permitted by law and as authorized by the prescribing practitioner on the face of the prescription, in the container.

(g) No pharmacist or dispensing practitioner shall dispense any controlled substance contained in Schedules III, IV, V of section 28-405 without affixing to the container in which the substance is dispensed a label bearing the name and address of the pharmacy or dispensing practitioner, the name of the patient, the date of initial filling, the consecutive number of the prescription under which it is recorded in the practitioner's prescription files, the name of the physician, dentist, veterinarian, or other prescribing practitioner who prescribes it, and the directions for the use of the drug. Unless the prescribing practitioner writes “do not label” or words of similar import on the prescription or so designates in an oral or facsimile transmission of the prescription, all prescriptions for a controlled substance contained in Schedules III, IV, and V of section 28-405 shall bear upon the label the name of the substance in the container.Original prescription information for any controlled substances shall be recorded in the practitioner's prescription record. In the event of a transfer up to the maximum refills permitted by law and as authorized by the prescribing practitioner on the face of the prescription, in the container.

Sec. 5. Section 28-415, Reissue Revised Statutes of Nebraska, as amended by section 3, Legislative Bill 379, Ninety-sixth Legislature, First Session, 1999, is amended to read:

28-415. (1) Whenever a manufacturer who sells or dispenses a narcotic drug and when ever a wholesaler who sells or dispenses a narcotic drug in a package prepared by him or her, he or she shall securely affix a label to each package in which the drug is contained showing in legible English the name and address of the vendor and the quantity, kind, and form of narcotic drug contained therein. No person, except an apothecary or pharmacy for the purpose of filling a prescription under the Uniform Controlled Substances Act, shall alter, deface, or remove any label so affixed.

(2) Whenever an apothecary a pharmacy that sells or dispenses any narcotic drug on a prescription issued by a physician, dentist, veterinarian, or other prescribing practitioner shall affix a label to the container in which such drug is sold or dispensed a label in accordance with the requirements stated in subdivisions (a)(f) and (g) pursuant to subdivision (3)(f) of section 28-414. No person shall alter, deface, or remove any label so affixed.

Sec. 6. Section 28-728, Revised Statutes Supplement, 1998, is amended to read:

28-728. (1) The Legislature finds that child abuse and neglect are community problems requiring a cooperative complementary response by law enforcement, the Department of Health and Human Services, and other agencies or entities designed to protect children. It is the intent of the Legislature
to create a child abuse and neglect investigation team in each county or contiguous group of counties and to create a child abuse and neglect treatment team in each county or contiguous group of counties.

(2) The child abuse and neglect investigation team shall develop protocols which, at a minimum, shall include procedures for:
   (a) Conducting joint investigations of child abuse and other child abuse and neglect matters which the team deems necessary;
   (b) Ensuring that a law enforcement agency will participate in the investigation;
   (c) Conducting joint investigations of other child abuse and neglect matters which the team deems necessary;
   (d) Reducing the risk of harm to child abuse and neglect victims;
   (e) Ensuring that the child is in safe surroundings, including removing the perpetrator when necessary;
   (f) Sharing of case information; and
   (g) How and when the team will meet.

(3) The child abuse and neglect treatment team shall develop protocols which, at a minimum, shall include procedures for:
   (a) Case coordination and assistance, including the location of services available within the area;
   (b) Case staffings and the coordination, development, implementation, and monitoring of treatment plans;
   (c) Reducing the risk of harm to child abuse and neglect victims;
   (d) Ensuring that the child abuse and neglect victims who are abused and neglected by perpetrators who do not reside in their homes; and
   (e) How and when the team will meet.

(4) The child abuse and neglect teams may develop protocols which include procedures for working with multiproblem delinquent youth.

Sec. 7. Section 42-371, Reissue Revised Statutes of Nebraska, is amended to read:

42-371. Under the Uniform Interstate Family Support Act and sections 42-347 to 42-381, 43-290, 43-512 to 43-512.10, and 43-1401 to 43-1418:

(1) All judgments and orders for payment of money shall be liens, as in other actions, upon real property and any personal property registered with any county office and may be enforced or collected by execution and the means authorized for collection of money judgments. The judgment creditor may execute (a) a partial or total release of the judgment or (b) a document subordinating the lien of the judgment to any other lien, generally or on specific real or personal property. Release of a judgment for child support or spousal support or subordination of a lien of a judgment for child support or spousal support must be approved by the court which rendered the judgment unless all such payments are current, in which case a release or subordination document executed by the judgment creditor shall be sufficient to remove or subordinate the lien. A properly executed, notarized release or subordination document, explicitly reciting that all child support payments or spousal support payments are current, shall be prima facie evidence that such payments are in fact current. The judgment debtor may petition the court which rendered the original judgment for an order releasing or subordinating the lien as to specific real or personal property. The court shall grant such order upon a showing by the judgment debtor that sufficient real or personal property or property interests will remain subject to the lien or will maintain priority over other liens sufficient to cover all support due and which may become due.

(2) Full faith and credit shall be accorded to a lien arising by operation of law against real and personal property for amounts of overdue support owed by an obligor who resides or owns property in this state when another state agency, party, or other entity seeking to enforce such lien complies with the procedural rules relating to the filing of the lien in this state. The state agency, party, or other entity seeking to enforce such lien shall file a certified copy of the support order with all modifications, the notice of lien prescribed by 42 U.S.C. 652(a)(11) and 42 U.S.C. 654(9)(E), and the appropriate fee to the clerk of the district court in the jurisdiction within this state in which the lien is sought. Upon receiving the appropriate documents and fee, the clerk of the district court shall accept the documents filed and serve acceptance shall constitute entry of the foreign support order for purposes of this section only. Entry of a lien arising in another state pursuant to this section shall result in such lien being afforded the same treatment as liens arising in this state. The filing process required by this section shall not be construed as requiring an application, petition, answer, and hearing as might be required for the filing or registration of foreign judgments under the Nebraska Uniform Enforcement of Foreign Judgments Act or
the Uniform Interstate Family Support Act; (2) Child support and spousal support judgments shall cease to be
liens on real or registered personal property ten years from the date (a) the youngest child becomes of age or dies or (b) the most recent execution was issued to collect the judgment, whichever is later, and such lien shall not be
reinstated;
(3) Allimony and property settlement award judgments, if not covered by subdivision (2) of this section, shall cease to be a lien on real or registered personal property ten years from the date (a) the judgment was entered, (b) the most recent payment was made, or (c) the most recent execution was issued to collect the judgment, whichever is latest, and such lien shall not be reinstated;
(4) Whenever a judgment creditor refuses to execute a release of the judgment or subordination of a lien as provided in this section, the person desiring such release or subordination may file an application for the relief desired. A copy of the application and a notice of hearing shall be served on the judgment creditor either personally or by registered or certified mail no less than ten days before the date of hearing. If the court finds that the release or subordination is not requested for the purpose of avoiding payment and that the release or subordination will not unduly reduce the security, the court may issue an order releasing real or personal property from the judgment lien or issue an order subordinating the judgment lien. As a condition for such release or subordination, the court may require the posting of a bond with the clerk in an amount fixed by the court, guaranteeing payment of the judgment;
(5) The court may in any case, upon application or its own motion, after notice and hearing, order a person required to make payments to post sufficient security, bond, or other guarantee with the clerk to insure payment of both current and any delinquent amounts. Upon failure to comply with the order, the court may also appoint a receiver to take charge of the debtor's property to insure payment. Any bond, security, or other guarantee paid in cash may, when the court deems it appropriate, be applied either to current payments or to reduce any accumulated arrearage;
(6) The lien of a mortgage or deed of trust which secures a loan, the proceeds of which are used to purchase real property, and (b) any lien given priority pursuant to a subordination document under this section shall attach prior to any lien authorized by this section. Any mortgage or deed of trust which secures the refinancing, renewal, or extension of a real property purchase money mortgage or deed of trust shall have the same lien priority with respect to any lien authorized by this section as the original real property purchase money mortgage or deed of trust to the extent that the amount of the loan refinanced, renewed, or extended does not exceed the amount used to pay the principal and interest on the existing real property purchase money mortgage or deed of trust, plus the costs of the refinancing, renewal, or extension; and
(7) Any lien authorized by this section against personal property registered with any county consisting of a motor vehicle or mobile home shall attach upon notation of the lien against the motor vehicle or mobile home certificate of title and shall have its priority established pursuant to the terms of section 60-110 or a subordination document executed under this section.
Sec. 8. Section 43-101, Reissue Revised Statutes of Nebraska, is amended to read:
43-101. (1) Except as otherwise provided in the Nebraska Indian Child Welfare Act, any minor child may be adopted by any adult person of (2) Any adult child may be adopted by any person or persons subject to subsections 43-101 to 43-115, except that no person having a husband or wife may adopt a minor child unless the husband or wife joins in the petition therefor. If the husband or wife so joins in the petition therefor, the adoption shall be by them jointly. The adoption of an adult child by another adult or adults who are not the stepparent of the adult child may be permitted if the adult child has had a parent-child relationship with the prospective parent or parents for a period of at least six months next preceding the adult child's age of majority and (a) the adult child has no living parents, (b) the adult child's parent or parents had been deprived of parental rights to such child.

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by the order of any court of competent jurisdiction, (c) the parent or parents, if living, have relinquished the adult child for adoption by a written instrument, (d) the parent or parents had abandoned the child for at least six months preceding the adult child's age of majority, or (e) the parent or parents are incapable of consenting. The substitute consent provisions of section 43-105 do not apply to adoptions under this subsection.

Sec. 9. Section 43-102, Reissue Revised Statutes of Nebraska, is amended to read:
43-102. Exception as otherwise provided in the Nebraska Indian Child Welfare Act, any person or persons desiring to adopt a minor child or an adult child of such person's spouse shall file a petition for adoption signed and sworn to by the person or persons desiring to adopt. The consent or consents required by sections 43-104 and 43-105 or section 43-104.07, the documents required by section 43-104.07 or the documents required by sections 43-104.08 to 43-104.24, and a completed preplacement adoptive home study if required by section 43-107 shall be filed prior to the hearing required in section 43-103.

The county court of the county in which the person or persons desiring to adopt the child reside has jurisdiction of adoption proceedings, except that if a separate juvenile court already has jurisdiction over the child to be adopted under the Nebraska Juvenile Code, such separate juvenile court has concurrent jurisdiction with the county court in such adoption proceeding.

Except as set out in subdivisions (1)(b)(ii), (iii), and (iv), and (v) of section 43-107, an adoption decree shall not be issued until at least six months after an adoptive home study has been completed by the department or a licensed child placement agency.

Sec. 10. Section 43-104, Reissue Revised Statutes of Nebraska, is amended to read:
43-104. Except as otherwise provided in the Nebraska Indian Child Welfare Act, no adoption shall be decreed unless written consents thereto are filed in the court of the county in which the person or persons desiring to adopt reside and the written consents are executed by (1) the minor child, if over fourteen years of age, or the adult child of the adopting person's spouse, (2) any district court, county court, or separate juvenile court in the State of Nebraska having jurisdiction of the custody of a minor child by virtue of divorce proceedings had in any district court, county court, or separate juvenile court in the State of Nebraska or by virtue of section 43-1203, and (3) both parents of a child born in lawful wedlock if living, the surviving parent of a child born in lawful wedlock, the mother of a child born out of wedlock, or both the mother and father of a child born out of wedlock as determined pursuant to sections 43-104.08 to 43-104.24, except that consent shall not be required of any person who (a) has relinquished the child for adoption by a written instrument, (b) has abandoned the child for at least six months preceding the filling of the adoption petition, (c) has been deprived of his or her parental rights to such child by the order of any court of competent jurisdiction, or (d) is incapable of consenting.

Sec. 11. Section 43-104.01, Reissue Revised Statutes of Nebraska, is amended to read:
43-104.01. (1) The Department of Health and Human Services Finance and Support shall establish a biological father registry which shall record the names and addresses of (a) any person adjudicated by a court of this state to be the father of a child born out of wedlock if a certified copy of the order is filed with the registry by such person or any other person, (b) any person who filed with the registry prior to notification under sections 43-104.12 to 43-104.16 a paternity claim for notification purposes for such child, (c) any person who has filed with the registry a notice of intent to claim paternity and obtain custody of such child, and (d) any person adjudicated by a court of another state or territory of the United States to be the father of such child, if a certified copy of the court order has been filed with the registry by that person or any other person.

(2) A notice of intent to claim paternity, paternity claim for notification purposes or a notice of intent to claim paternity and obtain custody filed with the registry shall include the claimant's name and address, the name and last-known address of the mother, and the month and year of the birth or the expected birth of the child. The person filing the notice shall notify the registrar of any change of address pursuant to procedures prescribed by regulations of the department.

(3) Any person filing a notice of intent to claim paternity, paternity claim for notification purposes or a notice of intent to claim paternity and obtain custody with the biological father registry may revoke such notice, and upon receipt of such revocation by the registry, the effect shall be as if no filing had ever been made.

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(4) The department shall not divulge the names and addresses of persons listed with the registry to any other person except as authorized by law or upon order of a court for good cause shown.

(5) The department may develop information about the registry and may distribute such information, through their existing publications, to the news media and the public. The department may provide information about the registry to the Department of Correctional Services, the Department of Health and Human Services, and the Department of Health and Human Services Regulation and Licensure, who may distribute such information through their existing publications.

Sec. 12. Section 43-104.03, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.03. Within three days after the filing of a notice of intent to claim paternity, the claimant-father's consent to adoption of the child in the form mandated by section 43-106 or executes a certificate that no notice of intent to claim paternity and obtain custody has been filed with the biological father registry and the filing of such certificate pursuant to section 43-102 shall eliminate the need or necessity of a consent or relinquishment for adoption by the natural father of such child.

Sec. 13. Section 43-104.04, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.04. If a notice of intent to claim paternity and obtain custody is not timely filed with the biological father registry pursuant to section 43-104.02, the mother of a child born out of wedlock or an agent specifically designated in writing by the mother may request, and the Department of Health and Human Services Finance and Support shall supply, a certificate that no notice of intent to claim paternity and obtain custody has been filed with the biological father registry and the filing of such certificate pursuant to section 43-102 shall eliminate the need or necessity of a consent or relinquishment for adoption by the natural father of such child.

Sec. 14. Section 43-104.05, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.05. If a notice of intent to claim paternity and obtain custody is timely filed with the biological father registry pursuant to section 43-104.02, either the claimant-father, the mother, or her agent specifically designated in writing shall, within thirty days after filing the notice, file a petition for an adjudication of the claim of paternity and right to custody. The petition shall be filed in the county court in the county where such child is a resident for an adjudication of the claim of paternity and right to custody. The petition shall be filed in the county court in the county where such child is a resident for an adjudication of the claim of paternity and right to custody. If such a petition is not filed within thirty days after filing the notice, the claimant-father's consent to adoption of the child shall not be required, he is not entitled to any further notice, and any alleged parental rights of the claimant-father shall not be recognized thereafter in any court. After the filing of such petition, the court shall set a hearing trial date upon proper notice to the parties not less than ten twenty nor more than twenty thirty days after such filing. If the mother contests the claim of paternity, the court shall take such testimony as shall enable it to determine the facts. The claimant-father's rights and the custody of the child shall be determined pursuant to section 43-104.22. The court shall appoint a guardian ad litem to represent the best interests of the child.

Sec. 15. Section 43-104.11, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.11. If the biological mother’s affidavit, required by section 43-104.09, identifies only one possible biological father of the child and states that there are no other possible biological fathers of the child, and if the named father executes a valid relinquishment and consent to adoption of the child in the form mandated by section 43-106 or executes a denial of paternity and waiver of rights in the form mandated by section 43-106, the court may enter a decree of adoption pursuant to section 43-109 without regard to sections 43-104.12 to 43-104.23. A named biological father's relinquishment and consent or a named biological father's...
waiver of rights is irrevocable upon signing and is not voidable for any period after signing. Such relinquishment and consent or such waiver of rights may only be challenged on the basis of fraud or duress for up to six months after signing.

Sec. 16. Section 43-104.12, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.12. In order to attempt to inform the biological father or possible biological fathers of the right to execute a relinquishment and consent to adoption or a denial of paternity and waiver of rights, the agency or attorney representing the biological mother shall notify, by registered or certified mail, restricted delivery, return receipt requested:

(1) Any person adjudicated by a court in this state or by a court in another state or territory of the United States to be the biological father of the child;

(2) Any person who has filed a paternity claim for notification purposes or a notice of intent to claim paternity and obtain custody pursuant to section 43-104.02 sections 43-104.01 and 43-104.02;

(3) Any person who is recorded on the child’s birth certificate as the child’s father;

(4) Any person who might be the biological father of the child who was openly living with the child’s biological mother within the twelve months prior to the birth of the child;

(5) Any person who has been identified as the biological father or possible biological father of the child by the child’s biological mother pursuant to section 43-104.09;

(6) Any person who was married to the child’s biological mother within six months prior to the birth of the child and prior to the execution of the relinquishment; and

(7) Any other person who the agency or attorney representing the biological mother may have reason to believe may be the biological father of the child.

Sec. 17. Section 43-104.22, Reissue Revised Statutes of Nebraska, is amended to read:

43-104.22. At any hearing to determine a biological father’s parental rights to the child, the court shall receive evidence with regard to the biological father’s actual paternity of the child and whether he is a fit, proper, and suitable custodial parent for the child. The court shall determine that the biological father’s consent is not required for a valid adoption of the child upon a finding of one or more of the following:

(1) The father abandoned or neglected the child after having knowledge of the child’s birth;

(2) The father is not a fit, proper, and suitable custodial parent for the child;

(3) The father had knowledge of the child’s birth and failed to provide reasonable financial support for the mother or child;

(4) The father abandoned the mother without reasonable cause and with knowledge of the pregnancy, and failed to provide reasonable support for the mother during the pregnancy;

(5) The father had knowledge of the pregnancy and failed to provide reasonable support for the mother during the pregnancy;

(6) The child was conceived as a result of a nonconsensual sex act or an incestual act;

(7) Notice was provided pursuant to sections 43-104.12 to 43-104.14 and the father failed to timely file an intent to claim paternity and obtain custody pursuant to section 43-104.02;

(8) The father failed to timely file a petition to adjudicate his claim of paternity and right to custody as contemplated in section 43-104.05; or

(9) The man is not, in fact, the biological father of the child. The court shall determine the custody of the child according to the best interest of the child, weighing the superior rights of a biological parent who has been found to be a fit, proper, and suitable parent against any detriment the child would suffer if removed from the custody of persons with whom the child has developed a substantial relationship.

Sec. 18. Section 43-107, Reissue Revised Statutes of Nebraska, is amended to read:

43-107. (1)(a) For adoption placements occurring or in effect prior to January 1, 1994, upon the filing of a petition for adoption, the county judge shall, except in the adoption of children by stepparents when the requirement of an investigation is discretionary, request the Department of Health and Human Services or any child placement agency licensed by the department to examine into the allegations set forth in the petition and to

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ascertain any other facts relating to such minor child and the person or persons petitioning to adopt such child as may be relevant to the propriety of such adoption, except that the county judge shall not be required to request such an examination if the judge determines that information compiled in a previous examination or study is sufficiently current and comprehensive. Upon the request being made, the department or other licensed agency shall conduct an investigation and report its findings to the county judge in writing at least one week prior to the date set for hearing.

(b)(i) For adoption placements occurring on or after January 1, 1994, a preplacement adoptive home study shall be filed with the court prior to the hearing required in section 43-103, which study is completed by the Department of Health and Human Services or a licensed child placement agency within one year before the date on which the adoptee is placed with the petitioner or petitioners and indicates that the placement of a child for the purpose of adoption would be safe and appropriate.

(ii) An adoptive home study shall not be required when the petitioner is a stepparent of the adoptee unless required by the court, except that for petitions filed on or after January 1, 1994, the judge shall order the petitioner or his or her attorney to request the Nebraska State Patrol to file a Nebraska criminal history record information check and to request the department to conduct and file a check of the central register created in section 28-718 for any history of the petitioner of behavior injurious to or which may endanger the health or morals of a child. An adoption decree shall not be issued until such records are on file with the court. The petitioner shall pay the cost of the Nebraska criminal history record information check and the check of the central register.

(iii) The placement of a child for foster care made by or facilitated by the department or a licensed child placement agency in the home of a person who later petitions the court to adopt the child shall be exempt from the requirements of a preplacement adoptive home study. The petitioner or petitioners who meet such criteria shall have a postplacement adoptive home study completed by the department or a licensed child placement agency and filed with the court at least one week prior to the hearing for adoption.

(iv) A voluntary placement for purposes other than adoption made by a parent or guardian of a child without assistance from an attorney, physician, or other individual or agency which later results in a petition for the adoption of the child shall be exempt from the requirements of a preplacement adoptive home study. The petitioner or petitioners who meet such criteria shall have a postplacement adoptive home study completed by the department or a licensed child placement agency and filed with the court at least one week prior to the hearing for adoption.

(v) The adoption of an adult child as provided in subsection (2) of section 43-101 shall be exempt from the requirements of an adoptive home study unless the court specifically orders otherwise. The court may order an adoptive home study, a background investigation, or both if the court determines that such would be in the best interests of the adoptive party or the person to be adopted.

(vi) Any adoptive home study required by this section shall be conducted by the department or a licensed child placement agency at the expense of the petitioner or petitioners unless such expenses are waived by the department or licensed child placement agency. The department or licensed agency shall determine the fee or rate for the adoptive home study.

(vii) The preplacement or postplacement adoptive home study shall be performed as prescribed in rules and regulations of the department and shall include at a minimum an examination into the facts relating to the petitioner or petitioners as may be relevant to the propriety of such adoption. Such rules and regulations shall require an adoptive home study to include a Nebraska criminal history record information check and a check of the central register created in section 28-718 for any history of the petitioner of behavior injurious to or which may endanger the health or morals of a child.

(2) Upon the filing of a petition for adoption, the judge shall require that a complete medical history be provided on the child, except that in the adoption of a child by a stepparent the provision of a medical history shall be discretionary. A medical history shall be provided, if available, on the biological mother and father and their biological families, including, but not limited to, siblings, parents, grandparents, aunts, and uncles, unless the child is foreign born or was abandoned. The medical history or histories shall be reported on a form provided by the Department of Health and Human Services or a licensed child placement agency at the expense of the petitioner or petitioners unless such expenses are waived by the department or licensed child placement agency. The department or licensed child placement agency shall determine the fee or rate for the adoptive home study.
Finance and Support shall inform the court and the State Court Administrator. The medical history or histories shall be made part of the court record. After the entry of a decree of adoption, the court shall retain a copy and forward the original medical history or histories to the Department of Health and Human Services Finance and Support. This subsection shall only apply when the relinquishment or consent for an adoption is given on or after September 1, 1988.

Sec. 19. Section 43-109, Reissue Revised Statutes of Nebraska, is amended to read:

43-109. (1) If, upon the hearing, the court finds that such adoption is for the best interests of such minor child or such adult child of the adopting person's spouse; a decree of adoption shall be entered. No decree of adoption shall be entered unless (a) it appears that the child has resided with the person or persons petitioning for such adoption for at least six months next preceding the entering of the decree of adoption, except that such residency requirement shall not apply in an adoption of an adult child of the adopting person's spouse; (b) the medical histories required by subsection (2) of section 43-107 have been made a part of the court record, and (c) the court record includes an affidavit or affidavits signed by the relinquishing biological parent, or parents if both are available, in which it is affirmed that, pursuant to section 43-106.02, prior to the relinquishment of the child for adoption, the relinquishing parent was, or parents if both are available were, (i) presented a copy or copies of the nonconsent form provided in section 43-146.06 and (ii) given an explanation of the effects of filing or not filing the nonconsent form. Subdivisions (b) and (c) of this subsection shall only apply when the relinquishment or consent for an adoption is given on or after September 1, 1988.

(2) If the adopted child was born out of wedlock, that fact shall not appear in the decree of adoption.

(3) The court may decree such change of name for the adopted child as the petitioner or petitioners may request.

Sec. 20. Section 43-402, Reissue Revised Statutes of Nebraska, is amended to read:

43-402. It is the intent of the Legislature that the juvenile justice system provide individualized accountability and individualized treatment for juveniles in a manner consistent with public safety to those juveniles who violate the law. The juvenile justice system shall also promote prevention efforts which are community-based and involve all sectors of the community. Prevention efforts shall be provided through the support of programs and services designed to meet the needs of those juveniles who are identified as being at risk of violating the law and those whose behavior is such that they endanger themselves or others. The goal of the juvenile justice system shall be to provide a range of programs and services which:

(1) Retain and support juveniles within their homes whenever possible and appropriate;

(2) Provide the least restrictive and most appropriate setting for juveniles while adequately protecting them and the community;

(3) Are community-based and are provided in as close proximity to the juvenile's community as possible and appropriate;

(4) Provide humane, secure, and therapeutic confinement to those juveniles who present a danger to the community;

(5) Provide followup and aftercare services to juveniles when returned to their families or communities to ensure that progress made and behaviors learned are integrated and continued;

(6) Hold juveniles accountable for their unlawful behavior in a manner consistent with their long-term needs, stressing the offender's responsibility to victims and the community;

(7) Base treatment planning and service provision upon an individual evaluation of the juvenile's needs recognizing the importance of meeting the educational needs of the juvenile in the juvenile justice system;

(8) Are family focused and include the juvenile's family in assessment, case planning, treatment, and service provision as appropriate and emphasize parental involvement and accountability in the rehabilitation of their children;

(9) Provide supervision and service coordination, as appropriate, to implement treatment plans and to prevent reoffending;

(10) Provide integrated service delivery through appropriate linkages to other human service agencies; and

(11) Promote the development and implementation of community-based programs designed to prevent unlawful behavior and to effectively minimize the depth and duration of the juvenile's involvement in the juvenile justice system.
Sec. 21. Section 43-1409, Reissue Revised Statutes of Nebraska, is amended to read:

43-1409. The signing of a notarized acknowledgment, whether under section 43-1408.01 or otherwise, by the alleged father shall create a rebuttable presumption of paternity as against the alleged father. The signed, notarized acknowledgment is subject to the right of any signatory to rescind the acknowledgment within the earlier of (1) sixty days after signing or (2) after the date of an administrative or judicial proceeding relating to the child, including a proceeding to establish a support order in which the signatory is a party, whichever occurs first. After the rescission period a signed, notarized acknowledgment is considered a legal finding which may be challenged only on the basis of fraud, duress, or material mistake of fact with the burden of proof upon the challenger, and the legal responsibilities, including the child support obligation, of any signatory arising from the acknowledgment shall not be suspended during the challenge, except for good cause shown. Such a signed and notarized acknowledgment or a certified copy or certified reproduction thereof shall be admissible in evidence in any proceeding to establish support.

Sec. 22. Section 43-2606, Reissue Revised Statutes of Nebraska, is amended to read:

43-2606. (1) The Department of Health and Human Services Regulation and Licensure shall adopt and promulgate rules and regulations for mandatory training requirements for providers of child care and school-age-care programs. Such requirements shall include preservice orientation and at least four hours of annual inservice training. All child care programs required to be licensed under section 71-1911 shall show completion of a preservice orientation approved or delivered by the department prior to receiving a provisional license.

(2) The department shall initiate a system of documenting the training levels of staff in specific child care settings to assist parents in selecting optimal care settings.

(3) The training requirements shall be designed to meet the health, safety, and developmental needs of children and shall be tailored to the needs of licensed providers of child care programs.

(4) The department shall provide or arrange for training opportunities throughout the state and shall provide information regarding training opportunities to all providers of child care programs at the time of registration or licensure, when renewing a registration, or on a yearly basis following licensure.

(5) Each provider of child care and school-age-care programs receiving orientation or training shall provide his or her social security number to the department.

Sec. 23. Section 43-2610, Reissue Revised Statutes of Nebraska, is amended to read:

43-2610. (1) There is hereby established the Family Child Care Rules and Regulations Advisory Committee to advise the Department of Health and Human Services Regulation and Licensure on all aspects of the rules and regulations concerning family child care homes licensed by the department. The advisory committee shall be comprised of at least ten members, seven of whom shall be family child care home providers and three of whom shall be parents. Two providers shall be appointed from each congressional district, and one provider shall be appointed at large. One parent shall be appointed from each congressional district. The members of the advisory committee shall be appointed by the Director of Health and Human Services Regulation and Licensure.

(2) The initial members of the advisory committee shall be appointed for staggered terms of one, two, and three years so that no more than one-third, rounded to the next higher whole number, of the members of the committee shall turn over in any given year. Following initial appointments to the advisory committee, appointments shall be for terms of three years. No member shall serve more than two terms on the committee. Members shall be reimbursed for their actual and necessary expenses, including child care, as provided in sections 81-1174 to 81-1177.

(3) The advisory committee shall meet at least twice a year but may meet more often at the request of the director or a majority of the committee members. Meetings shall be scheduled on a rotating basis so that a meeting is held in each congressional district.

Sec. 24. Section 43-2615, Reissue Revised Statutes of Nebraska, is amended to read:

43-2615. To the extent possible, the Child Care and Early Childhood Education Coordinating Committee shall:

(1) Serve as an advisory coordinator for all state agencies.
responsible for child care programs and early childhood education for the purpose of improving communication and interagency coordination. The coordinating committee shall annually review state programs and make recommendations to the agencies and the Legislature which will maximize funding and promote the policies set forth in the Quality Child Care Act;

(2) Review and propose changes to the federal Child Care Subsidy program, including the adequacy of the sliding fee schedule;

(3) Review administration of any child care expansion grant program;

(4) Review and provide input toward the improvement of the quantity and quality of child care in the state, including advice to state agencies in their implementation of existing federal law and regulations as well as planning for future available federal funding;

(5) Review rules and regulations or proposed revisions to existing rules and regulations governing the registration or licensing of programs;

(6) Advise the Director of Health and Human Services Regulation and Licensure on the administration of the licensing responsibilities of the Department of Health and Human Services Regulation and Licensure related to section 71-1910;

(7) Make recommendations to the Department of Health and Human Services, the Department of Health and Human Services Regulation and Licensure, the State Board of Education, the State Department of Education, and all other state agencies involved in the regulation or provision of child care programs and early childhood education on the needs, priorities, programs, and policies relating to child care and early childhood education throughout the state;

(8) Study and recommend additional resources for child care programs and early childhood education;

(9) Review and provide advice concerning the availability of employment-related child care;

(10) Advise the Department of Health and Human Services Regulation and Licensure as to whether separate standards are needed for before-and-after-school child care programs;

(11) Report annually biennially to the Governor and Legislature on the status of child care and early childhood education, including information about licensed programs, Head Start, programs administered by the State Department of Education, early childhood education staff training, state accreditation, program compliance with immunization reporting requirements pursuant to section 71-1913.01, and the information required pursuant to section 71-1917. The report shall contain the following data from the child care complaint tracking system: Complaints by license type; allegations and substantiations by licensing rule and by county; and negative licensing actions by the Department of Health and Human Services Regulation and Licensure, including suspensions, probationary licenses issued, revocations, and other actions. The report shall include such findings and recommendations as to what the standards shall be.

Before making recommendations as outlined by this section, the coordinating committee shall hold public hearings and invite suggestions from parents of children utilizing child care, from providers of such programs, and from other interested parties. At least one public hearing shall be held in the third congressional district.

Sec. 25. Section 43-2616, Reissue Revised Statutes of Nebraska, is amended to read:

43-2616. Notwithstanding any other provision of law, including section 71-1914, family child care homes licensed by the Department of Health and Human Services Regulation and Licensure pursuant to section 71-1911 or by a city, village, or county pursuant to subsection (2) of section 71-1914 may be established and operated in any residential zone within the exercised zoning jurisdiction of any city or village.

Sec. 26. Section 43-2620, Reissue Revised Statutes of Nebraska, is amended to read:

43-2620. The Department of Health and Human Services, the Department of Health and Human Services Regulation and Licensure, and the State Department of Education shall collaborate in their activities and may:

(1) Encourage the development of comprehensive systems of child care programs and early childhood education programs which promote the wholesome growth and educational development of children, regardless of the child’s level of ability;
Encourage and promote the provision of parenting education, developmentally appropriate activities, and primary prevention services by program providers;

(3) Facilitate cooperation between the private and public sectors in order to promote the expansion of child care;

(4) Promote continuing study of the need for child care and early childhood education and the most effective methods by which these needs can be served through governmental and private programs;

(5) Coordinate activities with other state agencies serving children and families;

(6) Strive to make the state a model employer by encouraging the state to offer a variety of child care benefit options to its employees;

(7) Provide training for child care providers as authorized in sections 79-1101 to 79-1103;

(8) Develop and support resource and referral services for parents and providers that will be in place statewide by January 1, 1994;

(9) Promote the involvement of businesses and communities in the development of child care throughout the state by providing technical assistance to providers and potential providers of child care;

(10) Establish a voluntary accreditation process for public and private child care and early childhood education providers, which process promotes program quality;

(11) Provide and coordinate staff assistance to the Child Care and Early Childhood Education Coordinating Committee;

(12) At least biennially, develop an inventory of programs and early childhood education programs provided to children in Nebraska and identify the number of children receiving and not receiving such services, the types of programs under which the services are received, and the reasons children not receiving the services are not being served; and

(13) Support the identification and recruitment of persons to provide child care for children with special needs.

Sec. 27. Section 43-3301, Reissue Revised Statutes of Nebraska, is amended to read:

43-3301. Sections 43-3301 to 43-3326 and section 29 of this act shall be known and may be cited as the License Suspension Act.

Sec. 28. Section 43-3303, Reissue Revised Statutes of Nebraska, is amended to read:

43-3303. For purposes of the License Suspension Act, the definitions found in sections 43-3304 to 43-3313 and section 29 of this act apply.

Sec. 29. Director means the Director of Health and Human Services or his or her designee.

Sec. 30. Section 43-3314, Reissue Revised Statutes of Nebraska, is amended to read:

43-3314. (1) When the Director of Health and Human Services director or a county attorney or authorized attorney has made reasonable efforts to verify and has reason to believe that a license holder in a case receiving services under Title IV-D of the Social Security Act, as amended, (a) is delinquent on a support order in an amount equal to the support due and payable for more than a three-month period of time, (b) is not in compliance with a payment plan for amounts due as determined by a county attorney, an authorized attorney, or the Department of Health and Human Services for such past-due support, or (c) is not in compliance with a payment plan for amounts due under a support order pursuant to a court order for such past-due support, and therefor determines to certify the license holder to the appropriate licensing authority, the director, county attorney, or authorized attorney shall send written notice to the license holder by certified mail to the last-known address of the license holder or to the last-known address of the license holder available to the court pursuant to section 42-364.13. For purposes of this section, reasonable efforts to verify means reviewing the case file and having written or oral communication with the clerk of the court of competent jurisdiction and with the license holder. Reasonable efforts to verify may also include written or oral communication with custodial parents.

(2) The notice shall specify:

(a) That the Director of Health and Human Services director, county attorney, or authorized attorney intends to certify the license holder to the Department of Motor Vehicles and to relevant licensing authorities pursuant to subsection (3) of section 43-3318 as a license holder described in subsection (1) of this section;

(b) The court or agency of competent jurisdiction which issued the support order or in which the support order is registered;

(c) That an enforcement action for a support order will incorporate
any amount delinquent under the support order which may accrue in the future;
(d) That a license holder who is in violation of a support order can come into compliance by:
   (i) Paying current support if a current support obligation exists; and
   (ii) Paying all past-due support or, if unable to pay all past-due support and if a payment plan for such past-due support has not been determined, by payment in accordance with a payment plan determined by the county attorney, the authorized attorney, or the Department of Health and Human Services for such past-due support; and
(e) That within thirty days after issuance of the notice, the license holder may either:
   (i) Request administrative review in the manner specified in the notice to contest a mistake of fact. Mistake of fact means an error in the identity of the license holder or an error in the determination of whether the license holder is a license holder described in subsection (1) of this section;
   (ii) Seek judicial review by filing a petition in the court of competent jurisdiction of the county where the support order was issued or registered or, in the case of a foreign support order not registered in Nebraska, the court of competent jurisdiction of the county where the child resides if the child resides in Nebraska or the court of competent jurisdiction of the county where the license holder resides if the child does not reside in Nebraska.

Sec. 31. Section 43-3318, Reissue Revised Statutes of Nebraska, is amended to read:
43-3318. (1) The Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction may certify in writing to the Department of Motor Vehicles, relevant licensing authorities, and, if the license holder is a member of the Nebraska State Bar Association, the Nebraska State Bar Association's Counsel for Discipline, that a license holder is a license holder described in subsection (1) of section 43-3314 if:
   (a) The license holder does not timely request either administrative review or judicial review upon issuance of a notice under subsection (2) of section 43-3314, is still a license holder described in subsection (1) of section 43-3314 thirty-one days after issuance of the notice, and does not obtain a written confirmation of compliance from the Department of Health and Human Services, county attorney, or authorized attorney pursuant to section 43-3320 within thirty-one days after issuance of the notice;
   (b) The Department of Health and Human Services issues a decision after a hearing that finds the license holder is a license holder described in subsection (1) of section 43-3314, the license holder is still a license holder described in such subsection thirty-one days after issuance of that decision, and the license holder does not seek judicial review of the decision within the ten-day appeal period provided in section 43-3317; or
   (c) The court of competent jurisdiction enters a judgment on a petition for judicial review, initiated under either section 43-3315 or 43-3317, that finds the license holder is a license holder described in subsection (1) of section 43-3314.

(2) The court of competent jurisdiction, after providing appropriate notice, may certify a license holder to the Department of Motor Vehicles and relevant licensing authorities if a license holder has failed to comply with subpoenas or warrants relating to paternity or child support proceedings.

(3) If the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction determines to certify a license holder to the appropriate licensing authority, then the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction shall certify a license holder in the following order and in compliance with the following restrictions:
   (a) To the Department of Motor Vehicles to suspend the license holder’s operator’s license, except the Department of Motor Vehicles shall not suspend the license holder’s commercial driver’s license or restricted commercial driver’s license. If a license holder possesses a commercial driver’s license or restricted commercial driver’s license, the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction shall certify such license holder pursuant to subdivision (b) of this subsection. If the license holder fails to come into compliance with the support order as provided in section 43-3314 or with subpoenas and warrants relating to paternity or child support proceedings within ten working days after the date on which the license holder’s operator’s license suspension becomes effective, then the Director of Health
and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction may certify the license holder pursuant to subdivision (b) of this subsection without further notice; and 

(b) To the relevant licensing authority to suspend the license holder's recreational license once the Game and Parks Commission has operative the electronic or other automated retrieval system necessary to suspend recreational licenses. If the license holder does not have a recreational license and all the Game and Parks Commission has operative the electronic or other automated retrieval system necessary to suspend recreational licenses, the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction may certify the license holder pursuant to subdivision (c) of this subsection. If the license holder fails to come into compliance with the support order as provided in section 43-3314 or with subpoenas and warrants relating to paternity or child support proceedings within ten working days after the date on which the license holder's recreational license suspension becomes effective, the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction may certify the license holder pursuant to subdivision (c) of this subsection without further notice; and 

(c) To the relevant licensing authority to suspend the license holder's professional license, occupational license, commercial driver's license, or restricted commercial driver's license. 

(4) If the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction certifies the license holder to the Department of Motor Vehicles, the Department of Motor Vehicles shall suspend the operator's license of the license holder ten working days after the date of certification. The Department of Motor Vehicles shall without undue delay notify the license holder by certified mail that the license holder's operator's license will be suspended and the date the suspension becomes effective. No person shall be issued an operator's license by the State of Nebraska if at the time of application for a license the person's operator's license is suspended under this section. Any person whose operator's license has been suspended shall return his or her license to the Department of Motor Vehicles within five working days after receiving the notice of the suspension. If any person fails to return the license, the Department of Motor Vehicles shall direct any peace officer to secure possession of the operator's license and to return it to the Department of Motor Vehicles. The peace officer who is directed to secure possession of the license shall make every reasonable effort to secure the license and return it to the Department of Motor Vehicles or shall show good cause why the license cannot be returned. An appeal of the suspension of an operator's license under this section shall be pursuant to section 60-4,105. A license holder whose operator's license has been suspended under this section may apply for an employment driving permit as provided by sections 60-4,129 and 60-4,130, except that the license holder is not required to fulfill the driver improvement or driver education and training course requirements of subsection (2) of section 60-4,130. 

(5) Except as provided in subsection (6) of this section as it pertains to a license holder who is a member of the Nebraska State Bar Association, if the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction certifies the license holder to a relevant licensing authority, the relevant licensing authority, notwithstanding any other provision of law, shall suspend the license holder's professional, occupational, or recreational license and the license holder's right to renew the professional, occupational, or recreational license ten working days after the date of certification. The relevant licensing authority shall without undue delay notify the license holder by certified mail that the license holder's professional, occupational, or recreational license will be suspended and the date the suspension becomes effective. 

(6) If the Director of Health and Human Services director, county attorney, authorized attorney, or court of competent jurisdiction certifies a license holder who is a member of the Nebraska State Bar Association to the Counsel for Discipline of the Nebraska State Bar Association, the Nebraska Supreme Court may suspend the license holder's license to practice law. It is the intent of the Legislature to encourage all license holders to comply with their child support obligations. Therefore, the Legislature hereby requests that the Nebraska Supreme Court adopt amendments to the rules regulating the Nebraska State Bar Association, if necessary, which provide for the discipline of an attorney who is delinquent in the payment of or fails to pay his or her child support obligations. 

(7) The Department of Health and Human Services, or court of —23—
competent jurisdiction when appropriate, shall send by certified mail to the
license holder at the license holder’s last-known address a copy of any
certification filed with the Department of Motor Vehicles or a relevant
licensing authority and a notice which states that the license holder’s
operator’s license will be suspended ten working days after the date of
certification and that the suspension of a professional, occupational, or
recreational license pursuant to subsection (5) of this section becomes
effective ten working days after the date of certification.
Sec. 32. Section 43-3326, Reissue Revised Statutes of Nebraska, is
amended to read:
43-3326. The Director of Health and Human Services director shall
issue a report to the Legislature on or before January 31 of each year which
discloses the number of professional, occupational, or recreational licenses
which were suspended and the number which were erroneously suspended and
restored as a result of the License Suspension Act for the prior year. The
Director of Motor Vehicles shall issue a report to the Legislature on or
before January 31 of each year which discloses the number of operators’
licenses which were suspended and the number which were erroneously suspended and
restored as a result of the License Suspension Act for the prior year.
Sec. 33. Section 43-3327, Reissue Revised Statutes of Nebraska, is
amended to read:
43-3327. (1) For purposes of this section:
(a) Authorized attorney has the same meaning as in section 43-1704;
(b) Director means the Director of Health and Human Services or his
or her designee;
(c) Genetic testing means genetic testing ordered pursuant to __________
section 43-1414; and
(d) Support order has the same meaning as in section 43-1717.
(2) Notwithstanding any other provision of law regarding the
confidentiality of records, the Director of Health and Human Services
director, a county attorney, or an authorized attorney may, without obtaining
a court or administrative order:
(a) Compel by subpoena (i) information relevant to establishing,
modifying, or enforcing a support order and (ii) genetic testing of an
individual relevant to establishing, modifying, or enforcing a support order.
Such information includes, but is not limited to, relevant financial records
and other relevant records including the name, address, and listing of
financial assets or liabilities from public or private entities. If a person
fails or refuses to obey the subpoena, the director, a county attorney, or an
authorized attorney may apply to a judge of the court of competent
jurisdiction for an order directing such person to comply with the subpoena.
Failure to obey such court order may be punished by the court as contempt of
court; and
(b) Obtain access to information contained in the records, including
automated data bases, of any state or local agency which is relevant to
establishing, modifying, or enforcing a support order or to ordering genetic
testing. Such records include, but are not limited to, vital records, state
and local tax and revenue records, titles to real and personal property,
employment security records, records of correctional institutions, and records
concerning the ownership and control of business entities.
(3) The Director of Health and Human Services director shall
subpoena or access information as provided in subsection (2) of this section
at the request of a state agency of another state which administers Title IV-D
of the federal Social Security Act for such information. The Department of
Health and Human Services may charge a fee for this service which does not
exceed the cost of providing the service.
(4) All information acquired pursuant to this section is
confidential and cannot be disclosed or released except to other agencies
which have a legitimate and official interest in the information for carrying
out the purposes of this section. A person who receives such information,
subject to the provisions of this subsection on confidentiality and
restrictions on disclosure or release, is immune from any civil or criminal
liability. A person who cooperates in good faith by providing information or
records under this section is immune from any civil or criminal liability.
Any person acquiring information pursuant to this section who discloses or
releases such information in violation of this section is guilty of a
Class III misdemeanor. The disclosure or release of such information regarding an
individual is a separate offense from information disclosed or released
regarding any other individual.
Sec. 34. Section 68-1020, Revised Statutes Supplement, 1998, is
amended to read:
68-1020. (1) Medical assistance shall be paid on behalf of
dependent children, aged persons, blind individuals, and disabled individuals, as defined in sections 43-504 and 68-1002 to 68-1005, and on behalf of all individuals under twenty-one years of age who are eligible under section 1905(a) of the federal Social Security Act, as amended.

(2) The Director of Finance and Support shall adopt and promulgate rules and regulations governing provision of such medical assistance benefits to qualified individuals:

(a) Who are presumptively eligible as allowed under 42 U.S.C. 1396a, as amended, and section 1902 of the federal Social Security Act, as amended;

(b) Who have income at or below one hundred eighty-five percent of the Office of Management and Budget poverty line, as allowed under Title XIX and Title XXI of the federal Social Security Act, as amended, without regard to resources, including all children under nineteen years of age and pregnant women as allowed under 42 U.S.C. 1396a, as amended, and section 2110 of the federal Social Security Act, as amended. Children described in this subdivision shall remain eligible for a twelve-month period of time from the date of eligibility prior to redetermination of eligibility; or

(c) Who are medically needy caretaker relatives as allowed under section 1905(a)(ii) of the federal Social Security Act, as amended, and who have children with allocated income as follows:

(i) At or below one hundred fifty percent of the Office of Management and Budget poverty line with eligible children one year of age or younger;

(ii) At or below one hundred thirty-three percent of the Office of Management and Budget poverty line with eligible children over one year of age and under two years of age; or

(iii) At or below one hundred percent of the Office of Management and Budget poverty line with eligible children six years of age or more and under fifteen years of age.

(3) As allowed pursuant to 42 U.S.C. 1396a(a)(10)(A)(ii), medical assistance shall be paid on behalf of disabled persons as defined in section 68-1005 who are in families whose net income is less than two hundred fifty percent of the Office of Management and Budget income poverty line applicable to a family of the size involved and who but for earnings in excess of the limit established under 42 U.S.C. 1396d(g)(2)(B) of the federal Social Security Act, as amended, would be considered to be receiving federal Supplemental Security Income. The Department of Health and Human Services shall apply for a waiver to disregard any unearned income that is contingent upon a trial work period in applying the Supplemental Security Income Income standard. Such disabled persons shall be subject to payment of premiums as a percentage of the family's net income beginning at not less than two hundred percent of the Office of Management and Budget net income poverty line. Such premiums shall be graduated based on family income and shall not be less than two percent or more than ten percent of family net income.

Sec. 35. Section 71-1,132.09, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.09. The board, at the last scheduled meeting of the calendar year, shall meet annually during the month of January and shall elect from its members a president, vice president, and secretary, each of whom shall hold office for one year. At the board shall hold at least three regular meetings each year upon such dates and times as may be determined by the board. A quorum shall be a simple majority of the appointed members of the board.

Sec. 36. Section 71-1,132.11, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.11. The board may adopt, promulgate, and revise, with the approval of the department, such rules and regulations consistent with the Nurse Practice Act as may be necessary to carry the act into effect. All such rules and regulations shall be published and distributed. The board shall:

(1) Adopt reasonable and uniform standards for nursing practice and nursing education; which are reviewed at least every four years;

(2) If requested, issue or decline to issue advisory opinions defining acts which in the opinion of the board are or are not permitted in the practice of nursing as defined in section 71-1,132.05. Such opinions shall be considered informational only and are nonbinding;

(3) Establish rules and regulations for approving and classifying programs preparing practical and professional nurses, taking into consideration administrative and organizational patterns, the curriculum, students, student services, faculty, and instructional resources and facilities, and provide surveys for each educational program at least every six years or more frequently as deemed necessary as determined by the board;

(4) Approve educational programs which meet the requirements of the
act;
(5) Examine, license, and renew the licenses of duly qualified applicants;
(6) Keep a record of all its proceedings and compile an annual report for distribution;
(7) Develop standards for continued competency of licensees continuing in or returning to practice;
(8) Adopt rules and regulations establishing standards for delegation of nursing activities, including training or experience requirements, competency determination, and nursing supervision;
(9) Make recommendations in accordance with section 71-168.01 regarding licensure and disciplinary dispositions for individuals who have violated the act and upon the grounds provided in the Uniform Licensing Law;
(10) Collect data regarding nursing;
(11) Provide consultation, and conduct conferences, forums, studies, and research on nursing practice and education;
(12) Join organizations that develop and regulate the national nursing licensure examinations and exclusively promote the improvement of the legal standards of the practice of nursing for the protection of the public health, safety, and welfare;
(13) Appoint special purpose groups or ad hoc groups to advise the board; and
(14) Administer the provisions of the Advanced Registered Nurse Practitioner Act as it applies to certified registered nurse anesthetists and the Nebraska Certified Nurse Midwifery Practice Act.

Sec. 37. Section 71-1,132.13, Revised Statutes Supplement, 1998, is amended to read:
71-1,132.13. (1) An applicant for a license to practice as a registered nurse shall file with the department a written application for a license and submit satisfactory proof that the applicant (a) is of good moral character, (b) has completed four years of high school study or its equivalent as determined by the department board, and (c) has completed the basic professional curriculum in and holds a diploma from an accredited program of professional nursing approved by the board. Graduates of foreign nursing programs shall have passed the Canadian Nurses Association Testing Service or hold a certificate from the Commission on Graduates of Foreign Nursing Schools. Such application shall be made upon a form prescribed and approved by the department, verified by the applicant’s oath, and accompanied by an application fee established by rules and regulations of the department. The application shall include the applicant’s social security number. 
(2) If an applicant for an initial license files an application for licensure within ninety days prior to the biennial renewal date of the license, the applicant may either:
(a) Request that the department delay the processing of the application and the issuance of the license until the biennial renewal date and pay only the fee for initial licensure; or
(b) Request that a license which will be valid until the next subsequent renewal date be issued immediately and pay the fee for initial licensure and an additional fee of one-fourth of the biennial fee.

Sec. 38. Section 71-1,132.20, Reissue Revised Statutes of Nebraska, is amended to read:
71-1,132.20. (1) The license of every registered nurse or licensed practical nurse shall be renewed biennially. The biennial expiration date is October 31 of every even-numbered year for registered nurses. The biennial license renewals provided for in this section shall be accomplished in such manner as the department, with the approval of the board, shall establish by rule and regulation.
(2) On or before August 1 of each renewal year, the department shall mail an application for renewal of license to every person to whom such license was issued or renewed during the current renewal period. The applicant shall complete and return the application to the department with a renewal fee established by the department pursuant to section 71-1,132.49 on or before October 31 following the mailing of such notice. Upon receipt of the application and fee, the department shall verify the accuracy of the application and issue to the applicant a certificate of renewal for the renewal period beginning November 1 following the mailing of such notice. The certificate of renewal shall render the holder thereof a legal practitioner of nursing for the period stated on the certificate of renewal.
(3) A licensed practical nurse or registered nurse who wishes to have his license lapse upon expiration shall give the department written notice to that effect. The department shall notify the licensee in...
writing of the acceptance or denial of the request to allow the license to lapse. When the lapsed status becomes effective, the right to practice nursing by a person himself or herself as a licensed practical nurse or registered nurse shall terminate. To restore the license, the individual shall be required to meet the renewal requirements in effect at the time he or she wishes to restore the license and pay the renewal fee and an additional fee of fifty dollars.

(4) A licensed practical nurse or registered nurse who wishes to have his or her license placed on inactive status upon expiration shall give the department written notice to that effect and pay the fee provided in section 71-1,132.49. The department shall notify the licensee in writing of the acceptance or denial of the request to allow the license to be placed on inactive status. When the license is placed on inactive status, the licensee shall not engage in the practice of nursing. A license may remain on inactive status for an indefinite period of time. In order to move a license from inactive to active status, an individual shall meet the renewal requirements in effect at the time he or she wishes to regain active status and pay the renewal fee and reinstatement fee due at such time as specified in section 71-1,132.49.

(5) Any licensed practical nurse or registered nurse who fails to (a) notify the department that he or she wishes his or her license to lapse or to be placed on inactive status or (b) meet the renewal requirements, on or before the date of expiration of his or her license, shall be given a second notice and the same manner as the first notice advising him or her of the failure to pay, (ii) that the license has expired, (iii) that the department will suspend action for thirty days following the date of expiration, (iv) that upon the receipt of the renewal fee, together with an additional fee of fifty dollars, within that time, the license will be renewed, no order of suspension or revocation will be entered and (v) that upon the failure to receive the amount then due and fifty dollars in addition to the regular renewal fee, the license will be revoked in the same manner as provided in section 71-149 placed on lapsed status.

(6) Any licensee who fails to renew his or her license may have such license reinstated upon the recommendation of the board and the payment of the renewal fee and an additional fee of fifty dollars if an application for reinstatement is made more than thirty days after expiration and not more than one year from the date of revocation.

(7) Any licensee who applies for reinstatement after one year of revocation shall pay an additional fee of seventy-five dollars and petition the board to recommend reinstatement in the same manner as provided in section 71-161.05.

(8) A fee to be determined by rules and regulations pursuant to section 71-1,132.49 shall be charged to any registered nurse or licensed practical nurse for the issuance of a certification of credentials to another state and to any educational institution or agency.

(9) In order to insure that all nurses have sufficient scientific and practical knowledge to continue to practice nursing, a license to practice nursing shall not be renewed after January 1, 1997, unless the nurse has within the preceding five years engaged in the practice of nursing for a minimum of five hundred hours and completed twenty contact hours within the previous two years of either:

(a) Inservice education provided by the employer; or
(b) Continuing education courses which meet requirements as specified by the board in rules and regulations.

The department, with the concurrence of the board, may waive continuing education or inservice requirements for any two-year licensing period when a licensee submits documentation that circumstances justify such waiver. Such circumstances shall be defined in rules and regulations.

If more than five years have elapsed since the individual has practiced nursing as defined in section 71-1,132.05, the individual must complete a seventy-five-hour approved review course of study before his or her license can be renewed. Such course may be individually designed and must include a practice or clinical component.

Sec. 39. Section 71-1,132.21, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.21. Any person practicing nursing prior to the receipt of a license or temporary permit or during the time his or her license has expired or lapsed or is suspended, revoked, or on inactive status shall be considered an illegal practitioner and shall be subject to a fine of ten dollars for each day the person practiced without a license or temporary permit or on an expired, lapsed, suspended, revoked, or inactive license up to a maximum of one thousand dollars or other such penalties provided for violation of the
Nurse Practice Act.

Sec. 40. Section 71-1,132.27, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,132.27. At least every four years or as deemed necessary by the board, the board shall, through its executive director or other representative appointed by the board, survey all programs of nursing in the state at time intervals to be determined by the board through rules and regulations. Written reports of such surveys shall be submitted to the board. The board shall act on the report to grant or deny continuing approval of the program.

Sec. 41. Section 71-1,132.30, Revised Statutes Supplement, 1998, is amended to read:

71-1,132.30. The Nurse Practice Act confers no authority to practice medicine or surgery. The act does not prohibit performance of health maintenance activities by a designated caregiver care aide for a competent individual adult at the direction of that individual adult or at the direction of a caretaker for a minor child or incompetent adult. Health maintenance activities are those activities which enable the individual minor child or adult to live in his or her home and community. Such activities are those specialized procedures, beyond activities of daily living, which the individual would minor child or adult is unable to perform for himself or herself if he or she were physically able and which the attending physician or registered nurse determines can be safely performed in the home and community by a designated caregiver care aide as directed by the competent individual adult or caretaker. A competent individual adult is someone who has the capability and capacity to make an informed decision. For purposes of this section, caretaker means a person who (1) is directly and personally involved in providing care for a minor child or incompetent adult and (2) is the parent, foster parent, family member, friend, or legal guardian of such minor child or incompetent adult.

Sec. 42. Section 71-1,132.37, Revised Statutes Supplement, 1998, is amended to read:

71-1,132.37. (1) An applicant for a license to practice as a licensed practical nurse shall file with the department a written application for a license which shall include the applicant's social security number, pay the fee as set by the department, and submit satisfactory proof that the applicant:

(a) Is of good moral character;
(b) Has completed four years of high school study or its equivalent as determined by the board; and
(c) Has completed the basic curriculum in and holds a diploma from an approved program of practical nursing.

(2) If an applicant for an initial license files an application for licensure within ninety days prior to the biennial renewal date of the license, the applicant may either:

(a) Request that the department delay the processing of the application and the issuance of the license until the biennial renewal date and pay only the fee for initial licensure; or
(b) Request that a license which will be valid until the next subsequent renewal date be issued immediately and pay the fee for initial licensure and an additional fee of one-fourth of the biennial fee.

Sec. 43. Section 71-1,142, Revised Statutes Supplement, 1998, is amended to read:

71-1,142. For purposes of the Uniform Licensing Law, unless the context otherwise requires:

(1) Practice of pharmacy shall mean means (a) the interpretation and evaluation of prescription orders, (b) the compounding, dispensing, and labeling of drugs and devices, except labeling by a manufacturer, packer, or distributor of nonprescription drugs and commercially packaged legend drugs and devices, (c) the participation in drug selection, drug utilization review, drug source selection, and drug administration, (d) the proper and safe storage of drugs and devices and the maintenance of proper records therefor, (e) patient counseling, (f) the provision of pharmaceutical care, and (g) the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management, and control of pharmacy. The active practice of pharmacy shall mean means the performance of the functions set out in this subdivision by a pharmacist as his or her principal or ordinary occupation;

(2) Administration shall mean means the direct application of a drug or device by injection, inhalation, ingestion, or other means to the body of a patient;

(3) Board of pharmacy or board shall mean means the Board of...
Examiners in Pharmacy;

(4) Caregiver shall mean any person acting as an agent on behalf of a patient or any person aiding and assisting a patient;

(5) Compounding shall mean the preparation, mixing, or assembling of a drug or device (a) as the result of a practitioner's prescription order or initiative occurring in the course of professional practice based upon the relationship between the practitioner, patient, and pharmacist for the purpose of, or incident to, research, teaching, or chemical analysis and not for sale or dispensing. Compounding shall include the preparation of drugs or devices in anticipation of prescription orders based upon routine, regularly observed prescribing patterns;

(6) Deliver or delivery shall mean the actual, constructive, or attempted transfer of a drug or device from one person to another, whether or not for consideration;

(7) Department shall mean the Department of Health and Human Services Regulation and Licensure;

(8) Device shall mean an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component part or accessory, which is prescribed by a medical practitioner and dispensed by a pharmacist or other person authorized by law to do so;

(9) Dialysis drug or device distributor shall mean a manufacturer or wholesaler who provides dialysis drugs, solutions, supplies, or devices to persons with chronic kidney failure for self-administration at the person's home or specified address, upon the order of a medical practitioner;

(10) Dialysis drug or device distributor worker shall mean a person working for a dialysis drug or device distributor operating with a drug dispensing permit who has completed the approved training and has demonstrated proficiency to perform the task or tasks of assembling, labeling, or delivering a patient order;

(11) Dispense or dispensing shall mean the preparation and delivery of a drug or device pursuant to a lawful order of a medical practitioner in a suitable container appropriately labeled for subsequent administration to or use by a patient or other individual entitled to receive the drug or device;

(12) Distribute shall mean the delivery of a drug or device other than by administering or dispensing;

(13) Drug dispensing permit shall mean a permit issued by the department upon the recommendation of the board to a public health clinic or a dialysis drug or device distributor which allows for the dispensing of drugs and devices in the formulary approved pursuant to section 71-1,147.48;

(14) Person shall mean an individual, corporation, partnership, limited liability company, association, or other legal entity;

(15) Labeling shall mean the process of preparing and affixing a label to any drug container or device container, exclusive of the labeling by a manufacturer, packer, or distributor of a nonprescription drug or commercially packaged legend drug or device. Any such label shall include all information required by federal and state law or regulation;

(16) Pharmaceutical care shall mean the provision of drug therapy for the purpose of achieving therapeutic outcomes that improve a patient's quality of life. Such outcomes shall include (a) the cure of disease, (b) the elimination or reduction of a patient's symptomatology, (c) the arrest or slowing of a disease process, or (d) the prevention of a disease or symptomatology. Pharmaceutical care shall include the process through which the pharmacist works in concert with the patient and his or her caregiver, physician, or other professionals in designing, implementing, and monitoring a therapeutic plan that will produce specific therapeutic outcomes for the patient;

(17) Pharmacist shall mean any person who (a) is licensed by the State of Nebraska to practice pharmacy or (b) is primarily responsible for providing pharmaceutical care as defined in subdivision (16) of this section;

(18) Pharmacy shall mean (a) any establishment, place, or location advertised as a pharmacy, drug store, hospital pharmacy, dispensary, apothecary, or any combination of such titles or any establishment where the practice of pharmacy is carried on except as exempted in section 71-1,143 and (b) any establishment, place, or location used as a pick-up point or drop point, including kiosks, for prescriptions to be filled or where prescribed drugs or devices are made ready for delivery to the patient, but shall not include an emergency box located within an institution pursuant to the provisions of the Emergency Box Drug Act;

(19) Drugs, medicines, and medicinal substances shall mean (a)
articles recognized in the official United States Pharmacopoeia, the
Homeopathic Pharmacopoeia of the United States, the official National
Formulary, or any supplement to any of them; (b) articles intended for use in
the diagnosis, cure, mitigation, treatment, or prevention of diseases in
humans or animals; (c) articles, except food, intended to affect the structure
or any function of the body of a human or an animal; (d) articles intended for
use as a component of any articles specified in subdivision (a), (b), or (c)
of this subdivision, except any device or its components, parts, or
accessories, and (e) prescription drugs as defined in subdivision (24) and
(25) of this section;

(20) Medical practitioner shall mean means any licensed physician,
surgeon, podiatrist, dentist, or other person licensed to write prescriptions
intended for treatment or prevention of disease or to affect body function in
humans or animals;

(21) Patient counseling shall mean means the verbal communication by
a pharmacist, in a manner reflecting dignity and the right of the patient to
a reasonable degree of privacy, of information to the patient or caregiver in
order to improve therapeutic outcomes by maximizing proper use of prescribed
drugs and devices and shall also include also includes the duties set out in
subsection (2) of section 71-1,147.35;

(22) Pharmacist in charge shall mean means a pharmacist licensed by
the State of Nebraska to practice pharmacy who has been designated on a
pharmacy permit or designated by a public or private hospital licensed by the
department as being responsible for the practice of pharmacy in the pharmacy
for which such permit is issued or such hospital’s inpatient pharmacy and who
shall work within the physical confines of such pharmacy for a majority of the
hours per week that the pharmacy is open for business averaged over a
twelve-month period or thirty hours per week, whichever is less;

(23) Pharmacy intern shall mean means (a) a student currently
enrolled in an accredited college or school of pharmacy serving his or her internship,
such internship to expire not later than fifteen months after the date of
graduation or at the time of professional licensure, whichever comes first.
Such pharmacy 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
(i) the person to whom the pharmacy permit is issued or a person in the
actual employ of the permittee or (ii) the pharmacist in charge designated by
a public or private institution licensed as a hospital by the department which
is not required to obtain a permit pursuant to section 71-1,147.01 or a person in
the actual employ of such institution;

(24) Pharmacy technician means an individual at least eighteen years
of age who is a high school graduate or officially recognized by the State
Department of Education as possessing the equivalent degree of education, who
has never been convicted of any drug-related misdemeanor or felony and who,
under the written control procedures and guidelines of an employing pharmacy
and having received onsite training pursuant to subsection (4) of section
71-1,147.33, may perform those functions which do not require the exercise of
professional judgment in assisting a pharmacist in connection with the
preparation, compounding, dispensing, and distribution of drugs or devices
under the supervision of a licensed pharmacist on duty in the facility when
such functions are subject to verification;

(25) Prescription drug or legend drug shall mean means (a) a drug
which under federal law is required, prior to being dispensed or delivered, to
be labeled with either of the following statements: (i) Caution: Federal law
prohibits dispensing without prescription; or (ii) Caution: Federal law
restricts this drug to use by or on the order of a licensed veterinarian or
(b) a drug which is required by any applicable federal or state law or
regulation to be dispensed on prescription only or is restricted to use by
medical practitioners only;

(26) Prescription order or prescription shall mean means a
lawful written or verbal order of a medical practitioner for a drug or device
but shall not include an order for a drug or device which is dispensed
for administration to a patient during the patient’s stay in a hospital;

(27) Nonprescription drugs shall mean means nonnarcotic
medications, products which may be sold without a prescription and which are
prepackaged for use by the consumer and labeled in accordance with the
requirements of the laws and regulations of this state and the federal
government;

(28) Public health clinic worker shall mean means a person in a
public health clinic operating with a drug dispensing permit who has completed
the approved training and has demonstrated proficiency to perform the task of
dispensing authorized refills of oral contraceptives;

(29) Public health clinic shall mean the department, any county, city-county, or multicounty health department, or any private not-for-profit family planning clinic licensed as a health clinic as defined in section 71-2017.01.

(30) Supervision shall mean the immediate personal guidance and direction by the licensed pharmacist on duty in the facility of the performance by supportive pharmacy personnel a pharmacy technician of authorized activities or functions subject to verification by such pharmacist, except that when supportive pharmacy personnel perform authorized activities or functions to assist a pharmacist on duty in the facility when the prescribed drugs or devices will be administered by a licensed staff member or consultant or by a licensed physician assistant to patients of a health care facility licensed pursuant to sections 71-2017 to 71-2029, the activities or functions of such supportive pharmacy personnel shall only be subject to verification by a pharmacist on duty in the facility;

(31) Supportive pharmacy personnel shall mean individuals at least eighteen years of age who are high school graduates or officially recognized by the State Department of Education as possessing the equivalent degree of education, who have never been convicted of any drug-related misdemeanor or felony, and who, under the written control procedures and guidelines of an employing pharmacy and who have received onsite training pursuant to subsection (33), may perform the functions which do not require the exercise of professional judgment in assisting a pharmacist in connection with the preparation, compounding, dispensing, and distribution of drugs or devices under the supervision of a licensed pharmacist on duty in the facility, when such functions are subject to verification. When supportive pharmacy personnel allowed to assist one pharmacist in the preparation, compounding, dispensing, and distribution of drugs or devices shall not exceed one-to-one, except that a two-to-one ratio may apply to supportive pharmacy personnel assisting a pharmacist in circumstances when the prescribed drugs or devices will be administered by a licensed staff member or consultant or by a licensed physician assistant to patients of a hospital licensed pursuant to sections 71-2017 to 71-2029. Under no circumstances shall the ratio exceed two supportive pharmacy personnel to one supervising pharmacist;

(32) Written control procedures and guidelines shall mean the document prepared by an employing pharmacy and approved by the board which specifies the manner in which the qualifications of supportive pharmacy technicians employed by the pharmacy are determined, the manner in which the training of such technicians is conducted and their basic level of competency is confirmed, the manner in which supervision is provided, the manner in which the functions of supportive pharmacy personnel are verified, and a protocol governing the use of supportive pharmacy personnel and the functions which they may perform.

Sec. 44. Section 71-1,147, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,147. (1) Except as provided in sections 71-1,147.33 and 71-1,147.53, no person other than a licensed pharmacist or a pharmacy intern shall, as described in sections 71-1,142, 71-1,143, and 71-1,147 to 71-1,147.14, provide pharmaceutical care, compound and dispense drugs or devices, or fill the prescription of a medical practitioner. Notwithstanding any other provision of law to the contrary, a licensed pharmacist or pharmacy intern may dispense drugs or devices pursuant to a prescription of a practitioner authorized to prescribe in another state if such practitioner could be authorized to prescribe such drugs or devices in this state.

(2) Except as provided in section 28-414, no prescription may be filled or refilled more than twelve months after the date of issuance of the prescription.

(3) Except as provided in sections 71-1,147.33 and 71-1,147.53, it shall be unlawful for any person to permit or direct a person who is not a pharmacy intern or licensed pharmacist to provide pharmaceutical care, compound and dispense drugs or devices, or fill the prescription of a medical practitioner.

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4. It shall be unlawful for any person to coerce a pharmacist to supervise any supportive pharmacy personnel pharmacy technician for any purpose or in any manner contrary to the professional judgment of the pharmacist. Violation of this subsection by a licensed pharmacist shall be considered an act of unprofessional conduct for purposes of section 71-147. A violation of this subsection shall be prima facie evidence in an action against the permit of any pharmacy in which such violation occurred.

5. For purposes of this section, nothing in this section shall be construed to prohibit any registered nurse employed by a hospital from administering single doses of drugs from original drug containers or properly labeled prepackaged drug containers to any patient of the hospital upon the order or prescription of a medical practitioner or to prohibit such registered nurse employed by a hospital from procuring the original drug container or properly labeled prepackaged drug container for the purpose of single-dose drug administration to any patient of the hospital upon the order or prescription of a medical practitioner.

6. Violation of this section by an unlicensed person shall be a Class III misdemeanor.

Sec. 45. Section 71-1,147.09, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,147.09. To protect the health, safety, and welfare of the public, to ensure to the greatest extent possible the accurate, efficient, and safe practice of pharmacy, to ensure that prescribed drugs and devices conform to the requirements of law, and to implement sections 28-1437 to 28-1439.01, 71-1,142 to 71-1,147.33 71-1,147.36, 71-2401 to 71-2405, and 71-2501 to 71-2512, the Mail Service Prescription Drug Act, the Nebraska Drug Product Selection Act, and the Uniform Controlled Substances Act, the department, upon the recommendation of the board, shall adopt and promulgate rules and regulations:

1. For the enforcement of sections 71-1,142 to 71-1,147.36:

2. To establish minimum requirements regarding adequate facilities for the safe storage of narcotic drugs and other drugs requiring refrigeration or other special storage;

3. For equipment, facilities, and utilities for the prescription department;

4. To establish minimum standards governing sanitation, orderliness, cleanliness, library requirements, ventilation, and prescription and other record keeping;

5. To establish minimum standards governing the definition and application of computers or other electronic record systems in pharmacy;

6. To establish minimum standards for the practice of nuclear pharmacy;

7. To establish minimum standards for the dispensing of drugs or devices in unit-dose and modified unit-dose containers;

8. To establish minimum standards for compounding, dispensing, and administering sterile products;

9. To establish minimum standards governing the inspection of pharmacies to demonstrate compliance with sections 28-1437 to 28-1439.01, 71-1,142 to 71-1,147.36, 71-2401 to 71-2405, and 71-2501 to 71-2512, the Nebraska Drug Product Selection Act, and the Uniform Controlled Substances Act and such rules and regulations as are adopted and promulgated by the department pursuant to such sections and acts. Such standards shall include, but not be limited to: (a) Criteria for successful completion of an opening inspection; (b) criteria for successful completion of an annual inspection; and (c) criteria for the issuance of a written warning notice listing specific violations to which the permittee shall respond in writing to the department, by the date stated on the warning notice, stating that the violations listed in the warning notice have been corrected;

10. To establish minimum standards governing patient counseling, patient information, and communications to a patient;

11. To establish standards governing pharmacy interns and pharmacy technicians. In establishing standards for the number of pharmacy interns pharmacy technicians that a pharmacist may supervise, the department shall consider the following: (a) History of the use of such personnel; (b) current literature discussing safety, productivity, and expense associated with the use of pharmacy technicians; (c) requirements in surrounding states for pharmacy intern supervision; and (d) such other factors as the department deems relevant to protect the public safety;

12. To establish minimum standards for the terms and provisions of the written control procedures and guidelines required by subsection (4) of section 71-1,147.33 as they relate to the qualifications, onsite training,
functions, and supervision of supportive pharmacy personnel pharmacy technicians.

(13) To establish standards and guidelines for the identification of supportive pharmacy personnel pharmacy technicians as such while they are performing duties in a pharmacy; and

(14) To establish minimum standards and guidelines for the documentation of the verification of the acts, tasks, or functions of supportive pharmacy personnel pharmacy technicians.

The minimum standards and requirements for the practice of pharmacy and for public or private hospital pharmacies licensed by the department shall be consistent with the minimum requirements and standards established by the department under sections 71-2017 to 71-2029.

Sec. 46. Section 71-1,147.10, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,147.10. (1) The department shall deny an application for a permit to conduct a pharmacy, revoke or suspend a permit to conduct a pharmacy, refuse renewal of a permit to conduct a pharmacy, deny an application for a license to operate a hospital, revoke or suspend the license of a hospital, or refuse renewal of a hospital license on any of the following grounds:

(a) Conviction of any crime involving moral turpitude;
(b) Obtaining a pharmacy permit or an inspection certificate by false representation or fraud;
(c) Operating a pharmacy or hospital pharmacy without a licensed pharmacist responsible for the practice of pharmacy;
(d) The compounding and dispensing of drugs or devices or the filling of a prescription by a person other than a licensed pharmacist or by an intern in a pharmacy intern, without the presence of and the immediate personal supervision of a licensed pharmacist except as provided in sections 71-1,147.33 and 71-1,147.53;
(e) A conviction of a violation of sections 71-1,142 to 71-1,147.61 or of a felony, if a natural person, the revocation or suspension of a license to practice pharmacy in this state;
(f) Unprofessional conduct which shall include, but not be limited to:

(i) Misrepresentation or fraud in the conduct of a pharmacy or hospital pharmacy;
(ii) Aiding or abetting an unlicensed person to practice pharmacy;
(iii) The dispensing over the counter without a prescription of a drug or device which under state or federal law or regulation is prohibited from being dispensed without a prescription or the renewal of such a prescription without the authorization of the prescriber;
(iv) The dispensing of a different drug or device in place of the drug or device ordered or prescribed without the express permission of the person ordering or prescribing the same;
(v) Any fraudulent act in drug product selection whereby the purchaser is charged for the prescribed brand rather than the selected product which is deemed to be chemically and therapeutically equivalent;
(vi) Failure to account for significant, substantial shortages or overages of controlled substances; or
(vii) Use of supportive pharmacy personnel pharmacy technicians in violation of section 71-1,147.33;
(g) Violation of the rules and regulations governing the practice of pharmacy as adopted and promulgated under authority of section 71-1,147.09 by the department; and
(h) Suggesting, soliciting, ordering, assisting, or abetting a pharmacist in the commission of any of the offenses set forth in sections 71-147 and 71-148.

(2) Nothing contained in this section shall be construed to prohibit any hospital licensed by the department from establishing rules and regulations regarding the method by which medical staff members shall agree to order or prescribe drugs or devices for patients of such hospitals.

(3) If the department determines to deny an application for a permit to or to revoke, suspend, or refuse renewal of the license of a hospital pursuant to this section, the procedures for such action in sections 71-2023 to 71-2029 shall be followed.

(4) If the department determines to deny an application for a permit to or to revoke, suspend, or refuse renewal of a permit to conduct a pharmacy, it shall send to the applicant or permittee, by certified mail, a notice setting forth the particular reasons for the determination. The denial, suspension, revocation, or refusal of renewal shall become final thirty days after the mailing of the notice unless the applicant or permittee, within such thirty-day period, requests a hearing in writing. The applicant or permittee
shall be given a fair hearing before the department and may present such evidence as may be proper. On the basis of such evidence the determination involved shall be affirmed or set aside, and a copy of such decision setting forth the findings of facts and the particular reasons upon which it is based shall be sent by certified mail to the applicant or permittee. The decision shall become final thirty days after a copy of such decision is mailed unless the applicant or permittee within such thirty-day period appeals the decision pursuant to section 71-1,147.12. The procedure governing hearings authorized by this section shall be in accordance with rules and regulations adopted and promulgated by the department. A full and complete record shall be kept of all proceedings. Witnesses may be subpoenaed by either party and shall be allowed a fee at a rate prescribed by the rules and regulations adopted and promulgated by the department.

(5) The proceeding shall be summary in its nature and triable as an equity action. Affidavits may be received in evidence in the discretion of the Director of Regulation and Licensure. The department shall have the power to administer oaths, to subpoena witnesses and compel their attendance, and to issue subpoenas duces tecum and require the production of books, accounts, and documents in the same manner and to the same extent as the district courts of the state. Depositions may be used by either party. Upon the completion of any hearing, the director shall have the authority through entry of an order to exercise in his or her discretion any or all of the following powers:

(a) Issue a censure or reprimand against the permittee;
(b) Suspend judgment;
(c) Place the permittee on probation;
(d) Place a limitation or limitations on the permit and upon the right of the permittee to operate a pharmacy to the extent, scope, or type of operation for such time and under such conditions as the director finds necessary and proper. The director shall consult with the board in all instances prior to issuing an order of limitation;
(e) Impose a civil penalty not to exceed ten thousand dollars;
(f) Enter an order of suspension of the permit;
(g) Enter an order of revocation of the permit; and
(h) Dismiss the action.

(6) The permittee shall not operate a pharmacy after a permit is revoked or during the time for which the permit is suspended. If a permit is suspended, the suspension shall be for a definite period of time to be fixed by the director. Such permit shall be automatically reinstated upon the expiration of such period if the current renewal fees have been paid. If such permit is revoked, such revocation shall be permanent, except that at any time after the expiration of two years, application may be made for reinstatement of any permittee whose permit shall have been revoked. Such application shall be addressed to the director but may not be received or filed by him or her unless accompanied by a written recommendation of reinstatement by the board. Civil penalty, if any, shall be based on the severity of the violation. If any violation is a repeated or continuing violation, each violation or each day a violation continues shall constitute a separate violation for the purpose of computing the applicable civil penalty, if any. The department may adopt and promulgate the necessary rules and regulations concerning notice and hearing of such application.

(7) Any civil penalty assessed and unpaid under this section shall constitute a debt to the State of Nebraska which may be collected in the manner of a lien foreclosure or sued for and recovered in a proper form of action in the name of the state in the district court of the county in which the violator resides or owns property. The department shall within thirty days after receipt remit any collected civil penalty to the State Treasurer for credit to the permanent school fund.

(8) The Attorney General, upon the recommendation of the board, shall initiate criminal proceedings pursuant to section 71-167 against any pharmacy technician or public health clinic workers who knowingly perform worker or dialysis drug or device distributor worker who knowingly performs tasks or functions which require the expertise or professional judgment of a pharmacist. When appropriate, the Attorney General, upon the recommendation of the board, shall initiate corresponding criminal charges against pharmacists, pharmacy owners, or other persons who knowingly permit supportive pharmacy personnel, any pharmacy technician or public health clinic workers worker or dialysis drug or device distributor worker to perform professional duties which require the expertise or professional judgment of a pharmacist.

Sec. 47. Section 71-1,147.33, Reissue Revised Statutes of Nebraska, is amended to read:

71-1,147.33. (1) Any pharmacy may employ supportive pharmacy
personnel pharmacy technicians to perform tasks which do not require professional judgment and which are subject to verification to assist in the preparation, compounding, dispensing, and distribution of drugs or devices, including, but not limited to, (a) maintaining patient drug records, (b) setting up, packaging, and labeling drug doses, (c) filling routine orders for stock supplies, and (d) mixing, labeling, and preparing drugs with parenteral fluids.

(2) The following functions and tasks shall be deemed to require the exercise of professional judgment by a pharmacist and shall not be performed by supportive pharmacy personnel pharmacy technicians or by public health clinic workers:

(a) Receiving oral orders for new prescriptions or oral authorizations to refill prescriptions from a medical practitioner or his or her agent;

(b) Providing patient counseling to a patient or caregiver regarding drugs or devices, either before or after they have been dispensed, or regarding any medical information contained in a patient's record maintained pursuant to sections 71-1,147.35 and 71-1,147.36;

(c) Performing any evaluation or necessary clarification of a prescription or performing any functions other than strictly clerical functions involving the interpretation of a prescription prior to dispensing;

(d) Training, instructing, supervising, verifying, or directing the duties of supportive pharmacy personnel pharmacy technicians;

(e) Interpreting or evaluating the data contained in a patient's record maintained pursuant to section 71-1,147.35;

(f) Performing or participating in any professional consultation with medical practitioners, nurses, other health care professionals, or the authorized agent of any of them, for the purpose of providing pharmaceutical care;

(g) Verifying any prescribed drug or device prior to dispensing; and

(h) Determining, with regard to an individual prescription, the chemically and therapeutically equivalent drug products to be drug product selected for brand-name drug products in accordance with the Nebraska Drug Product Selection Act.

(3) The pharmacy employing supportive pharmacy personnel pharmacy technicians shall be responsible for the supervision, onsite training, and performance of such personnel technicians.

(4) The pharmacist in charge shall be responsible for the practice of pharmacy and the establishment of written control procedures and guidelines governing the qualifications, onsite training, functions, supervision, and verification of the performance of supportive pharmacy personnel pharmacy technicians. The training of supportive pharmacy personnel pharmacy technicians shall include instruction, onsite in the facility where such personnel technicians are to be employed, in the duties and responsibilities of such personnel technicians under state law and in the nature of the functions which they may and may not perform. The supervision of such personnel technicians at the place of employment shall be performed by the licensed pharmacist who is on duty in the facility with the supportive pharmacy personnel pharmacy technicians as provided in subsection (5) of this section.

(5)(a) The written control procedures and guidelines shall specify the means by which the employing pharmacy will determine that supportive pharmacy personnel pharmacy technicians are at least eighteen years of age, are high school graduates or possess an equivalent degree of education, and have never been convicted of any drug-related misdemeanor or felony.

(b) The written control procedures and guidelines shall specify that the onsite training of an individual employed in such capacity shall occur within the first month that such individual is employed, that the participation of individuals in such training during such period will be confirmed by the employing pharmacy, that all aspects of such training will be documented, and that the onsite training shall include, but not be limited to, basic instruction in the following:

(i) Basic pharmaceutical nomenclature;

(ii) Metric system measures, both liquid and solid;

(iii) The meaning and use of Roman numerals;

(iv) Latin abbreviations used for dosages and directions to patients;

(v) Basic medical terms, including terms relating to ailments, diseases, or infirmities;

(vi) Instruction on the use and operation of automated dispensing and record-keeping systems if used by the employing pharmacy;

(vii) Discussion of applicable statutes, rules, and regulations
governing the preparation, compounding, dispensing, and distribution of drugs or devices, record keeping with regard to such functions, and the employment, use, and supervision of supportive pharmacy personnel pharmacy technicians; and

(viii) Discussion of the contents of the written control procedures and guidelines.

Each employing pharmacy shall be responsible for confirming in a manner and method prescribed by the department that supportive pharmacy personnel pharmacy technicians employed by the pharmacy have achieved a basic level of competence in the areas included in the onsite training.

(c) Written control procedures and guidelines shall include a protocol specifying the functions that supportive pharmacy personnel pharmacy technicians will perform in the employing pharmacy. The written control procedures and guidelines shall specify the means employed by the employing pharmacy to assure that the prescribed drug or device, the dosage form, and the directions provided to the patient conform to the order that authorized the drug to be dispensed.

(d) The written control procedures and guidelines shall specify the manner in which the pharmacist responsible for the supervision of supportive pharmacy personnel pharmacy technicians will supervise such personnel technicians and document the verification of the accuracy and completeness of their acts, tasks, and functions. Such verification shall include documentation that such pharmacist has checked the accuracy of all acts, tasks, or functions being performed by supportive pharmacy personnel pharmacy technicians.

(6) The pharmacy shall, prior to the utilization of supportive pharmacy personnel pharmacy technicians, file with the department a copy of its written control procedures and guidelines. The board shall review for approval or disapproval written control procedures and guidelines for the use of supportive pharmacy personnel pharmacy technicians in all pharmacies which employ such personnel technicians prior to their utilization. The board shall, within ninety days of the filing of such written control procedures and guidelines, review and either approve or disapprove them. The board or its representatives shall have access to the approved written control procedures and guidelines upon request. Any written control procedures and guidelines for supportive pharmacy personnel that were filed by a pharmacy and approved by the board prior to the operative date of this section shall be deemed to be approved and to apply to pharmacy technicians.

(7) Hospitals that have been utilizing supportive pharmacy personnel prior to June 30, 1993 the operative date of this section, may continue to use such personnel after such date but shall change their job title to pharmacy technician and shall submit to the board the written control procedures and guidelines governing such supportive pharmacy personnel pharmacy technicians with the job title change. A hospital that commences using supportive pharmacy personnel pharmacy technicians as provided in the rules and regulations adopted and promulgated by the department pursuant to sections 71-1,142 to 71-1,147.38 on or after such date shall meet the requirements of such sections and rules and regulations. Any written control procedures and guidelines for supportive pharmacy personnel that were filed by a hospital and approved by the board prior to the operative date of this section shall be deemed to be approved and to apply to pharmacy technicians.

(b) Acts described in subdivision (a) of this subsection may be grounds for the department, upon the recommendation of the board, to apply to the district court in the judicial district in which the pharmacy is located for an order to cease and desist from the performance of any unauthorized acts. On or at any time after such application the court may, in its discretion, issue an order restraining such pharmacy or its agents or employees from the performance of unauthorized acts. After a full hearing the court shall either grant or deny the application. Such order shall continue until the court, after a like hearing, finds the basis for such order has been removed.

Sec. 48. Section 71-1,147.34, Reissue Revised Statutes of Nebraska, is amended to read:
71-1,147.34. (1) Except as provided in subdivision subsection (7) of section 71-1,147.33, disciplinary action may be taken in accordance with section 71-155 against the permit of the employing pharmacy or the license of the hospital or the pharmacist in charge for the failure to submit written control procedures and guidelines and to receive board approval prior to the employment of supportive pharmacy personnel pharmacy technicians.

(2) Disciplinary action may be taken in accordance with such section against the supervising pharmacist who is on duty in the pharmacy and is responsible for the supervision of supportive pharmacy personnel pharmacy technicians for his or her failure or the failure of the supportive pharmacy personnel pharmacy technicians to follow approved written control procedures and guidelines.

(3) Disciplinary action may be taken in accordance with such section against the supervising pharmacist who is on duty in the pharmacy and is responsible for the supervision of supportive pharmacy personnel pharmacy technicians for any failure to properly verify the accuracy and completeness of the acts, tasks, or functions undertaken by supportive pharmacy personnel pharmacy technicians, which failure results in a discrepancy in the dispensing process.

(4) Disciplinary action may be taken in accordance with such section against the license of a pharmacist in charge, the permit of the pharmacy, or the license of the hospital for the hiring and employment of an individual to serve as supportive pharmacy personnel pharmacy technicians when the pharmacist, pharmacy, or hospital knew or reasonably should have known that such individual was not qualified by law to so serve.

Sec. 49. Section 71-1774, Revised Statutes Supplement, 1998, is amended to read:

71-1774. For purposes of the Licensed Practical Nurse-Certified Act:

(1) Administration includes observing, initiating, monitoring, discontinuing, maintaining, regulating, adjusting, documenting, assessing, planning, intervening, and evaluating;

(2) Approved certification course means a course for the education and training of a licensed practical nurse-certified which the board has approved;

(3) Board means the Board of Nursing;

(4) Delegation means the decision by a registered nurse to give the responsibility for the performance of an act or procedure to a licensed practical nurse-certified;

(5) Department means the Department of Health and Human Services Regulation and Licensure;

(6) Direct supervision means that the licensed practitioner or registered nurse is in the clinical area and retains accountability for patient care;

(7) Initial venipuncture means the initiation of intravenous therapy based on a new order from a licensed practitioner for an individual for whom a previous order for intravenous therapy was not in effect;

(8) Intravenous therapy means the therapeutic infusion or injection of substances through the venous system;

(9) Licensed practical nurse-certified means a licensed practical nurse providing services in a long-term care facility or in a hospital who meets the standards established pursuant to section 71-1777 and who holds a valid certificate issued by the department pursuant to the act;

(10) Licensed practitioner means any person authorized by state law to prescribe intravenous therapy and nasogastric tube insertion;

(11) Nasogastric tube insertion means the placing of a tube via the nares or mouth into the stomach; and

(12) Pediatric patient means a patient who is younger than eighteen years old and who weighs thirty-five kilograms or less.

Sec. 50. Section 71-1909, Revised Statutes Supplement, 1998, is amended to read:

71-1909. (1) The purposes of sections 71-1908 to 71-1917 are to provide:

(a) Statewide licensing of providers of child care programs; and

(b) The Department of Health and Human Services Regulation and Licensure with authority to coordinate the imposition of standards on providers of programs.

(2) It is the intent of the Legislature that the licensing and regulation of programs under such sections exist for the protection of children and to assist parents in making informed decisions concerning enrollment and care of their children in such programs.

Sec. 51. Section 71-1910, Revised Statutes Supplement, 1998, is amended to read:

71-1910. (1) The purposes of sections 71-1908 to 71-1917 are to provide:

(a) Statewide licensing of providers of child care programs; and

(b) The Department of Health and Human Services Regulation and Licensure with authority to coordinate the imposition of standards on providers of programs.

(2) It is the intent of the Legislature that the licensing and regulation of programs under such sections exist for the protection of children and to assist parents in making informed decisions concerning enrollment and care of their children in such programs.

Sec. 51. Section 71-1910, Revised Statutes Supplement, 1998, is amended to read:

71-1910. (1) The purposes of sections 71-1908 to 71-1917 are to provide:

(a) Statewide licensing of providers of child care programs; and

(b) The Department of Health and Human Services Regulation and Licensure with authority to coordinate the imposition of standards on providers of programs.

(2) It is the intent of the Legislature that the licensing and regulation of programs under such sections exist for the protection of children and to assist parents in making informed decisions concerning enrollment and care of their children in such programs.
amended to read:

71-1910. For purposes of sections 71-1908 to 71-1917, unless the context otherwise requires:

(1) Department means the Department of Health and Human Services Regulation and Licensure;

(2) Director means the Director of Health and Human Services Regulation and Licensure; and

(3) Program means the provision of services in lieu of parental supervision for children under thirteen years of age for compensation, either directly or indirectly, on the average of less than twelve hours per day, but more than two hours per week, and includes any employer-sponsored child care, family child care home, child care center, school-age child care program, school-age services pursuant to section 79-1104, or preschool or nursery school. Program does not include casual care at irregular intervals, a recreation camp, classes or services provided by a religious organization other than child care or a preschool or nursery school, a preschool program conducted in a school approved pursuant to section 79-318, or foster care as defined in section 71-1901. The State Board of Education may adopt and promulgate rules and regulations which shall apply to any program and any school-age-care program operated or contracted by a public school district.

Sec. 52. Section 71-1911, Revised Statutes Supplement, 1998, is amended to read:

71-1911. (1) A person may furnish a program for three or less children without having a license issued by the department, except that if such person has had a license issued pursuant to subsection (2) of this section and such license has been suspended or revoked pursuant to section 71-1915, such person shall not furnish a program for three or less children until the person is licensed pursuant to this section.

(2) No person shall furnish or offer to furnish a program for four or more children under his or her direct supervision, care, and control at any one time from families other than that of the provider without having in full force and effect a written license issued by the department upon such terms as may be prescribed by the rules and regulations adopted and promulgated by the department. If the applicant is an individual, the application for a license shall include the applicant’s social security number. The license may be a provisional license, a probationary license, or an operating license. A city, village, or county which has rules, regulations, or ordinances in effect on July 10, 1984, which apply to programs furnished for two or three children from different families may continue to license providers of such programs. If the license of a person is suspended or revoked pursuant to section 71-1915, such person shall not be licensed by any city, village, or county rules, regulations, or ordinances until the person is licensed pursuant to this section. Any provider not covered by sections 71-1908 to 71-1917 may voluntarily subject himself, herself, or itself to coverage.

(3) A provisional license shall be issued to all applicants following the completion of preservice orientation training approved or delivered by the department for the first year of operation. At the end of one year of operation the department shall either issue an operating license or renew or refuse to renew the provisional license. The provisional license may be renewed once if the department determines that:

(a) A licensee is unable to comply with all licensure requirements and standards, is making a good faith effort to comply, and is capable of compliance within the next six months;

(b) The effect of the current inability to comply with a rule or regulation does not present an unreasonable risk to the health, safety, or well-being of children or staff; and

(c) The license has a written plan of correction that has been approved by the department which is to be completed within the renewal period.

(4) The department may issue a probationary license to a licensee holding an operating license for up to six months. The probationary license may be issued if the department determines that:

(a) A licensee is unable to comply with all licensure requirements and standards or has had a history of noncompliance;

(b) The effect of noncompliance with any rule or regulation does not present an unreasonable risk to the health, safety, or well-being of children or staff; and

(c) The license has a written plan of correction that has been approved by the department.

(5) Operating licenses issued under sections 71-1908 to 71-1917 shall remain in full force and effect subject to annual inspections and maintenance of complaint tracking. The department may amendment a license upon change of ownership or location. Amending a license requires a site
inspection by the department at the time of amendment except for amendment of a
family child care home I license for which an inspection shall occur within
sixty days. If a program is to be permanently closed, the licensee shall
return the license to the department within one week after the closing.

(6) There shall be a twenty-five-dollar fee charged for the issuance of
each license for providers with a licensing capacity of less than thirty
children and a fifty-dollar fee charged for the issuance of each license for
providers with a licensing capacity of thirty or more children. An annual
license fee of twenty-five dollars shall be paid by providers with a licensing
capacity of less than thirty children and an annual license fee of fifty
dollars shall be paid by providers with a licensing capacity of thirty or more
children. The license fee shall be paid to the department which shall retain
the fee, except that when a city, village, or county has adopted any rule,
regulation, or ordinance which establishes standards for licensed providers
pursuant to subsection (2) of section 71-1914 and conducts all necessary
inspections of any licensed provider pursuant to such subsection, the
department shall transmit the fees paid by such provider to the city, village,
or county conducting the inspections.

(7) On and after July 1, 1999, no license shall be issued to any
person if the applicant plans to provide medication unless the applicant
complies with the requirements of the Medication Aide Act.

(8) A license may be denied for cause, after notice and hearing, in
accordance with such rules and regulations as may be adopted and promulgated
by the department. A person who has had a license suspended or revoked
pursuant to section 71-1915 shall not be eligible to reapply for a license for
a period of two years.

(9) A license shall be denied or revoked if an applicant or licensee
has been found guilty of a crime involving the neglect, physical abuse, or
sexual abuse of a child or an adult.

Sec. 53. Section 71-1913, Revised Statutes Supplement, 1998, is
amended to read:

71-1913. (1) The department may request the State Fire Marshal to
inspect any program for fire safety pursuant to section 81-502, and may
request the Department of Health and Human Services Regulation and Licensure
to conduct sanitation and physical well-being standards investigations
pursuant to subsection (9) of this section. The State Fire Marshal or the
Director of Regulation and Licensure shall immediately notify the department
of Health and Human Services whenever he or she delegates authority
for such inspections under such section.

(2) The department may investigate the Department of Health and Human
Services Regulation and Licensure and shall make an investigation within thirty
days after receipt of request from the Department of Health and Human Services
of all facilities and programs of licensed providers of child care programs as
defined in section 71-1910 or applicants for licenses to provide such programs
to determine if the place or places to be covered by such licenses meet
standards of sanitation and physical well-being set by the Department of
Health and Human Services for the care and protection of the child
or children who may be placed in such facilities and programs. The Department
of Health and Human Services Regulation and Licensure department may delegate
this authority to qualified local environmental health personnel.

Sec. 54. Section 71-1913.01, Revised Statutes Supplement, 1998, is
amended to read:

71-1913.01. (1) Each program shall require the parent or guardian
each child enrolled in such program to present within thirty days after
enrollment and periodically thereafter (a) proof that the child is protected
by age-appropriate immunization against measles, mumps, rubella,
poliomyelitis, diphtheria, pertussis, tetanus, and haemophilus influenzae type
B and such other diseases as the Department of Health and Human Services may
time to time specify based on then current medical and scientific
knowledge, (b) certification by a physician, an advanced registered nurse
practitioner, or a physician assistant that immunization is not appropriate
for a stated medical reason, or (c) a written statement that the parent or
guardian does not wish to have such child so immunized and the reasons
therefor. The program shall exclude a child from attendance until such proof,
certification, or written statement is provided. At the time the parent or
guardian is notified that such information is required, he or she shall be
notified in writing of his or her right to submit a certification or written
statement pursuant to subdivision (b) or (c) of this subsection.

(2) Each program shall keep the written record of immunization, the
certification, or the written statement of the parent or guardian. Such
record, or certification, or statement shall be kept by the program as part of
the child's file. Shall be available onsite to the Department of Health and

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Human Services and the Department of Health and Human Services Regulation and Licensure, and shall be filed with the Department of Health and Human Services for review. Where noncompliance with such program requirements is observed, a written report shall be prepared by the Department of Health and Human Services by November 1 of each year the status of immunization for children enrolled as of September 30 of that year, and children who have reached kindergarten age and who are enrolled in public or private school need not be included in the report.

Sec. 55. Section 71-1913.02, Revised Statutes Supplement, 1998, is amended to read:

71-1913.02. (1) The Department of Health and Human Services shall perform annually a random audit of the reports submitted under section 71-1913.01 to check for compliance with such section on an annual basis and such other audits and inspections as are necessary to prevent the introduction or spread of disease. Audit results shall be reported to the Department of Health and Human Services Regulation and Licensure.

(2) If the Department of Health and Human Services or the Department of Health and Human Services Regulation and Licensure discovers noncompliance with section 71-1913.01, the Department of Health and Human Services Regulation and Licensure shall allow a noncomplying program thirty days to correct deficiencies.

(3) The Department of Health and Human Services and the Department of Health and Human Services Regulation and Licensure shall develop and provide educational and other materials to programs and the public as may be necessary to implement section 71-1913.01.

Sec. 56. Section 71-1915, Revised Statutes Supplement, 1998, is amended to read:

71-1915. (1) Whenever the director has reason to believe that a violation of any provision of sections 71-1908 to 71-1914 or of any rule, regulation, or order of the department has occurred, he or she may cause a written charge to be served upon each alleged violator. The charge shall specify the provision of sections 71-1908 to 71-1914 or the rule, regulation, or order alleged to be violated and the facts alleged to constitute a violation of such section, rule, regulation, or order. The on such basis, the operating license of a person may be suspended or revoked or the provisional or probationary license of a person may be suspended or revoked if periodic review or inspection by the department indicates that insufficient progress has been made toward compliance. The director shall provide for notice and, if requested by the alleged violator, a full and fair hearing at which each alleged violator shall answer the charges. The notice shall be delivered to each alleged violator by personal service, by certified or registered mail to his or her last-known address, or by publication. Notice by publication shall only be made if personal service or service by mail cannot be effectuated. The alleged violator may request a hearing within ten days after delivery of the notice. Following the hearing, if held, or within fifteen days after delivery of the notice if no hearing is held, the director shall determine whether the charges are true or not, and if true, the director may (a) issue a declaratory order finding the charges to be true, (b) revoke or suspend the provisional, probationary, or operating license, (c) issue a probationary license if the determinations of subsection (4) of section 71-1911 are applicable, or (d) impose a civil penalty of five dollars for each child in the program for each day in violation after the department issues its order finding a violation. If the department has initiated a license suspension or revocation action, (i) such action may continue to finality even if the license of the licensee has been surrendered and (ii) household members of the licensee or current staff members of such licensee shall not become the licensee of the program while such action is pending.

(2) Any civil penalty assessed and unpaid under subsection (1) of this section shall constitute a debt to the State of Nebraska which may be collected in the manner of a lien foreclosure or sued for and recovered in any proper form of action in the name of the State of Nebraska in the district court of the county in which the violator resides or owns property.

(3) Whenever the director finds that an emergency exists requiring immediate action to protect the physical well-being and safety of a child in a program, the director may, without notice or hearing, issue an order declaring the existence of such an emergency and requiring that such action be taken as the director deems necessary to meet the emergency. Notwithstanding the provisions of subsection (1) of this section, such order shall be effective immediately. Any person to whom the order is directed shall comply immediately, except that upon application to the director, the person shall be afforded a hearing as soon as possible and not later than ten days after his or her application for the hearing. On the basis of such hearing the director shall continue to enforce his or her order or revoke or modify it.
(4) In addition to the powers provided to the director in this section, he or she may petition the appropriate district court for an injunction whenever he or she believes that any person is violating any provision of sections 71-1908 to 71-1917 or any rule, regulation, or order adopted and promulgated pursuant to such sections. It shall be the duty of each county attorney or the Attorney General to whom the director reports any violation to cause appropriate proceedings to be instituted without delay to ensure compliance with such sections, rules, regulations, and orders.

Sec. 57. Section 71-1917, Revised Statutes Supplement, 1998, is amended to read:

71-1917. The annual biennial report required under subdivision (11) of section 43-2615 shall include:
(1) The number of license applications received under sections 71-1908 to 71-1917;
(2) The number of licenses issued under such sections;
(3) The number of license applications denied under such sections;
(4) The number of complaints investigated under such sections;
(5) The number of licenses revoked under such sections;
(6) The number and dollar amount of civil penalties levied pursuant to section 71-1915; and
(7) Information which may assist the Legislature in determining the extent of cooperation provided to the department by other state and local agencies pursuant to section 71-1914.

Sec. 58. Section 71-2407, Reissue Revised Statutes of Nebraska, is amended to read:

71-2407. (1) No person operating outside of the State of Nebraska shall ship, mail, or in any manner deliver dispensed prescription drugs into the State of Nebraska unless such person:
(a) Is licensed as a pharmacist in the United States;
(b) Has filed with the Department of Health and Human Services Regulation and Licensure evidence of a pharmacy license or permit issued by and valid in the state in which the person is located and from which such prescription drugs will be shipped, mailed, or otherwise delivered;
(c) Is located and operating in a state in which the requirements and qualifications for obtaining and maintaining a pharmacy license or permit are considered by the Department of Health and Human Services Regulation and Licensure, with the approval of the Board of Examiners in Pharmacy, to be substantially equivalent to the requirements contained in sections 71-1,142 to 71-1,147.38;
(d) Has designated the Secretary of State as his, her, or its agent for service of process in this state; and
(e) Has paid a fee equivalent to the annual fee for an initial or renewal permit to operate a pharmacy in the State of Nebraska as established in and at the times provided for in section 71-1,147.07. Such fees shall be remitted to the State Treasurer for credit to the Nebraska Pharmaceutical Fund.

(2) This section does not apply to prescription drugs mailed, shipped, or otherwise delivered by a pharmaceutical company to a laboratory for the purpose of conducting clinical research.

(3) For purposes of this section and section 71-2408, prescription drug shall have the definition found in section 71-1,142.

Sec. 59. Section 71-2417, Reissue Revised Statutes of Nebraska, is amended to read:

71-2417. Any emergency box containing a controlled substance which is maintained at an institution shall be exempt from the provisions of subdivisions (4) (f) and (g) of subdivision (3) (f) of section 28-414.

Sec. 60. Section 71-5830.01, Revised Statutes Supplement, 1998, is amended to read:

71-5830.01. Notwithstanding any other provisions of the Nebraska Health Care Certificate of Need Act, a certificate of need is not required for:
(1) A change in classification between an intermediate care facility, a nursing facility, or a skilled nursing facility;
(2) A project of a county in which is located a city of the metropolitan class for which a bond issue has been approved by the electorate of such county on or after January 1, 1994; and
(3) A project of a federally recognized Indian tribe to be located on tribal lands within the exterior boundaries of the State of Nebraska where a determination has been made by the tribe's governing body that the cultural needs of the tribe's members cannot be adequately met by existing facilities if such project is approved by the tribe's governing body.

Sec. 61. Section 71-7803, Reissue Revised Statutes of Nebraska, is
amended to read:
71-7803. No agency, organization, or individual shall hold himself, herself, or itself out as a hospice or as providing hospice services unless licensed in accordance with the Hospice Licensure Act.
Sec. 62. Section 71-8228, Revised Statutes Supplement, 1998, is amended to read:
71-8228. Regional medical director means a physician licensed under the Uniform Licensing Law who shall report to the Director of Regulation and Licensure and be a member of the State Trauma Advisory Board, chairs the regional trauma advisory board, and carry out the regional plan for his or her region.
Sec. 63. Section 71-8231, Revised Statutes Supplement, 1998, is amended to read:
71-8231. State trauma medical director means a physician licensed under the Uniform Licensing Law who reports to the Director of Regulation and Licensure, chairs the State Trauma Advisory Board, and carries out duties under the Statewide Trauma System Act.
Sec. 64. Section 71-8236, Revised Statutes Supplement, 1998, is amended to read:
71-8236. The State Trauma Advisory Board is created. The board shall be composed of representatives knowledgeable in emergency medical services and trauma care, including emergency medical providers such as physicians, nurses, hospital personnel, prehospital or out-of-hospital providers, local government officials, state officials, consumers, and persons affiliated professionally with health science schools. The Director of Regulation and Licensure shall appoint the members of the board for staggered terms of three years each. The department shall provide administrative support to the board. All members of the board may be reimbursed for their actual and necessary expenses incurred in the performance of their duties as such members as provided in sections 81-1174 to 81-1177. The terms of members representing the same field shall not expire at the same time.
The board shall elect a chairperson and a vice-chairperson whose terms of office shall be for two years. The board shall meet at least twice per year by written request of the director or the chairperson.
Sec. 65. Section 71-8243, Revised Statutes Supplement, 1998, is amended to read:
71-8243. Designated trauma centers and rehabilitation centers that receive trauma patients shall be categorized according to designation under the Statewide Trauma System Act. All levels of centers shall have contractual relationships agreements for transfer with higher-level and lower-level centers, as appropriate, to facilitate a seamless patient-flow system.
Sec. 66. Section 75-302, Reissue Revised Statutes of Nebraska, is amended to read:
75-302. For purposes of sections 75-301 to 75-322 and in all rules and regulations adopted and promulgated by the commission pursuant to such sections, unless the context otherwise requires:
(1) Carrier enforcement division means the carrier enforcement division of the Nebraska State Patrol or the Nebraska State Patrol;
(2) Certificate means a certificate of public convenience and necessity issued under Chapter 75, article 3, to common carriers by motor vehicle;
(3) Civil penalty means any monetary penalty assessed by the commission or carrier enforcement division due to a violation of Chapter 75, article 3; any term, condition, or limitation of any certificate or permit issued pursuant to Chapter 75, article 3; or any rule, regulation, or order of the commission, the Division of Motor Carrier Services, or the carrier enforcement division issued pursuant to Chapter 75, article 3;
(4) Commission means the Public Service Commission;
(5) Common carrier means any person who or which undertakes to transport passengers or household goods for the general public in intrastate commerce by motor vehicle for hire, whether over regular or irregular routes, upon the highways of this state;
(6) Contract carrier means any motor carrier which transports passengers or household goods for hire other than as a common carrier designed to meet the distinct needs of each individual customer or a specifically designated class of customers without any limitation as to the number of customers it can serve within the class;
(7) Division of Motor Carrier Services means the Division of Motor Carrier Services of the Department of Motor Vehicles;
(8) Escort services means an attendant or caregiver accompanying a
minor or persons who are physically, mentally, or developmentally disabled and unable to travel or wait without assistance or supervision;

(9) Highway means the roads, highways, streets, and ways in this state;

(10) Household goods means personal effects and property used or to be used in a dwelling, when a part of the equipment or supply of such dwelling, and similar property as the commission may provide by regulation if the transportation of such effects or property is:

(a) Arranged and paid for by the householder, including transportation of property from a factory or store when the property is purchased by the householder with the intent to use in his or her dwelling; or

(b) Arranged and paid for by another party;

(11) Intrastate commerce means commerce between any place in this state and any other place in this state and not in part through any other state;

(12) Motor carrier means any person other than a regulated motor carrier who or which owns, controls, manages, operates, or causes to be operated any motor vehicle used to transport passengers or property over any public highway in this state;

(13) Motor vehicle means any vehicle, machine, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used upon the highways in the transportation of passengers or property but does not include any vehicle, locomotive, or car operated exclusively on a rail or rails;

(14) Permit means a permit issued under Chapter 75, article 3, to contract carriers by motor vehicle;

(15) Person means any individual, firm, partnership, limited liability company, corporation, company, association, or joint-stock association and includes any trustee, receiver, assignee, or personal representative thereof;

(16) Private carrier means any motor carrier which owns, controls, manages, operates, or causes to be operated any motor vehicle used to transport passengers or property to or from its facility, plant, or place of business or to deliver to purchasers its products, supplies, or raw materials (a) when such transportation is within the scope of and furthers a primary business of the carrier other than transportation and (b) when not for hire.

Nothing in sections 75-301 to 75-322 shall apply to private carriers except sections 75-307 to 75-307.03 as they apply to private carriers; and

(17) Regulated motor carrier means any person who or which owns, controls, manages, operates, or causes to be operated any motor vehicle used to transport passengers, other than those excepted under section 75-303, or household goods over any public highway in this state.

Sec. 67. Section 75-303, Reissue Revised Statutes of Nebraska, is amended to read:

75-303. Sections 75-301 to 75-322 shall apply to transportation by a motor carrier or the transportation of passengers and household goods by a regulated motor carrier for hire in intrastate commerce except for the following:

(1) A motor carrier for hire in the transportation of school children and teachers to and from school;

(2) A motor carrier for hire operated in connection with a part of a streetcar system;

(3) An ambulance, ambulance owner, hearse, or automobile used exclusively as an incident to conducting a funeral;

(4) A motor carrier exempt by subdivision (1) of this section which hauls for hire (a) persons of a religious, fraternal, educational, or charitable organization, (b) pupils of a school to athletic events, (c) players of American Legion baseball teams when the point of origin or termination is within five miles of the domicile of the carrier, and (d) the elderly as defined in section 13-1203 and their spouses and dependents under a contract with a municipality or county authorized in section 13-1208;

(5) A motor carrier operated by a city and engaged in the transportation of passengers, and such exempt operations shall be no broader than those authorized in intrastate commerce at the time the city or other political subdivision assumed ownership of the operation;

(6) A motor vehicle owned and operated by a nonprofit organization which is exempt from payment of federal income taxes, as provided by section 501(c)(4), Internal Revenue Code, transporting solely persons over age sixty, persons who are spouses and dependents of persons over age sixty, and handicapped persons;

(7) A motor carrier engaged in the transportation of passengers operated by a transit authority created under and acting pursuant to the laws
of the State of Nebraska;

(8) A motor carrier operated by a municipality or county, as authorized in section 13-1208, in the transportation of elderly persons;

(9) A motor vehicle having a seating capacity of twenty or less which is operated by a governmental subdivision or a qualified public-purpose organization as defined in section 13-1203 engaged in the transportation of passengers in the state; and

(10) A motor vehicle owned and operated by a nonprofit entity organized for the purpose of furnishing electric service; and

(11) A motor carrier engaged in escort services and under contract with the Department of Health and Human Services or with any agency organized under the Nebraska Community Aging Services Act.

Sec. 68. Section 75-303.01, Reissue Revised Statutes of Nebraska, is amended to read:

75-303.01. The Department of Health and Human Services Finance and Support or any agency organized under the Nebraska Community Aging Services Act may contract for transportation for its clients with a contractor which does not hold a certificate or which is not otherwise exempt under section 75-303 only if:

(1) The proposed contractor is the individual who will personally drive the vehicle in question;

(2) The only compensation to the contractor for the transportation is paid by the department at a rate no greater than that provided for reimbursement of state employees pursuant to section 81-1176 for the costs incurred in the transportation; and

(3) (a) There is no regulated motor carrier serving the area in which the client needs transportation, (b) the regulated motor carrier serving the area is incapable of providing the specific service in question by its own written statement or as determined by the commission upon application of the regulated motor carrier or the department, or (c) the regulated carrier cannot or will not provide such service at the rate specified in subsection (2) of section 75-303.02.

Sec. 69. Section 75-303.02, Reissue Revised Statutes of Nebraska, is amended to read:

75-303.02. (1) The commission, in consultation with the Department of Health and Human Services Finance and Support, shall adopt and promulgate rules and regulations governing minimum liability insurance requirements, equipment standards, driver qualification requirements, and the issuance and filing of notice for any contractor utilized by the department or any agency organized under the Nebraska Community Aging Services Act pursuant to section 75-303.01.

(2) The Department of Health and Human Services or any agency organized under the Nebraska Community Aging Services Act shall reimburse common and contract carriers for transportation of passengers at a rate not to exceed the rate of reimbursement pursuant to section 81-1176 multiplied by three. The maximum reimbursement rate provided for in this subsection shall not apply when the carrier (a) transports such person wholly within the corporate limits of the city or village where the transportation of the person originated or (b) transports a disabled person as defined by the federal Americans with Disabilities Act of 1990 in a vehicle that is compliant with the regulations providing for the transportation of such disabled person.

Sec. 70. Section 81-502, Revised Statutes Supplement, 1998, is amended to read:

81-502. (1) It shall be the duty of the State Fire Marshal, under authority of the Governor:

(a) To enforce all laws of the state relating to the suppression of arson and investigation of the cause, origin, and circumstances of fires;

(b) To promote safety and reduce loss by fire;

(c) To make an investigation for fire safety of the premises and facilities of:

(i) Liquor establishments for which a license or renewal of a license is sought, upon request of the Nebraska Liquor Control Commission, pursuant to section 53-119.01;

(ii) Licensed foster care facilities or applicants for licenses for foster care facilities, upon request by the Department of Health and Human Services, pursuant to section 71-1903;

(iii) Licensed providers of programs or applicants for licenses to provide such programs, upon request of the Department of Health and Human Services Regulation and Licensure, pursuant to section 71-1913. The State Fire Marshal shall report the results of the investigation to the department within thirty days after receipt of the request from the department;

(iv) Licensed hospitals, skilled nursing facilities, intermediate
care facilities, or other facilities or institutions which are mentioned in subdivision (1) of section 71-2017 or applicants for licenses for such facilities or institutions, upon request by the Department of Health and Human Services Regulation and Licensure, pursuant to section 71-2022; and
(v) Mobile home parks for which a license or renewal of a license is sought, upon request of the Department of Health and Human Services Regulation and Licensure, pursuant to section 71-4635; and
(d) After a careful study and investigation of relevant data, to adopt, promulgate, alter, and enforce, through inspections and code compliance, orders, rules, and regulations covering:
(i) The prevention of fires;
(ii) The storage, sale, and use of flammable liquids, combustibles, and firewacks;
(iii) Electric wiring and heating, protection equipment devices, materials, furnishings, and other safeguards within the structure necessary to promote safety and reduce loss by fire, and the means and adequacy of exits, in case of fire, in assembly, educational, institutional, residential, mercantile, office, storage, and industrial-type occupancies as such structures are defined in the National Fire Protection Association, Pamphlet Number 101, and associated pamphlets, and all other buildings, structures, and enclosures in which numbers of persons congregate from time to time for any purpose whether privately or publicly owned;
(iv) Design, construction, location, installation, and operation of equipment for storing, handling, and utilization of liquefied petroleum gases, specifying the odorization of such gases and the degree thereof;
(v) Chemicals, prozylin plastics, X-ray nitrocellulose films, or any other hazardous material that may now or hereafter exist;
(vi) Tanks used for the storage of regulated substances pursuant to the Petroleum Products and Hazardous Substances Storage and Handling Act; and
(vii) Accessibility standards and specifications adopted pursuant to section 81-5,147.
(2) The State Fire Marshal may enter into contracts with private individuals or other agencies, boards, commissions, or governmental bodies for the purpose of carrying out his or her duties and responsibilities pursuant to the Arson Reporting Immunity Act, the Nebraska Natural Gas Pipeline Safety Act of 1969, and sections 81-502 to 81-541.01, 81-5,132 to 81-5,146, and 81-5,151 to 81-5,157.
(3) The State Fire Marshal may delegate the authority set forth in this section to qualified local fire prevention personnel. The State Fire Marshal may overrule a decision, act, or policy of the local fire prevention personnel. When the State Fire Marshal overrules the local personnel, such local personnel may follow the appeals procedure established by sections 81-502.01 to 81-502.03. Such delegation of authority may be revoked by the State Fire Marshal for cause upon thirty days' notice after a hearing.
(4) The State Fire Marshal, first assistant fire marshal, and deputies shall have such other powers and perform such other duties as are set forth in sections 81-501.01 to 81-531 and 81-5,151 to 81-5,157 and as may be conferred and imposed by law.
(5) The rules and regulations adopted and promulgated pursuant to subdivision (1)(d) of this section may conform generally to the standards recommended by the National Fire Protection Association, Pamphlet Number 101, known as the Life Safety Code, and associated pamphlets, but not when doing so would impose an unduly severe or costly burden without substantially contributing to the safety of persons or property. This section and the rules and regulations adopted and promulgated pursuant to subdivision (1)(d) of this section shall apply to existing as well as new buildings, structures, and enclosures. Such rules and regulations shall also apply to sites or structures in public ownership listed on the National Register of Historic Places but without destroying the historic quality thereof.
(6) Plans for compliance with the rules and regulations adopted and promulgated pursuant to subdivision (1)(d) of this section shall be reviewed by the State Fire Marshal. Plans submitted after remodeling or construction has begun shall be accompanied by a penalty of fifty dollars in addition to the plan review fee set out in subdivision (4)(a) of section 81-505.01.
Sec. 71. Section 81-2602, Revised Statutes Supplement, 1998, is amended to read:
81-2602. The Geographic Information System Steering Committee is hereby created and shall consist of eighteen members as follows:
(1) The director or designee of the Department of Administrative Services, the Department of Environmental Quality, the Department of Health and Human Services Regulation and Licensure, Conservation and Survey Division of the University of Nebraska, the Nebraska Natural Resources
Commission, and the Governor's Policy Research Office;
(2) The Director-State Engineer or designee;
(3) The State Surveyor or designee;
(4) The Clerk of the Legislature or designee;
(5) The secretary of the Game and Parks Commission or designee;
(6) The Property Tax Administrator or designee;
(7) One representative of federal agencies appointed by the Governor;
(8) One representative of the natural resources districts nominated by the Nebraska Association of Resources Districts and appointed by the Governor;
(9) One representative of the public power districts appointed by the Governor;
(10) Two representatives of the counties nominated by the Nebraska Association of County Officials and appointed by the Governor;
(11) One representative of the municipalities nominated by the League of Nebraska Municipalities and appointed by the Governor; and
(12) Two members at large appointed by the Governor.

The appointed members shall serve for terms of four years, except that of the initial members appointed by the Governor, one of the representatives of the counties shall be appointed for one year and the other shall be appointed for three years, one of the members at large shall be appointed for one year and the other for three years, and the representative of the public power districts shall be appointed for two years. Their successors shall be appointed for four-year terms. Any vacancy on the committee shall be filled in the same manner as the original appointment, and the person selected to fill such vacancy shall have the same qualifications as the member whose vacancy is being filled.

The members shall be reimbursed for their actual and necessary expenses as provided in sections 81-1174 to 81-1177.

Sec. 72. Sections 22 to 26, 50 to 57, 70, and 73 of this act become operative July 1, 1999. The other sections of this act become operative on their effective date.

Sec. 73. Original sections 43-2606, 43-2610, 43-2615, 43-2616, and 43-2620, Reissue Revised Statutes of Nebraska, and sections 71-1909, 71-1910, 71-1911, 71-1913, 71-1913.01, 71-1913.02, 71-1915, 71-1917, and 81-502, Revised Statutes Supplement, 1998, are repealed.


Sec. 75. The following sections are outright repealed: Section 71-1,147.37 and 71-1,147.38, Reissue Revised Statutes of Nebraska.

Sec. 76. Since an emergency exists, this act takes effect when passed and approved according to law.