

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE  
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LB 1025

language in the Nursing Incentive to Practice Act portion of the bill, to reduce the number of persons for which incentive payments would be made available under the act from 100 to 50. The amendment changes the definition of nurse under the Nursing Loan Repayment Act portion of the bill to include an advanced registered nurse practitioner. The amendment changes membership on the Nebraska Center for Nursing Board, to reduce from four to three number of registered nurses on a board and to include a licensed practical nurse on the board. That's all the amendment does, and I would just...like I said, Senator Suttle's amendment will address this issue further. Thank you, Mr. President.

SENATOR CUDABACK: Thank you, Senator Jensen. Mr. Clerk.

CLERK: Senator Suttle would move to amend the committee amendments. (AM2592, Legislative Journal page 885.)

SENATOR CUDABACK: Senator Suttle, to open on your amendment to the committee amendment.

SENATOR SUTTLE: Thank you, Mr. President, members of the Legislature. AM2592 reduces the fiscal impact of LB 1025 and removes nursing scholarship incentives, student loans and loan repayments. The only part that's left is the Center for Nurses created in the original bill. This amendment also reduces the fiscal impact of the Center for Nursing. It strikes \$50 per diem for the Center for Nursing Board created under the Center, reimbursement for expenses remains; striking the requirement to hire an executive director; giving the board authority to contract for additional support not provided by the Health and Human Services; and terminating the entire provision of the bill on July 1, 2005. The intent behind the bill and the amendment is that members appointed to the board will each offer some support from each agency represented on the board to address the issues and carry out the mission of the board. Last year the Department of Health and Human Services commissioned a preliminary study of the shortages of nurses in Nebraska. The main conclusion of the study was the need for more facts and data before solid recommendations could be made. And an interim study assigned to the Health and Human Services Committee last year came up with essentially the same conclusion, and the proponents of LB 1025 echoed it again in the public hearing on