

Transcript Prepared by Clerk of the Legislature Transcribers Office
Floor Debate May 12, 2021

HUGHES: Good morning, ladies and gentlemen, welcome to the George W. Norris Legislative Chamber for the seventy-seventh day of the One Hundred Seventh Legislature, First Session. Our chaplain for today is Senator Williams. Please rise.

WILLIAMS: Thank you, members, and please join me in prayer. Dear Lord, we thank you for today, and we thank you for all days, especially day 77. We pray that you lead us and guide us, even during these long and sometimes difficult days. Please be with each senator and our staffs, keeping us safe, keeping us focused, and keeping us united in our efforts. Help us to refuse to believe that we are powerless. Help us to refuse to believe that injustice and hatred are simply a way of life. Help us to refuse to believe that we cannot make a difference. Help each of us strive to live a life of courage, a life of conviction, and a life of compassion. Let us use our combined wisdom, our independent imagination, and our abundant compassion to find opportunities in the obstacles we face and solutions for the challenges on the horizon. Amen.

HUGHES: Thank you, Senator Williams. I recognize Senator Bostelman for the Pledge of Allegiance.

BOSTELMAN: Colleagues, please join me in the pledge. I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one Nation under God, indivisible, with liberty and justice for all.

HUGHES: Thank you, Senator Bostelman. I call to order the seventy-seventh day of the One Hundred Seventh Legislature, First Session. Senators, please record your presence. Roll call. Mr. Clerk, please record.

ASSISTANT CLERK: There is a quorum present, Mr. President.

HUGHES: Thank you, Mr. Clerk. Are there-- are there any corrections to the Journal?

ASSISTANT CLERK: There is a correction this morning, Mr. President. On page 1359, line 28, strike "adopted" and insert "lost."

HUGHES: Thank you. Are there any messages, reports or announcements?

ASSISTANT CLERK: Amendments-- LB64, two amendments from Senator Friesen, and an announcement that the Transportation and

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Telecommunications Committee will hold an Executive Session at 10:00 a.m. in room 2022. That's all I have this morning.

HUGHES: Thank you, Mr. Clerk. Colleagues, Senator Brandt would like to recognize Dr. Jason Bespalec of Geneva, who is serving as family physician of the day on behalf of the Nebraska Academy of Family Physicians. Dr. Bespalec, would you please rise and be welcomed by your Nebraska Legislature? We will now proceed to the first item on the agenda. Mr. Clerk.

ASSISTANT CLERK: Mr. President, LB474, offered by Senator Wishart. It's a bill for an act relating to cannabis; to adopt the Medicinal Cannabis Act; to provide civil and criminal penalties; create a fund; change provisions relating to controlled substances, open containers, taxation; harmonize provisions, provide operative dates; repeal the original sections; and declare an emergency. This bill was introduced on January 15 of this year, referred to the Judiciary Committee. That committee placed the bill on General File with committee amendments.

HUGHES: Thank you, Mr. Clerk. Senator Wishart, you're welcome to open on LB474.

WISHART: Thank you, Mr. President. Good morning, colleagues. People in the state of Nebraska have the right to cannabis for medical purposes. People in the state of Nebraska have the right to cannabis for medical purposes, period. That is the ballot initiative that myself and the advocates will be running for November of 2022. And make no mistake that we will get the signatures to qualify this initiative. We've done it before in a global pandemic. And it will pass with overwhelming support across the state, including support from the 3rd District. A lot has changed since I was here before you, bringing a bill in 2019, and in 2018, and in 2017, and before me, Senator Garrett. We've grown a movement. We collected 196,000 signatures, 123,000 of those we collected in one month in June, in 2020, during a global pandemic. We qualified 48 counties. We only needed to qualify 38. We qualified 48. We had signers in every single county in Nebraska support this issue. Had it not been for a last minute lawsuit and five judges, we were certified in going to a vote of people. And our polling, which we've done continuously, shows that Nebraskans overwhelmingly support this issue. And it doesn't matter what age category, where they live in the state, or what their political affiliation is, they support this issue. No amount of money or opposition is going to silence the people of Nebraska on this issue. And I know a lot of money is already being spent. I know there is out-of-state money in TV ads and thousands of mailers that went to your district. But if you spent the time that I have spent driving across the state to collect signatures-- in Johnson

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County, Senator Slama, in Saline County, Senator Brandt, in Madison County, Senator Flood, and in some of the most rural parts of our country-- Rock, Garfield, Arthur, Wheeler, beautiful country-- you'd be as confident as I am that this issue is supported by Nebraskans. And they want us to do something about it today. And the reason they support it is, you would be hard-pressed to find someone who doesn't know a person who has benefited from having access to cannabis for medical purposes. And I can guarantee you almost every single person in this room today, every single person in this room has heard from somebody who has benefited. You know, you do; you know. Cannabis is so effective medicinally because our body has a central endocannabinoid system. It's in our brain, and it affects a lot of biological functions. It affects eating, mood, memory, metabolism, pain, skin and nerve function, implement-- inflammation. And the way this system works, it works in collaboration with the cannabis plant. In 2017, the National Academy of Sciences released a landmark report that reviewed over 10,000 studies on cannabis-- 10,000 medical journal studies on cannabis. It found conclusive and substantial evidence that cannabis is effective for the treatment of chronic pain, nausea, vomiting, M.S., improving sleep, reducing anxiety, traumatic brain injury. Most recently, research indicates evidence that cannabis is helpful in the treatment of epileptic seizures, autism, inflammation. And we're starting to see some really promising information on reducing opioid addiction and deaths. And it shouldn't be surprising. This is a plant that has been around for 10,000 years. It is one of the oldest plants ever cultivated by humans. It is clear through anthro-- through anthropological and archeological evidence that cannabis has been used as medicine across the world for thousands of these years, and it was used as medicine in the U.S. until 1942-- until 1942, when racism, and greed, and propaganda, and government overreach led to federal prohibition. In fact, the American Medical Association, at the time of prohibition, when it started state by state, they came out in opposition because they used cannabis as a medicine. Nevertheless, through New Deal politics, racism-- racism and propaganda, it was the states that began prohibiting cannabis, one by one. So colleagues, therefore, it is the states, one by one, that can start to end that prohibition and legalize cannabis for medical purposes. And we've done that. Nebraska is all but two of states that has not legalized cannabis for medical purposes. So then you'll ask: Well, what about the Schedule I designation? And I know we'll hear about that a lot. Well, it's not FDA approved, it's scheduled as a Schedule I drug with the DEA. I want to be really clear on this. The decision to schedule cannabis among one of the world's deadliest drugs in 1971, was a decision that was literally made by politicians and not scientists. It ignores reality, decades of scientific and medical research, and

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hundreds of thousands of human experiences across the world. Numerous studies leading up to, and at the time of prohibition and the scheduling of cannabis, found that cannabis in its natural form is safe, and it's a safe therapy for humans. Yet politicians, including President Nixon, were quoted and caught on tape acknowledging their successful attempts to criminalize the medical use of cannabis for political gain. Decades ago, even the DEA's own administrative law judge, Francis Young, recommended unscheduling cannabis in response to a petition from activists. He ruled, in 1988-- this is the DEA's judge-- he ruled that marijuana, in its natural form, is one of the safest therapeutically active substances known to man. Yet pressures by politics made the DNA-- DEA deny their petition-- and on and on. And so what that means is that this plant cannot go through an FDA application process in its whole plant form. Yet there has not been one case in the history of cannabis, in the 10,000 years of this plant, where a person has fatally overdosed for it-- not one case in 10,000 years. Think about that. Think about that compared to the many prescription drugs, including opioid pain medications, which right now, colleagues, are the leading cause of death in this country-- opioids. And we have a far safer, non-lethal alternative and tool for doctors to prescribe in cannabis. So we arrive where we are today on May 11, 2021, and I bring before you LB474. Again, all but two states, Kansas and Arkansas, are on their path this year to legalize cannabis. We will be--

HUGHES: One minute.

WISHART: --one of two states that have not. Colleagues, this bill will not fail because of a lack of compromise and thoughtfulness on the part of myself and medical cannabis advocates. If it fails to pass, it is because of the political pressure from a few who wield their power to stamp out the voice of people. And here's the thing. Our voices will not be stamped out. I will remind you again, this is an opportunity to pass a safe and regulated system. Should it not pass, we will go to the ballot with a one-sentence constitutional right. It's time for Nebraska to join the majority of states in treating patients like they are-- sick people, not criminals. Thank you.

HUGHES: Thank you. Senator Wishart. As the Clerk stated, there are amendments from the Judiciary Committee. Senator Lathrop, as Chair of the committee, you are recognized to open on the amendments.

LATHROP: Thank you, Mr. President. Colleagues, good morning. LB474 was heard by the Judiciary Committee on March 10 of this year. The bill was amended by AM824 on a 6-0 vote, with two members abstaining, and LB474 was advanced on a 5-2 vote, with one person absent. AM824 makes

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two changes to the bill. The first, it replaces Section 24 of the green copy, which defined qualifying medical condition as any condition that cannabis provides relief. The amendment adds a list of conditions, including: cancer, epileptic seizures, glaucoma, Parkinson's disease and others. My understanding is this list was developed with the input of the Nebraska Medical Association. The second change, also suggested by the Nebraska Medical Association, amends continuing education provisions of LB474. AM824 would require eight hours of continuing education courses prior to issuing a medical-- medical cannabis certification, and requires additional continuing education for providers issuing more than 25 certifications. LB474 allows providers to utilize other states' educational programs until a cannabis board is established and approves continuing education courses. AM824 increases the number of hours from three to eight when using another state's educational courses. I believe the changes in AM824 tighten and improve the process envisioned in LB474, and I would encourage your support of the committee amendment and the underlying bill, with a green vote. With that, I'm happy to try to answer questions, and I'll yield the balance of my time to Senator Wishart. Thank you, colleagues.

HUGHES: Senator Wishart, 8:00.

WISHART: Thank you, Chairman Lathrop. Colleagues, I thought I would take some time to walk you through the regulation that we are setting up in LB474. And I want to thank Elizabeth Seacrest, from my office, and Neal Erickson, the legal counsel for Judiciary Committee, for putting together a really good, detailed one-pager for you, as well as a committee statement to walk you through each part of the 60-plus pages of this bill. So first of all, just think about this cannabis system. We are setting it up very similar to the way that prescription drug processes work. Because of the federal scheduling issue, doctors cannot prescribe cannabis, and it cannot be in a pharma-- in a pharmacy. But we have a very similar system to the way that healthcare practitioners work with any other drug. That's the system we're setting up today. And courts have ruled that, because of First Amendment rights, doctors are allowed to recommend cannabis to patients. So first of all, how do you qualify for this system as a patient? Well, a patient must have a qualifying medical condition and a written certification issued by a physician, nurse practitioner or physician's assistant, all of whom are prescribers in Nebraska currently. And a patient has to have a bona fide relationship with this prescribe-- this healthcare practitioner. We have narrowed, with the committee amendment, a list of diagnosed conditions to ones that the Nebraska Medical Association and I, when having a conversation,

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agreed that there is medical efficacy for cannabis, for these particular medical conditions. And these are serious medical conditions, colleagues. These are people with Crohn's disease, battling cancer, kids with epilepsy. Patients can voluntarily register with the Cannabis Enforcement division. And patients under 18 years of age require parent affidavit saying they con-- or a guardian-- affidavit saying they consent to the treatment with controlled use. And if a patient breaks the law, they will be disqualified in perpetuity from the system. Patients who are not Nebraska residents, they are certified to use medical cannabis in, in our state. We use a reciprocity model to make sure that somebody who has epilepsy in another state who has medical cannabis card can safely travel through and stay in Nebraska. So what are the practitioner requirements of our healthcare providers? Well, practitioners who certify patients for medical cannabis are required to complete at least eight hours of continuing medical education courses approved by our board. And additional CMEs are required for those that are issuing more than 25 certificates. And there are plenty of CMEs available to doctors at this point because of all the states that have legalized. A physician will have to perform a medical examination on a patient, and they will be looking for a history of alcohol and substance abuse for a family or a personal history of schizophrenia or psychotic disorders, unless the patient is terminally ill. And then a physician is only allowed to license-- excuse me, to certify about 1,100 people in a calendar year. That's no more than 275 patients in a 90-day period. Patients must sign a disclosure form, which includes written information and consent, and this is stricter, what patients are going through, than many other medications that currently patients are able to access, including opioids. So what are the allowed activities with somebody who has been certified to use cannabis for medical purposes? A person is only able to possess up to 2.5 ounces of cannabis in any form, and 2,000 milligrams of THC in the form of cannabis products. This is one of the most conservative possession levels in the country. We modeled it after North Dakota. And then a designated caregiver is allowed to assist a patient, and we use designated caregivers 'cause there are people with significant disabilities who would benefit from having access to cannabis, but need a caregiver to help them with the process. What are some of the limitations in this legislation? A certified patient may not smoke cannabis, and is subject to an infraction or penalty for doing so. They cannot cultivate their own cannabis. A certified patient may not operate a vehicle while under the influence of cannabis. They cannot consume cannabis within a vehicle, whether they are the driver or the passenger, and they cannot undertake any tasks that would be negligent to do under the influence of cannabis. Here are some miscellaneous provisions that we've also

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included. I have worked closely with the Chambers of Commerce, we have some of the strongest pro-business language in this legislation. Employers don't have to change any of their policies to accommodate somebody who has medical cannabis and is a patient. Private and government insurers are not required to cover medical cannabis. State employees are prohibited from sharing information about registered patients with federal authorities. We do this because this bill also has some of the strongest gun rights language in the country included in it to make sure people don't have to choose between cannabis or the guns-- thought Senator Brewer would enjoy that. Patients are granted protections from discrimination in child custody, eligibility for organ transplants, housing, and education. So what we're doing then is, we're setting up a series of medical cannabis establishments, so we establish four types of business licenses: producers-- those are the businesses that grow this; processors--those are the people that make the oils and tinctures and pills; dispensaries-- those are the businesses that provide medical cannabis to patients; and then laboratories-- those are the businesses that test and ensure that there is quality control with the cannabis. Since this is a medical system, we expect utmost quality. Dispensaries also will be required to contract with a licensed pharmacist, and that pharmacist must be available at all times that the dispensary is open. And I am proud to have the endorsement of the Nebraska Pharmacists Association on this legislation.

HUGHES: One minute.

WISHART: I will continue on to talk through some of the other parts, but we set up a medical cannabis board. We have safeguards and enforcement in place to work closely with law enforcement to make sure this is above-the-board system. Other states have managed to do it. We can, too. We also allow local control if a county does not want to have a cannabis establishment in it. We have taxation in fee and licensing structures that also ensure that this entire system and its regulatory needs are fully funded by the licensing of businesses in the taxation. And then we have an implementation timeline included in this legislation, as well, to ensure that we give the regulatory board the time to do this, but also to ensure that patients have access in a timely way. Next step-- when I get a chance in the mike, I will talk to you about how other states have done this and how ours compares.

HUGHES: Time, Senator.

WISHART: Thank you.

HUGHES: Thank you, Senator Wishart and Lathrop. Mr. Clerk.

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ASSISTANT CLERK: Mr. President, a priority motion. Senator Slama would move to bracket LB474 until June 11.

HUGHES: Senator Slama, you're welcome to open on your bracket motion.

SLAMA: Thank you, Mr. President, and good morning, colleagues. I rise today opposed to LB474, and I think we'll have a very robust discussion over LB474 today. And I do appreciate Senator Wishart's work on this issue over the last several years. However, I do not believe LB474 is constitutional, and have a Nebraska Attorney General's Opinion, which I'll read from shortly, to back that assertion. Some of those that will get on the mike and rebut my argument as irrelevant and choosing to ignore that opinion are a few of the same people that will get up on Senator Brewer's upcoming bill, LB236, and claim there that the Nebraska Attorney General's Opinion, that his bill is unconstitutional, is the end-all for that piece of legislation. So to read it into the record, I think, is very valuable to frame LB474 as what I believe it is, an unconstitutional piece of legislation. So reading from the Nebraska Attorney General's Opinion from August 1, 2019-- this was written by Attorney General Doug Peterson, current Attorney General for the state of Nebraska, and David A. Lopez, the Deputy Solicitor General: Introduction-- You have requested an opinion from this office regarding the constitutionality of LB110-- which, for those of you who may not know, was the medical marijuana legislation from two years ago. It's very similar in its main concept of legalizing forms of marijuana or cannabis, as you will, for medical use. So I think it's the exact same core issue that the Attorney General wanted to address in this Opinion from 2019. Back to the Opinion: which would create the Medical Cannabis Act (MCA). CA1680 to LB110-- AM1680, currently pending on General File-- would authorize the cultivation, processing, wholesale distribution, and retail sale of cannabis-- marijuana-- and cannabis products for medical uses under Nebraska law. It would establish a regulatory framework to govern these activities in a wholly new government agency, the Cannabis Enforcement Department, to enforce this regulatory scheme through producer and patient registration, inspections, licensure, fee collection, and related rulemaking. Your specific question asks whether the MCA, if enacted, would be preempted by the federal Controlled Substances Act, CSA, the money laundering statutes, the unlicensed money transmitter statute, or the Bank Secrecy Act. To the extent the latter three categories of statutes govern this question, it is primarily based on the underlying USC-- the underlying CSA provisions. There's a note there. The following analysis will thus focus on preemption under the CSA. As explained below, it is the opinion of this office that the MCA would be

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preempted. So this is preempted by federal law, which gets to the core of the argument that LB474 is unconstitutional, that it is preempted by federal law. So: Analysis, Section I-- The Controlled Substances Act. The CSA establishes a comprehensive federal scheme to regulate the market in controlled substances. This closed regulatory system makes it unlawful to manufacture, distribute, dispense, or possess any controlled substance except in a manner authorized by the CSA. To effectuate that closed system, the CSA authorizes transactions within the legitimate distribution chain, and makes all others illegal. Violators of the CSA are subject to criminal and civil penalties, and ongoing or anticipated violations may be enjoined. The CSA categorizes all controlled substances into five schedules. The CSA's restrictions on the manufacture, distribution, and possession of a controlled substance depend upon the schedule in which the drug has been placed. The drugs are grouped together based on their accepted medical uses, the potential for abuse, and their psychological and physical effects on the body. Each schedule is associated with a distinct set of controls regarding the manufacture, distribution, and use of the substances listed therein. Since Congress enacted the CSA in 1970, marijuana and tetrahydrocannabinols have been classified as Schedule I controlled substances. A drug is listed in Schedule I if it has a "high potential for abuse," no currently accepted medical use and treatment in the United States, and a lack of accepted safety use for use under medical supervision. By classifying marijuana as a Schedule I drug, Congress mandated that the manufacture, distribution, or possession of marijuana be a criminal offense, with the sole exception being the use of the drug as part of a Food and Drug Administration preapproved research study. In the CSA, Congress included findings and declarations regarding the effects of drug distribution and use on the public health and welfare, and the effects of intrastate drug activity on interstate commerce. Congress found, for example, that the illegal importation, manufacture, distribution, and possession and improper use of controlled substances have a substantial and detrimental effect on the health and general welfare of the American people. Congress also found a major portion of the traffic in controlled substances flows through interstate and foreign commerce. Incidents of the traffic, which are not an integral part of the interstate or foreign flow, such as manufacture, local distribution and possession, nonetheless have a substantial and direct effect upon interstate commerce because: (A) after manufacture, many controlled substances are transported in interstate commerce, (B) controlled substances distributed locally usually have been transported in interstate commerce immediately before their distribution, and (C) controlled substances possessed commonly flow through interstate commerce immediately prior to such possession.

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Congress further found that local distribution and possession of controlled substances contribute to swelling the interstate traffic in such substances, that controlled substances manufactured and distributed intrastate cannot be differentiated from controlled substances manufactured and distributed interstate, and thus it is not feasible to distinguish between such substances-- substances, in terms of controls, and that federal control of the interstate-- intrastate incidents of traffic in controlled substances is essential to the effective control of the interstate incidents such as traffic. The federal executive branch confirmed this understanding of the intent and purpose of the CSA in 2004. Congress has not amended the CSA to remove marijuana from Schedule I, nor have considerable efforts to administratively reschedule marijuana been successful. Section II-- LB110, the Medical Cannabis Act. The MCA, under AM1680 to LB110, would authorize the production, distribution, sale, and consumption of medical marijuana in Nebraska, and establish an elaborate, state-run regulatory system to govern those activities. There is no material dispute that's-- that its text is intended to establish as comprehensive a regime as possible to place the state itself in the position of authorizing, licensing, inspecting, and monitoring these activities, and to collect fees from entities permitted by the state to produce, possess-- process, and dispense marijuana and marijuana products. Several of the MCA's provisions are worth specifically highlighting. The MCA would permit certified patients and designated caregivers to apply to a newly-created Cannabis Enforcement Department for enrollment in a registry-- registry program, after which they would be permitted to purchase and consume marijuana and marijuana products-- AM1680, subsections (8)-(10) and (31). Non-Nebraska residents would be permitted to participate, subject to certain conditions. Patients would qualify for participation after a diagnosis of a "qualifying medical condition," which the MCA defines by enumerating 17 specific health conditions. The new Cannabis Enforcement department would be charged with developing an application for patient enrollment in the registry program, registration of designated caregivers, permitting nonpatient caregivers to possess marijuana and distribute it to patients, and for creating a written certification form to be used by--

HUGHES: One minute.

SLAMA: --participating-- thank you, Mr. President-- by participating healthcare practitioners. The new agency is also required to develop requirements for a medical necessity waiver to allow a patient to possess a greater quantity of cannabis than otherwise allowed, and to provide for classification and regulation of commercial producers

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based on size. And I will come back to this Opinion later today and throughout the day, because I think it is very helpful that, as we discuss the merits of LB474, that we have a very convincing Attorney General's position that this-- this bill is preempted by federal law. So I will continue referencing this. And I think we'll have a very long discussion today about LB474. I am opposed. Thank you, Mr. President.

HUGHES: Thank you, Senator Slama. Colleagues, debate is now open on the bracket motion. Senator Morfeld, you are recognized.

MORFELD: Thank you, Mr. President. Colleagues, I rise in strong support of LB474 and the underlying amendments. I think that the one big fatal flaw in the AG's Opinion is that the federal government doesn't agree with the AG. And supposedly, the federal government is the one that holds the power and the preemption. The federal government does not agree with the Attorney General's Opinion. Why does the federal government not agree with the Attorney General's Opinion? Because the federal government has never alleged in court that federal laws preempt state medical marijuana or legalization or regulation laws. They've never alleged that. In fact, there was a challenge in Arizona, and the federal government itself-- the Department of Justice-- argued in favor of dismissing a lawsuit claiming Arizona's medical marijuana law was preempted. The federal government's position was that federal law did not preempt a state medical marijuana law. So the Attorney General can write as many Opinions as he wants on this issue, but the most important opinion is the sovereign government and the body itself that supposedly has the authority to preempt the law; and their position is that it does not preempt. The federal government's position is that it does not preempt. And the federal government's position has been the same on this in a Republican and a Democratic administration. So this is not partisan, it's not political. It's just facts. So the Attorney General can write as many Opinions as they want, but their Opinion is in conflict with the same sovereign body, the same government that they are supposedly saying that this proposed legislation is preempted-- or is preempted by. Colleagues, we should legalize medical marijuana today, not because it's the politically expedient thing to do, not because Senator Wishart poses good points that's based in fact, in science, in history, but because it's the right and moral thing to do. That's why we should legalize medical marijuana. We should legalize medical marijuana because there are families, there are children, and there are Nebraskans that are suffering. We should legalize marijuana-- medical marijuana-- because that's what Nebraskans overwhelmingly believe we should do. We should legalize medical

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marijuana because it's the right and moral thing to do. There aren't any real good reasons not to at this point. And we're going to hear a lot of arguments today that are going to create straw-- straw men. We're going to hear a lot of arguments today that takes data and facts out of context. But the number one argument today that we should be focused on, is that is the moral and right thing to do. We all know that we authorize and we allow substances that are much more dangerous, that lead to actual deaths in this state. And yet we treat marijuana as though it is more dangerous than those substances. We all know that alcohol kills way more people in this state, in this community, in this country than marijuana ever has or ever will. And yet we allow that to be legalized, and then pretend as though marijuana is somehow going to lead to a ton of deaths, to the collapse of our communities, to the sanctity-- the list goes on. But we all know, in our heart of hearts, that is not true.

HUGHES: One minute.

MORFELD: And we also know the reason why people are opposing this is because of pure politics. It's because people are afraid of certain people outside of this Chamber, and don't want to deal with it. It's more politically expedient to be opposed to it than it is to do the right thing. Over 70 percent of Nebraskans support the legalization of medical marijuana, and they support it because they have common sense. They know that it's not a dangerous drug. They know that it has lifesaving-- in some cases, lifesaving qualities. And they also know that it improves a lot of people's lives in ways that other drugs simply cannot. Colleagues, Senator Wishart is much more reasonable and thoughtful than I ever will be, and I think we all know that.

HUGHES: Time, Senator.

MORFELD: Thank you.

HUGHES: Thank you, Senator Morfeld. Senator McDonnell, you're recognized.

McDONNELL: Thank you, Mr. President. Good morning, colleagues. And Adam, you are correct on your last statement. 2016, running for-- for this position and going door to door, people ask, of course, different questions. And it's interesting what people will share with you and how they'll open their hearts up to you. And at that time, they would ask about recreational marijuana. I was 100 percent opposed, 100 percent. They started talking about medical marijuana, and they started sharing some of their stories. So I said: I-- you know, I got to think about this one. I got to think about the medical side. We get

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down here, and Senator Wishart starts working on this in 2017, continues to work on it, continues to educate us. But what made the most difference for me was the family that brought their daughter in. And based on her-- her medical problems, health issues-- she had to wear a helmet 'cause throughout the day she would have seizures-- seizure after seizure. Now the idea of trying to stop pain and suffering, I think everybody in this room wants to do something to stop other human beings' pain and suffering. So how do we-- how do we go about that? And we know there's-- there's ways to do this. And one of the ways that we're-- we're avoiding is the medical marijuana. Now this family shared with me, also, the cost of the medication and being on Medicaid and-- and the thousands and thousands of dollars being spent per year that, with medical marijuana, because they had taken that step and went out of state, and said: We're going to stop our daughter's pain and suffering. Regardless if 49 elected officials want to do anything about it, we're going to do something about it. And they did. But they also looked at the economic side of it. And that's something that we all should talk about. If we're talking about stopping someone's pain and suffering, at the same time saving X-number of dollars because of the medication they no longer will have to be on that isn't helping them like medical marijuana could, then that's our fiduciary responsibility also, to stop the pain of suffering, but also to make sure we're looking at every dollar and how it's being spent. Senator Wishart, you might not agree with her, and-- and-- but you can't not say she's not sincere, and that she's not trying to do something here for these people to help them and their families. Now I'm going to get on the political side of it. There's people out there like me that will support medical marijuana, that will not support recreational marijuana. Now, in November of '22, there's going to be people who go to the polls, and this is going to be on the ballot. There's just very little doubt about that. And Senator Wishart shared those numbers, and that polling, and what happened, and the signatures they collected during a pandemic. Now if you want to try to stop recreational marijuana, then help put something in place, based on medical marijuana to stop people's pain and suffering, save us dollars based on less medication, and also, at the same time, take those people that are just interested in medical marijuana, not recreational, and take them off the table, 'cause at that point, then they're not going to be that interested in going to the polling place in November of '22, because it will be about recreational. It'll be all of them-- all. Just say it's legal in the state of Nebraska-- marijuana is legal in the state of Nebraska. So I want you to think about it, just please, in three ways. The pain and suffering-- it does work. I mean that it-- it does help people--

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HUGHES: One minute.

McDONNELL: --medical marijuana does. Also, the money we can save, based on reducing, like that little girl and the family, thousands and thousands of dollars less medication they would have to buy because of the medical marijuana, and also, the idea of stopping recreational marijuana, because that's where we are going right now in this state. And you know the numbers, and the statistics, and-- and the idea of all around us, as the state of Nebraska, this is going on. And I'd ask you to really consider thinking about that today throughout this discussion. Thank you, Mr. President.

HUGHES: Thank you, Senator McDonnell. Mr. Clerk, for an announcement.

ASSISTANT CLERK: Thank you, Mr. President. The Transportation and Telecommunications Committee will hold an Executive Session at 10:00 in room 2022.

HUGHES: Thank you, Mr. Clerk. Senator Geist, you're recognized.

GEIST: Thank you, Mr. President. I don't know where to start, but I will do my best to organize my thoughts, 'cause I'll probably talk a lot today. I am so 100 percent opposed to this, and it has nothing to do with Senator Wishart. She and I are great friends. Nothing personal. She's worked really hard. I commend her for that. And it also has nothing to do with whether or not I'm compassionate towards those who choose to use this for their children or their-- themselves. It's on so many other levels, and I will start just to methodically let you know what those are today. To begin with, yes, this plant has been cultivated for thousands of years. But what we have in marijuana today, medical and nonmedical-- recreational-- is extraordinarily high THC levels, lab created. That's not the kind of marijuana that was cultivated thousands and thousands of years. What we're talking about now, with this bill, is an unlimited, uncapped THC level. You can have 95 percent THC or higher. There is no therapeutic use for that high THC. There's actually no therapeutic use for high concentrated levels of THC. And this bill allows for high concentrated levels of THC. You may not be able to smoke it, but you can vape it, you can crush the pill. There are so many ways that you can use this nonmedically. Today, we're going to also talk about what this does in the pharmaceutical world and in the pharmacy world. This opens up a loophole for the pharmacy industry that allows them an expanded scope of practice that's not currently available to them today. And we'll talk more about that as the day goes on. There's also talk about all the money that's in Big Pharma. Well, folks, there's a lot of money in big marijuana. There's so much more money that flows into this body

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from the big marijuana industry than from the pharmaceutical industry. So don't be fooled that these are just small little mom-and-pop shops trying to struggle their way to the top. That is a myth. This is big money. I'm going to talk a little bit now about the THC levels and why this concerns me. We all know that THC is a psychoactive component that causes addiction to marijuana; and yes, it does cause addiction at high levels. According to an article by Elizabeth Stuyt, who is a board-certified addiction psychiatrist and a senior instructor for the University of Colorado Health Science Program-- note that, the University of Colorado. Let me get my notes off here. THC levels have increased dramatically in the past 30 years. Prior to 1990, it was less than 2 percent,--

HUGHES: One minute.

GEIST: --going to 4 percent in the '90s. And from '95 to 2015, there has been a 212 percent increase in the THC content in the marijuana flower. She goes on to say that some products have a THC concentration upwards of 95 percent, and there is absolutely no research that indicates this level of THC is beneficial for any medical condition. And I'll talk more about that when I come back on the mike. Thank you, Mr. President.

HUGHES: Thank you, Senator Geist. Senator Slama, you're recognized.

SLAMA: Thank you, Mr. President, and good morning again, colleagues. I would like to echo Senator Geist's sentiments about Senator Wishart again. She is a great colleague, a great person to work with. And my opposition to LB474 is not rooted in any way personally against Senator Wishart. She is a champion for her cause. And just to respond to a couple of issues that have already been brought up on the mike, specifically by Senator Morfeld, I appreciate the point that marijuana is a plant. You know what's also a plant? The strains of poppy known as the opium poppy that are used to make drugs like heroin. Guess what? The federal government regulates and bans those strains of poppy, which is a plant. So this is not anything new or unprecedented. Marijuana is far from the only plant that the government regulates and bans. Again, to the point that Senator Morfeld made about the federal government's position. Well, the federal government's position is that marijuana-- or cannabis-- is a Schedule I narcotic. That is the federal government's position as of May 12, 2021. So if we're going to be arguing that the federal government's opinion should supersede the states, then we shouldn't be having this debate at all because the federal government has held firm in its position that cannabis is a Schedule I narcotic. Returning to the Attorney General's Opinion that was issued on August 1, 2019, that I believe outlines all of the

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reasons why LB474 is unconstitutional, we're in subsection (2), which is page 4 of the Opinion: The MCA would require that a producer of cannabis shall provide a reliable and ongoing supply of cannabis needed for the registry-- registry program. It would direct the Cannabis Enforcement Department to register and regulate a limited number of producers and all qualifying processors for the production and processing of all cannabis within Nebraska. The department would also be required to register a limited number of dispensaries for the dispensing and sale of all cannabis for medical use in the state. The MCA would direct the Nebraska State Patrol to assist in executing the MCA by conducting criminal background checks of industry participants. Additionally, the MCA would provide for the collection of fees by the Cannabis Enforcement Department, directing the new agency to collect an application fee of \$25,000 for dispensaries, an application fee of up to \$5,000 for producers or processors or for producers or processors in the tier allowed to cultivate the largest number of plants, an application fee of not more than \$25,000. The department shall establish an annual fee for producers in the tier allowed to cultivate the largest number of plants of not more than \$40,000, and an annual fee of not more than \$5,000 for producers not in such tier. Processors not licensed to perform solvent-based extractions on cannabis are subject to an annual fee of not more than \$5,000, while processors permitted to perform additional solvent-based extractions are subject to an annual fee of not more than \$40,000. The department shall establish an annual fee for dispensaries of not more than \$25,000. Laboratories are to be assessed an annual fee not to exceed \$15,000. In sum, the MCA would, through its extensive licensure and regulatory scheme, place the state in the position of affirmatively facilitating the cultivation, processing, wholesale distribution, and retail sale of marijuana and marijuana products. Section III-- The U.S. Supreme Court's decision in *Gonzales v. Raich* establishes that state-level marijuana schemes like the Medical Cannabis Act are preempted by the CSA and therefore unconstitutional. The Supremacy Clause of the United States Constitution provides that: This--

HUGHES: One minute.

SLAMA: --Constitution,-- thank you, Mr. President-- and the laws of the United States which shall be made in the Pursuance thereof. . . shall be the supreme Law of the Land. . . any Thing in the Constitution or Laws of any State to the Contrary notwithstanding. As a consequence of this constitutional command, a state statute is void to the extent it conflicts with the federal statute-- if, for example, compliance with both federal and state regulations is a physical impossibility, or where the law, "stands as an obstacle to the

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accomplishment and execution of the full purposes and objectives of Congress." I'll return to this Opinion throughout the day. Again, I rise opposed to LB474. I do believe LB474 is unconstitutional. Thank you, Mr. President.

HUGHES: Thank you, Senator Slama. Senator Lowe, you're recognized.

LOWE: Thank you, Mr. President. And good morning, Nebraska. Good morning, Senators. Good morning, Senator Wishart. This bill is not a reflection on you yourself, because you are a good person. Marijuana-- botanical name: cannabis-- cannabis sativa. Other common street names: weed, pot, herb, bud, dope, spliff, reefer, grass, ganja, 420, chronic, Mary Jane, gangster, boom, skunk. There are over 200 street names for the plant. Thank you, Mr. President. This will not come as a surprise to anyone who is listening, but I am opposed to LB474. My opposition to this bill has long been standing, and I do not see any way that I will be able to support it. I have grave concerns when it comes to legalize-- the legalization of marijuana. Yes, even medical marijuana. This is my fifth year in the Legislature. For five years now, I have opposed any and all efforts at legalizing marijuana and medical marijuana. I have also opposed other bills that dealt with cannabis. I believe Senator Morfeld had a bill my first year or second year here that dealt with a cannabis study. The bill ended up as a Christmas tree bill in the Judiciary Committee. I liked every other bill in that tree, but I just could not bring myself to support that one bill, and voted no on it. I remember this because Senator-- Senator Morfeld and a few other senators wanted to know why I was one of the only few who voted no. I explained my reasoning for my votes, and it has made it pretty clear to my colleagues where I stand on this issue. There are several reasons why I have concerns with legalizing marijuana. And I am sure we will go into deeper conversations about this throughout the day. But here are a few of my concerns. Marijuana is far more potent today than what it was in the past. This has caused all sorts of problems in other states. There are long-term health consequences for people who have used a significant amount of marijuana. I have no doubt we will get into conversations about this and studies that have been done on both sides of the issue, for there is no control on how much you get. You can go from one dispensary to another. I have concerns about the testing procedures for individuals who may drive while impaired by medical marijuana. Another area of concern that I have is that we are preempting the Federal Drug Administration-- Administration in making those decisions. I believe that this is critical that the FDA reviews this subject before it is approved for use in the state of Nebraska. I still have major reservations about LB477 [SIC-- LB474] with the FDA approval, but it

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would go a long way in helping me with this bill if guidelines were set by the FDA. Now I know some here may not fully believe my last few statements, given all I have said already today and my past opposition. But to those people, I would ask that they look at Senator Ben Hansen's LB301. This bill deals with several topics, but it also includes a certain kind of cannabis that has been already approved by the FDA. I know LB301 is important to a lot of people.

HUGHES: One minute.

LOWE: And-- thank you, Mr. President-- and there are many people attempting to find a way to pass LB301. I know this because those people have reached out to me and my office to discuss the bill because of my usual opposition to measures that would preemptively approve marijuana use in Nebraska. After thinking about this and talking to people about this, I have no opposition to LB301, quite simply because the FDA has done the research into the subject matter, and they have approved it. When it comes to medical marijuana, we have a long way to go before it is approved by the FDA. So until we see approval from the FDA, there is simply no way that I will support this bill or any other bill like it. I am sure my colleagues will think it is interesting that I am saying we should wait for the federal agency to respond to this or, quite frankly, anything else. But I believe in federalism. I believe it makes sense in many areas.

HUGHES: Time, Senator.

LOWE: Thank you, Mr. President.

HUGHES: Thank you, Senator Lowe. Senator Blood, you're recognized.

BLOOD: Thank you, Mr. President. Fellow Senators, friends all, I stand opposed to the bracket motion, but in favor of both the amendment and the-- and the underlying bill. Before I start, I'd like to address Senator Slama's comments at the very beginning of this debate and her tongue-in-cheek comment about the AG's Opinion on a bill that was from two years ago-- I'd like to add, not this year's bill-- and LB236, where she thought that it might be inappropriate for our peers to argue based on the AG's Opinion on today's bill-- or on LB236. I think that you cannot argue an AG's Opinion from two years ago, that we should have had a new opinion for this bill. And I'm going to leave it at that. So listening to Senator Slama and to Senator Morfeld, in reference to the AG's Opinion, I looked it up and he cited a 2005 U.S. Supreme Court decision from California. So when you read that decision, it does not bar states from enacting medical marijuana laws. I'm not a lawyer, but I can read. If, indeed, that ruling preempted

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state medical cannabis laws, it's pretty logical that there would not be the hundreds of legal medical cannabis storefronts in California, let alone across the United States. So if you look at something more current, like *Murphy v. NCAA*, it clearly states that Congress cannot dictate what states may do legislatively. This is because in the United States-- and we've discussed it a little bit already-- we have something called dual sovereignty. And it's-- that means that state governments decide state laws. And I actually think that that would be a more recent court case that we could apply to today's debate. So moving forward, first and foremost, I want to apologize. I want to apologize to my veterans with chronic pain, TBI, and PTSD, my family, some of whom are here today, who have loved ones that suffer from seizures, MS, cancer, AIDS, glaucoma, and more. I'm sorry that propaganda and misinformation is preventing you from getting the treatment that you deserve. Research has shown that medical cannabis can alleviate the opioid addiction crisis among veterans. An estimated 65 percent of veterans suffer from chronic pain and are twice as likely to die from an accidental overdose caused by prescription opiates, more so than non-veterans. So 65 percent of the veterans that suffer from chronic pain are twice as likely to die. Our veterans are looking for alternatives. In fact, the VA has made it clear that veterans who use cannabis are not in danger of losing VA benefits, and that's because it's safe. And it's safe for those veterans to discuss the use of cannabis with VA staff and discuss state-licensed use as part of their treatment. And so I stand here today again to say, first and foremost, I apologize. I apologize that we are again debating what is a better bill than the first bill that was on the floor when I came to the Legislature. And I have to be very honest, I did not support it, not because of the topic, but because I did not think the mechanics of the bill worked. And I got a lot of abuse for that. But when the bills come forward that do work,--

HUGHES: One minute.

BLOOD: --and when the bills that come forward are going to provide relief for the many veterans that are in my district and Senator Sanders district, this is a bill that I'm going to support. And I am going to continue to support it for the next three years, but I'm guessing that it's going to get approved on the ballot, and we'll never have to debate it again. Thank you, Mr. President.

HUGHES: Thank you, Senator Blood. Senator Clements, you're recognized.

CLEMENTS: Thank you, Mr. President. I received an email from my family physician, Dr. Richard Wurtz of Lincoln, Nebraska, and it was titled: Stop Trying to Approve Marijuana for Use. He's a family physician, has

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over 23 years of experience. And here's what he had to say about this: There's nothing medical about marijuana. It is dangerous. It's a gateway drug. Please focus on more important issues, such as: poverty, homelessness, literacy or prescription drug costs. I have read many, many studies regarding this. The marijuana derivative drugs dronabinol, THC, cannabinoid, and Epidiolex-- CBD cannabinoid already are FDA-approved. Shift your efforts to make those more affordable and more widely studied. They can be and are used for some of the indications that are mentioned. But sleep disorders and Parkinson's disease have safer, more effective drugs to treat them. Marijuana is not needed, but is desired because it is a hallucinogen. A plethora of data supports the association between marijuana use and psychosis, among other problems-- Journal of American Medical Association, May of 19-- May 2019, March 2020. Rheumatoid arthritis or fibromyalgia or multiple sclerosis or HIV. If the data that exists for marijuana as a therapeutic agent were to be applied to a drug-seeking, over-the-counter approval, it would not stand a chance. We also know that medical marijuana is not primarily used by people referenced, but by healthy individuals with less disabilities than the average population because it is a hallucinogen. Anyone can walk into a dispensary and get it. Even states that require prescriptions have providers materialize out of thin air, not present, who write them. Do you think that the medical marijuana dispensaries make millions of dollars from only those with chemo-induced nausea or those with seizures? The collective prevalence of these is much less than 0.1 percent of patients. Additionally, the National Comprehensive Clinical Network Practice Guidelines in Oncology for antinausea medications do not consider marijuana or its derivatives that are FDA-approved suitable for use. The new medicines available, namely 5-HT3 receptor antagonists, are the standard. The ballot initiatives are not brought by the medical community or patients, but by pro-legalization groups. Use your efforts for other good purposes, not to create a parallel crisis to the opioid crisis. That was Dr. Richard Wurtz, M.D., Holy Family Medical Associates of Lincoln, who's my family physician. And I think he does a very good job. Also, the American Medical Association policy I found, dated July 2019, says that the AMA believes that scientifically valid and well-controlled federal clinical trials are necessary to assess the safety and effectiveness of all new drugs, including cannabis, for medical use. Second, the AMA believes that cannabis for medical use should not be legalized through the state legislative or ballot initiative process. Third, AMA will develop model legislation requiring the following warning on all cannabis products,--

HUGHES: One minute.

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CLEMENTS: --not FDA approved-- thank you, Mr. President-- quote, the warning they suggest, is marijuana has a high potential for abuse. This product has not been approved by the Food and Drug Administration for preventing or treating any disease process. And so those were three points the American Medical Association voted on and said that they believe federal clinical trials are necessary before they would be able to recommend this for medical use. Thank you, Mr. President.

HUGHES: Thank you, Senator Clements. Senator Albrecht, you're recognized.

ALBRECHT: Thank you, Mr. President. Colleagues, I rise today in support of the bracket motion, and opposed to LB474 and AM824. You know, again, Senator Wishart, I know when you-- when you feel so very strongly and you've worked so hard on an issue, I can feel your passion. And I understand you've worked very hard on this. And a lot of us have-- have bills like that. And some go and some don't. And I'm just --I'm just still where I was the past few years, in total opposition. I did some research on the FDA government Web site. Again, the FDA has not approved CBD products. And not only have they not approved any of the CBD products except one prescription drug, it says, to treat a rare and severe forms of seizures, disorders in children. It is still unclear whether the CBD has any other benefits other than the one approved prescription drug, that CBD products have not been evaluated or approved by the FDA for use as drugs. This means that we just don't know if they're safe and effective to treat particular diseases. If any dosage considered would be safe-- we don't really know what dosage as of yet-- how could they interact with other drugs or foods and whether they have dangerous side effects or other safety concerns? That's where I stand that I could not comfortably say yes to something like this, not knowing if we might do harm to a child, that they overdose on too much of this. And I was reading ahead that Senator Flood wants our Nebraska State Patrol to have the dispensary. I can't even imagine that they would want to take something like this on. It's evident that you've got the pharmacies or some of them thinking that they would be able to do something like this for the people, not knowing what our health issues are, not knowing what-- whether we should or shouldn't be able to take the drug. I mean, to me, this is where we, as-- as policymakers, have to know and understand. Are you ready to do that? Are you ready to say to Nebraskans that, hey, let's do this? I had a sister-in-law that died of cancer. They asked her, in her final hours, if she'd like to have marijuana. I mean, they asked her that medically. Now, I don't know. How could they ask her something like that if it's not legal? We also have doctors in our area that I've talked to that say: Hey, everyone

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gets it in the mail already. That's not even right. But if you go to a doctor after you've actually had-- used things like this, they don't know how much you have in your system. They don't know if you're in cardiac arrest, what they can do for you because you're on something like this that you think is going to make you feel better, give you more energy. You know, another thing I looked at, because I'm all about the mommy thing, right-- and the babies, under the same Web site, it talked about: What do we know about the effects of marijuana use during pregnancy and breastfeeding? There's many potential negative health effects from using marijuana and other products containing the THC during pregnancy and while breastfeeding. So the Surgeon General recently advised consumers that marijuana use during pregnancy may affect fetal brain development because THC can enter the fetal brain from the mother's bloodstream. The Surgeon General also advised that marijuana may increase the risk of a newborn with a low birth weight. Research also suggests increased risk of premature birth--

HUGHES: One minute.

ALBRECHT: --and potential stillbirth. While breastfeeding, it's important to know that breast milk can contain THC for up to six days after use. This THC may affect newborn babies' brain development and result in hyperactivity, more cognitive-- poor cognitive function, and other long-term consequences. Additionally, marijuana smoke contains many of the same harmful components as tobacco smoke. Neither marijuana nor tobacco products should be smoked around a baby or children. You know, again, you say that, well, this isn't going to have the THC, everything is going to be fine. But all of this to me is a gateway to-- to the rest of the-- the programs. And I'm not-- I'm not going to stand here and-- and develop a policy that I just don't know what it's going to do to people. If the FDA wants to approve this, and it comes down--

HUGHES: Time, Senator.

ALBRECHT: --from that level-- thank you, sir.

HUGHES: Thank you, Senator Albrecht. Senator Murman, you're recognized.

MURMAN: Thank you, Mr. President. And good morning, Nebraskans. Today I stand in-- also in opposition to LB474 and AM824. But I would like to thank Senator Wishart for all of her hard work on this issue. I know she's worked on it for a long time. And I do know that marijuana does have some medical benefits. And I do support the use of the

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federally-approved-- of what's been federally approved. And my opposition is not a political one. I do have constituents and supporters on both sides of the issue. But I would like to focus on a particular unintended consequence, one of which-- or some of which have already been mentioned by Senator Albrecht and others. And I would like to ask Senator Wishart a few questions. Would she yield?

HUGHES: Senator Wishart, will you yield?

WISHART: I would be happy to.

MURMAN: Senator Wishart, what constitutes operating a motor vehicle while under the influence of cannabis?

WISHART: So what that means is that if-- let's say somebody is driving impaired and they're pulled over. Law enforcement would have the ability to do an impairment test on that person, similar to the way that you would do for alcohol. And then they could take a blood test to look at the level of THC in that person's system.

MURMAN: OK, so if a law enforcement officer pulls over an individual for speeding or erratic driving, you said they would take a blood test and could do some physical tests. But really, how would they determine if-- if the person is under the influence of cannabis?

WISHART: Well, first of all, Senator Murman, I find it hard to believe someone would pull someone over who's on the influence of cannabis for speeding. But the-- the same way that you do with any other medication that a person is on. If you'll just go with me for a second, the most dangerous drug in the morning, from like 6:00 a.m. to 8:00 a.m. in the morning, that causes fatal traffic accidents, is sleep medications. And so law enforcement have to deal with different medications that people are on, and they'll deal with this the same way. And a lot of it is about personal responsibility when it comes down to it.

MURMAN: OK, thank you. Well, I-- I suppose you could also be pulled over for driving too slow. I know my wife drives around looking at houses. She's been stopped before because she's driving too slow. But thank you. Well, how reliable, really, are these tests that-- to determine impairment from marijuana?

WISHART: Very reliable. My husband is a former law enforcement, when he was in training, he went through using me as a test case for using-- doing impairment tests on people. And then you can test the amount of THC in a person's bloodstream.

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MURMAN: OK. I have heard from law enforcement also, that it's difficult to test for and it takes a long time. Did-- do you have a comment on that?

WISHART: Well, I would just say that there are some people where it's worth that time, because they have a medical condition where this would be helpful.

MURMAN: OK. Thank you, Senator Wishart. According to a recently issued U.S. Senate bipartisan report on narcotics control, an increasing number of states are finding that cannabis is the most commonly detected drug in impaired drivers.

HUGHES: One minute.

MURMAN: In Colorado, between 2013 and 2017, the number of drivers involved in fatal car accidents who tested positive for either cannabinoids only or cannabinoids in combination with other substances increased by 183 percent. In Massachusetts, 31 percent of fatally injured drivers between 2013 and 2017 tested positive for cannabis, making it the most prevalent drug detected. An increasing number of states are finding that cannabis is the most commonly detected drug in impaired drivers. Between 1999 and 2010, cannabis was the most frequently detected drug among drivers in six states. Moreover, the prevalence of cannabis in these drivers increased at a rate of 190 percent, from 4.2 percent to 12.2 percent. All of the states above prohibited driving while under the influence of cannabis, notwithstanding the language in Section 28 of LB474.

HUGHES: Time, Senator.

MURMAN: Thank you.

HUGHES: Thank you, Senator Murman and Senator Wishart. Senator Lathrop, you're recognized.

LATHROP: Thank you, Mr. President. Colleagues, good morning once again. You have heard from those this morning who would support this bill because of the number of people it would help. I share that view, but I stand up today to talk about another reason why we should pass this bill. Three years ago, when I came back, my first year as Chair of the Judiciary Committee, Senator Wishart introduced a bill for medical marijuana, and it was pretty broad-ranging. And frankly, I had-- I saw in the paper where a number of people were critical. This is effectively legalizing marijuana. And I had the committee hearing. And frankly, after I got done in the committee hearing, I'm like

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they're right. And what we did as a Judiciary Committee is-- honestly, we just said this thing isn't coming out of the Judiciary Committee till you tighten it up, and it looks more like Minnesota, where they treat this like a drug. And it's not this hokey medical marijuana where you go to some guy in a strip mall who's selling the stuff and happens to have an MD, barely. And he writes a scrip and then sells just some dope. And-- and Senator Wishart spent months. I know Senator DeBoer was involved in that, Neal Erickson was involved in that from my office, and many others, including working with the Medical Association to treat this like a drug. And that's what we have. That's what the bill has been distilled to. Now we have an opportunity. We have an opportunity to have some control over what happens with medical marijuana. This almost made it on the ballot. And-- and I've seen a lot of ballot initiatives in my time. Some of them are a full-blown, full-court press. It's hard to get it on the ballot, but they finally make it and they make it by a-- just, you know, barely make it under the wire. And some of them, for example, repealing the repeal of the death penalty. That didn't take much work. You show up at the county fair, and there's a line of people ready to-- ready to sign that-- that one. Medical marijuana was a layup. It was not that hard. Now I wasn't out collecting the signatures, but this was not hard to get on the ballot. And the lesson learned after the Supreme Court decided three ballot initiative cases is: simple is better. And what's that mean? This-- we have an opportunity to regulate this. All of-- all of this standing up and talking about, I'm afraid of this stuff, and this is terrible, and it's going to lead to all kinds of bad things-- colleagues, it's time that we accept the responsibility to move this and regulate it, because if we don't, what we're going to have is an amendment to our Constitution that is simple, straightforward, and won't permit us the regulation we'd like to do, and we have the opportunity to do today. So there are many reasons. If you've had an opportunity to hear from the people who benefit from this, the people that want it for their kids who suffer from one malady or another, that this may benefit them, as a body-- as a body. Senator Hilgers used a line yesterday or the day before that, this would be a black--

HUGHES: One minute.

LATHROP: --mark on the Legislature. Did you say one minute?

HUGHES: Yes.

LATHROP: Yep, got it-- that this is going to be. We'll look back on this as an opportunity missed because, when this gets on the ballot, we will not have control of it. And there are states that have

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experienced this: Oklahoma, South Dakota. You look at what happened when their legislature failed to act, failed to take advantage of the opportunity to act and to regulate, and it-- and it happened by petition initiative. It's the Wild West down there. It's the Wild West. We can control this, we can regulate it. This is a far better approach, and it's time we accept the fact that this is the last train out of town if you want to do some regulating of this. Otherwise it will be out of our hands, and we will regret that we didn't take advantage of the opportunity this bill gave us.

HUGHES: Time, Senator. Thank you, Senator Lathrop. Senator Machaela Cavanaugh, you're recognized.

M. CAVANAUGH: Thank you, Mr. President. Good morning, colleagues. I stand in support of LB474, AM824, and in opposition to MO65. I am grateful to Senator Wishart for continuing to advocate for medicinal marijuana. It's an extremely important issue that is going to change the lives of so many Nebraskans, and make it so they don't have to leave the state to get the treatment that they need for their various ailments, that this can very much help impact their lives. And I would yield the remainder of my time to Senator Wishart, if she would like it.

HUGHES: Senator Wishart, 4:15.

WISHART: Thank you, Mr. President. Well, this has been a good discussion today. First of all, I wanted to say that the young girl that Senator McCollister-- excuse me, Senator McDonnell was talking about, her name's Brooke. Her mom's name is Shari Lawlor. They've been working on this issue a lot longer than I have, before me with Senator Tommy Garrett. And she is a face, as well as all the people that are standing out, looking in on us today, are the face of patients who would benefit from having access. Much of the conversation we've heard today-- a lot of the things that senators have said, because of how restrictive my bill is, don't apply. For example, you're not allowed to be recommended cannabis if you're pregnant or breastfeeding, period. You're not allowed to smoke cannabis, period. Problem solved. Secondly, the idea of traffic fatalities being increased, in medical cannabis states, is unequivocally untrue. There is no data, in states where cannabis is legalized for medical purposes, to show any causation in increased traffic accidents, period. It's not true. And it's easy to know why it's not true, because no state that has legalized cannabis for medical purposes has repealed that legalization, not one state. When I was out collecting signatures for this ballot initiative-- because this wasn't like hiring a bunch of people from out of state to come in and quickly collect-- this was

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done by hundreds of people in our state. When I was out collecting in some of the most rural parts of Nebraska, I'd set up at a Casey's with my girlfriend all day, and we'd text the entire town-- of Hamilton County, for example, we were in Aurora. And we would have people come, the majority of people, 50 and older, they would come, they would drive up, and they would talk to us about their stories, about they themselves, who are currently using cannabis in Nebraska illegally for battling their cancer. One woman talked about the fact that she illegally got her father cannabis. He's a veteran, a Vietnam veteran. She got him cannabis. It's the first time he's ever slept a full night in his life. People are already doing this, colleagues. They are already using cannabis illegally, because every way you go-- north, south, east, west-- it's legal for medical purposes. Yet in Nebraska, we treat these same people like--

HUGHES: One minute.

WISHART: --they're criminals. That's what we're going to choose to do today. We're going to choose to tell that person who was able to beat pancreatic cancer-- beat pancreatic cancer, a death sentence, because they were able to use cannabis to keep an appetite. So they didn't waste away like so many people do when they're fighting cancer. A person told me that-- sat in my office and told me that. And we're going to say no to that today. We're going to say: Here, you're a criminal, sorry about that. We just can't possibly legalize something that every other state but two states-- and next door, Kansas, because they have a supportive governor, is going to support. We're going to wake up after the session and Kansas is going to have--

HUGHES: Time, Senator.

WISHART: --legalized medical cannabis.

HUGHES: Thank you, Senator Wishart and Machaela Cavanaugh. Senator Arch, you're recognized.

ARCH: Thank you, Mr. President. I will not be supporting LB474 today, and I want to explain my reasoning. I want to first summarize my objection, and then I'll lay out my thinking for my position against this bill. This is a very serious debate because decisions on both sides have consequences. We know that there's suffering in this community, that very much want the chance, the hope that-- that they believe medicinal marijuana could provide. And-- and it's a very serious issue. Senator Wishart has painstakingly developed a very detailed bill to prescribe a process for controlling the dispensing of medicinal marijuana and to put parameters in place for the use of

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medicinal marijuana. But my objection is much more fundamental than getting the process or parameters correct. As I see it, the decision before us today is whether or not the Legislature will endorse the distribution and use of a Schedule I drug in Nebraska by providing for its use and dispensing. By providing for the use and distribution of marijuana for medicinal purposes, we are de facto endorsing its use under certain conditions, declaring it to be safe and effective from our perspective. First, I want to talk about effectiveness. We all know that marijuana-- cannabis-- is listed as a Schedule I drug by the Food and Drug Administration. According to the FDA Web site, "Schedule I drugs, substances, or chemicals are defined as drugs with no currently accepted medical use and a high potential for abuse." Some examples of Schedule I drugs are heroin, LSD, cannabis, ecstasy, methaqualone and peyote. End of quote. Would we be having this discussion about any other Schedule I drug-- LSD, ecstasy? I don't-- I don't think so, at least not today. So a yes vote on LB474 is a vote to declare that we disagree with the FDA or at least ignore their position. In our-- and in our judgment, we believe there is a "accepted" medical use. I'm not sure on what basis I would make such a decision. I know I do not have the scientific credentials to make that call on behalf of our citizens. The difficulty is that there appears to be anecdotal evidence that cannabis may be helpful to alleviate pain or other symptoms of certain medical conditions. I say anecdotal because we know the rigorous scientific method of the FDA to receive approval has not been completed for cannabis, with the exception of a handful of FDA-approved medications. And cannabis is not presently approved for use by the FDA for any condition. Let me digress for a moment in anticipation of a question. We've had discussions on this floor about the "off-label" use of drugs. This is not the case with cannabis. According to the FDA Web-site, "It is important to know that before a drug can be approved, a company must submit clinical data and other information to FDA for review. The company must show that the drug is safe and effective for its intended uses. Safe does not mean that the drug has no side effects. Instead, it means the FDA has determined the benefits of using the drug for a particular use outweigh the potential risks." They go on to say, "From the FDA perspective, once the FDA approves a drug, healthcare providers generally may prescribe the drug for an unapproved use when they judge that it is medically appropriate for their patient." In the case of cannabis, there is no FDA-approved use, so this would not be a case of off-label use. On April 9, 2021, the AMA published an article by its president, Dr. Susan Bailey, regarding the use of cannabis for medical use. And I would like to read you some excerpts from the article. And that article is entitled "Questions Still Surround Cannabis Use and Public Health." And I quote: Public attitudes about legalizing the use

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of cannabis have changed dramatically over the last 30 years. Recent national polling suggests that roughly two-thirds--

HUGHES: One minute.

ARCH: --of Americans favor legalizing cannabis for adult use, while even more support legalizing it for medical use. Adult use of cannabis is now legal in 16 states, and the tax revenue generated by its sale is calculated in the billions of dollars. But even so, significant public health and safety questions remain. The National Academy of Sciences, Engineering and Medicine maintains that the medicinal benefits of cannabis are largely unknown, and that its use is associated with lower birth weight, an increased number of car accidents, and other risks. The U.S. Surgeon General has also issued warnings about health risks tied to cannabis use. I will continue my comments when I have more time. Thank you.

HUGHES: Thank you, Senator Arch. Senator Erdman, you're recognized.

ERDMAN: Thank you, Mr. President. And good morning. I would echo what Senator Arch opened with when he said this is a very serious discussion, and I would agree that that is, in fact, the case. So we have-- we have talked about this several times before, and I have read a good portion of the bill, trying to figure out what it will do. But one of the issues, I think it grants immunity to those who prescribe the drug. And I will ask Senator Wishart a question about that. But one issue that I think we need to be very clear on is this: You will not get a prescription to buy marijuana. There is no such thing as a marijuana prescription because, you see, if you go to the doctor to get a prescription for a certain medication, you take that to Walgreens and they fill it. But you can't take it to CVS and they fill it, and to your local pharmacy and they fill it; you only get it once. But with marijuana, you'll get a permission slip to buy marijuana at a certain quantity or whatever they describe-- prescribe. And you can go from one dispensary to the next, and buy that same amount at every dispensary. As long as you have the money, you can continue to fill that permission slip. That is a problem. And so that is one of the concerns I have about this bill. The other issue that I have-- and I would ask Senator Wishart a question if she would yield.

HUGHES: Senator Wishart, will you yield?

WISHART: Yes.

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ERDMAN: Senator Wishart, thank you for doing that. In your original introduced copy, on page 18, if you'd like to look that up, I have a question about a section there.

WISHART: OK.

ERDMAN: OK. Page 18, line 6, paragraph (8) [SIC-- (9)], it says a participating healthcare practitioner shall be subject to a-- shall not be subject to arrest or penalty in any manner, denied at any right or privilege, including, but not limited to civil penalty or disciplinary action by the Department of Health and Human Services. So I could go on and read the rest of that, but here's my question. Does this grant immunity to those people who prescribe medical marijuana or who dispense it? Does not grant them immunity from being sued if something-- say the person buying it runs into someone in their vehicle and kills them, does that grant them immunity from-- from being held liable?

WISHART: No.

ERDMAN: What does it do?

WISHART: This ensures that a doctor or a dispensary is able to legally recommend somebody cannabis, and make sure they have cannabis, following within the regulatory system we've set up. There is no immunity granted to somebody if they dispense somebody who doesn't have a card, the wrong amount of cannabis, or if a doctor is not following the rules within this system.

ERDMAN: So why does it say they are not subject to arrest, prosecution, penalty in any manner, or denied the right or privilege, including, but not limited to, civil penalty or discipline or action by the Department of Health and Human Services, if they're not granting immunity?

WISHART: Because we are talking about an interplay between a federal rule and states' rights. And we want to ensure that, when we set up the system in our state, that we are saying, yes, doctors, we are allowing you to do this, and we will protect you from any kind of lawsuit that would come for doing something that, on the federal level, it's still scheduled as a Schedule I drug.

HUGHES: One minute.

ERDMAN: OK. According to a federal law, marijuana is illegal. Is that correct?

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WISHART: Say that again, Senator.

ERDMAN: According to federal law, marijuana is an illegal substance. Is that correct?

WISHART: According to federal law, it is a Schedule I.

ERDMAN: OK. So my last question before my time runs out. Here's my last question. If we would pass this LB474, would you then guarantee us that you won't bring a petition next November 22, 2022, for recreational marijuana?

WISHART: I personally will not be bringing any petition if we pass this legislation.

ERDMAN: Will you be involved in one if there is one?

WISHART: I personally will not be involved in a petition if we pass this legislation.

ERDMAN: All right. Thank you.

HUGHES: Thank you, Senator Erdman and Senator Wishart. Senator Briese, you're recognized.

BRIESE: Thank you, Mr. President. And I would yield my time to Senator Slama.

HUGHES: Senator Slama, 4:54.

SLAMA: Thank you, Mr. President, and thank you, Senator Briese. I just wanted to take some time, before we get back into the 2019 Attorney General's Opinion, to talk about a couple of points that have been brought up on the floor. Senator Morfeld's rebuttal to my argument earlier was-- it seems to be based on a core disagreement here on the logistics of administrative enforcement discretion and what that means, which I think it'd be very valuable to double back and address that later, once we dispose of the constitutionality argument that I'm dealing with now. And I think that's a valuable discussion to have. Senator Blood's point as to why are we referencing a two-year-old Attorney General's Opinion on this issue, and the reason why the 2019 Opinion on LB110 is just as relevant to LB474 here is because the-- the Opinion references the same core issue of whether the-- in that case it was the MCA-- but whether or not this medical marijuana bill, if enacted, would be preempted by the Federal Controlled Substances Act, the money laundering statutes, the unlicensed money transmitter statutes, or the Bank Secrecy Act, it gets to the exact same core

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issue, which is why I did not pursue an Attorney General's Opinion in this year, because it's already been disposed of in-- in an Opinion that addresses all of these core issues, and gets to the core of why I think that LB474 is unconstitutional. So I'll return to this Attorney General's Opinion now. And I do think it is important to get this in the record in full as we start out today's robust debate, because it does lay out the framework for how LB474, in its current form, is, under my opinion, and similar to a Nebraska Attorney General's Opinion on similar legislation, unconstitutional. So this is page 5, a few paragraphs down: In 1996, California voters passed Proposition 215, known as the Compassionate Use Act. Under this act, seriously ill California residents were allowed to access marijuana for medical purposes. The act exempted from criminal prosecution patients and their primary caregivers who possessed or cultivated marijuana for medicinal purposes with the recommendation or approval of a physician. The act required that the mari-- that the marijuana that was being grown by the patient or caregiver be used only for the patient's personal use. The California scheme was thus a purely noncommercial, compassionate use-based regime. After DEA agents raided the homes of two seriously ill Californians who were in full compliance with the California Act, those Californians brought suit, seeking injunctive and declaratory relief prohibiting the enforcement of the federal CSA to the extent it prevents them from possessing, obtaining or manufacturing cannabis for their personal medical use. The case made its way to the Supreme Court, where the federal government argued that marijuana was a drug with significant potential for abuse and dependence, and was a fungible commodity that is regularly bought and sold in an interstate market. That market, the federal government explained, like the market for numerous other drugs having a significant potential for abuse and dependence, is comprehensively regulated by the CSA. Because Congress explicitly found that marijuana has no currently accepted medical use in treatment in the United States, and had categorized marijuana as a Schedule I drug, the CSA was enacted in order to eradicate the market for such drugs. As such, the federal government argued the CSA makes it unlawful to manufacture, distribute, dispense or possess any--

HUGHES: One minute.

SLAMA: --Schedule I drug for any purpose, medical or otherwise, except as part of a strictly controlled research project. Thank you, Mr. President. Nor, argued the federal government, was it relevant that respondents' conduct may be lawful under state law because, under the Supremacy Clause, the state law cannot insulate conduct from the exercise of Congress's enumerated powers. Here, argued the government,

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regulation of intrastate activities is an essential part of Congress's regulation of the interstate drug market and Congress's goal of achieving a comprehensive and uniform system that guards against drug abuse and diversion and permits manufacturing and distribution for legitimate medical uses only under carefully prescribed safeguards in the CSA itself. And we'll return to this brief as soon as I get back on the mike. Thank you, Mr. President.

HUGHES: Thank you, Senator Slama. Senator Wishart, you're recognized.

WISHART: Thank you, Mr. President. First of all, colleagues, let me remind you, we are talking about the cannabis plant and its medical values, which there is now research to show that there are medical values to cannabis. And all of the conditions that I have listed within my cannabis bill, my medical cannabis bill, LB474, are conditions that I have gone and spent countless hours with the Nebraska Medical Association. And each one of those conditions, the doctors' association said there is evidence that cannabis-- cannabis is beneficial to that person. There's evidence it's beneficial, yet we want to continue to deny somebody access to this whole plant. When you look at the toxicity level of cannabis, compared to so many of the other pills that are prescribed, it-- there is no comparison. Less than 9 percent of people who consume cannabis over a period of time will become addicted to it. The addiction level for opioids-- 23 percent. Think about that. We have an opportunity to provide a tool for doctors to provide to their patients, for similar conditions that they would be prescribing opiates. And it has a far less addictive quality. And on top of that, when you look at the medical research as to somebody-- say they do get addicted to cannabis. You know what happens in withdrawal? You have a really bad week and a lot of headaches, and you might be pretty crabby. That's what happens when people withdraw from the cannabis plant. You know what happens when people withdraw from alcohol addiction? Some of them die. That's how high alcohol's addictive quality is. You know what happens to people when they withdraw with opiates-- from opiates? Some of them get very sick. With cannabis about a week, two weeks-- headache. I mean, this is the scientific research that has been done to show what a withdrawal is from cannabis. And yet we're going to call this a dangerous drug, where it's fully legal in Canada. In Israel, they're doing incredible studies. They're one of the leading countries, in terms of the medical efficacy of cannabis. And then you look at every other state. But here in Nebraska, we've decided that the veteran who would benefit, that the mom with the kid with epilepsy, that the person battling cancer, that the person with MS or Parkinson's, where they take a drop of cannabis and it literally makes them be able to

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walk and talk again, and we're going to say: No, you're going to be a criminal. As for the FDA and the federal government argument, honestly, this is why people can't stand government. It really is. The reason we can't get FDA approval of the whole plant cannabis is because the DEA has scheduled it as a Schedule I,--

DeBOER: One minute.

WISHART: --and the DEA, their decision is entirely political and influenced by politics. And so we're just stuck in this vicious cycle. So states have exercised their rights, our 10th Amendment, and said: You know what? We are going to take it into our own hands to relieve the suffering of people with a plant-based medication that works. Come on, you guys. It's time Nebraska does it. Thank [INAUDIBLE].

DeBOER: Thank you, Senator Wishart. Senator Hilgers, you're recognized.

HILGERS: Thank you, Madam President. Good morning, colleagues. I rise in opposition to LB474, and in support of the bracket motion. And I-- and I want to-- I think Senator Wishart's comments at the tail end of her time in the mike, I think it's a good segue to my comments here this morning. I think, as we make a record here, I think this is an important thing that I want to make sure gets on the record as we discuss what-- who is making the decision here. 'Cause what I heard from Senator Wishart, she said, you know, we should, as Nebraskans-- this is-- we will take this away from them. Well, the truth is, colleagues, this decision-- and I think Senator Wishart was touching on really what is the core issue-- the decision here is not in our hands. I want to be very clear. And the core of my opposition is that we-- this is not in our hands as a state Legislature. And I'll walk through the analysis why, and I want to rebut at the end of that some of the comments made from my good friends, Senator Morfeld, and from Senator Blood, which I think adds-- conflate a few different issues but don't go to, really, the core analysis. And I will--and over the course of this debate, I may not engage very often, but on this particular point, I think this is critical to get on the record. I am the biggest federalist that you will find, I think, in this body. I'm the biggest states' rights person that you will find in this body, but I believe deeply in the U.S. Constitution. And I do-- do believe that in certain explicit areas, the U.S. Constitution does provide specific powers to Congress. One of those is their commerce power. And the U.S. Constitution also says that in the-- in-- in the-- where the federal law conflicts with state law, federal law is supreme. That's something that we should all accept. It's in the U.S. Constitution: Article VI, Clause 2. So in the event that they conflict, federal law-- federal

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law controls. And state law and states can't act within certain areas of authority. Now where the federal-- federal government hasn't, pursuant to an explicit authorization, acted in a way that would conflict with something that we want to do, then we ought to be able to do almost anything we want. But in this case, the federal government has acted. And the strength of the Attorney General's position isn't from the year that it was issued. It isn't necessarily even from who issued it. It's not about whether the-- the state prosecutors right over some federal prosecutor's position. The strength of the Attorney General's reasoning-- or from the Opinion-- is from the reasoning, which is laid out incredibly clearly. And I'll lay it out as follows: First, Supremacy Clause, where the federal government acts and conflicts with state-- with what the state would like to do. The state can't do something or permit what federal government prohibits. Second, controlled substances. The CSA, the Controlled Substances Act, has very clearly prohibited, for any purpose whatsoever, medicinal or otherwise, Schedule I drugs, the use or sale of Schedule I drugs. Third, Schedule I drugs include marijuana. Fourth, the United States Supreme Court, the ultimate arbiter of these questions, has found in the Gonzales decision, that this was both a lawful use, under the Commerce Clause, of congressional authority, and it conflicts with the state-- state regime in California that allowed for medicinal use. One, two, three, four. That analysis, colleagues-- that reasoning, colleagues, applies here-- directly applies here, unassailably applies here. In my view, that analysis means we can't-- we cannot act. Now the counterarguments that-- there are-- there are a few. One that I heard from Senator Morfeld, which is: hey, you know, there's a case where a federal prosecutor or a federal government-- Department of Justice said we're not going to-- we're not going to make that argument. Now I will tell you, the political branches sometimes take different positions. And when the Trump administration gave way to the Biden administration, there were, throughout the country, filings in courts that switched positions on a dime. And in my view,--

DeBOER: One minute.

HILGERS: Thank you, Madam President. That is a-- I think that is malfeasance for them to have done that. The law is the law, but nevertheless, that's happened. But what a federal prosecutor or a federal lawyer might say about the Gonzales decision or the CSA or the Supremacy Clause, I actually don't really care. It isn't binding on this state. Unless the reasoning undercuts the reasoning, then we can talk, but this-- those are political decisions that have been made. The-- the citation to Murphy from Senator Blood, those are apples and

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oranges, colleagues. This deals with preemption, the conflict between laws. Murphy dealt with commandeering-- telling states to do something, federal government saying to the state you have-- you can or cannot do something. That is a totally different context that has absolutely no bearing here. Senator Wishart is right about one thing in particular. The federal government has failed. What they should do is enforce the law, first and foremost. Secondly, they ought to authorize research if there are true medicinal purposes that this--

DeBOER: Time, Senator.

HILGERS: Thank you, Madam President.

DeBOER: Thank you, Senator Hilgers. Senator Lindstrom, you're recognized.

LINDSTROM: Thank you, Madam President, and good morning, colleagues. I rise in opposition to the bracket motion, and support of LB474 and AM824. It was discussed about the federal government, and I would say if the federal government is engaged in this, they've been doing a terrible job 'cause looking at the map here, we are one of three states that don't have any type of provisions. I think Senator Wishart alluded to this, that in Kansas, just on May 6, there was a bill that's moving forward, somewhat similar to Wishart's-- Senator Wishart's bill, that was 79-42 out of the house, and it was a Republican-led initiative. So I think people understand that this is a-- is an issue that's important and something that is a-- very much a states' rights issue that needs to be taken up. And I-- I do find it interesting that some of the opposition discusses states' rights and is opposed to this bill, but then tomorrow, when we suspend the rules for a convention of states, they will be supportive. You know, my-- my issue with this bill is a couple of different things that I've experienced over the last several years. We voted on this bill back in 2015, in my first year, when Senator Garrett brought the bill. And I voted for it then-- probably didn't have as good of an understanding as I do now, and-- and life experiences that I have now. Being through two elections, and-- and walking door to door, and speaking with individuals, I never had one person say they were opposed to medicinal cannabis. And I fall in the category similar to Senator McDonnell, where-- and probably many others in this body that are not in favor of recreational but can see the benefits of medicinal cannabis. And one of those-- and why I came to that conclusion was during that time I had knocked on numerous doors, and a couple people that I had met had served in our military and had PTSD. And that was the number one issue that they had brought to me in that-- in that-- in our discussion at the door was: Where do you-- where or do you sit on this issue? And I

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could see the trauma that was going on inside of their head. And-- and I'll be honest, there was one door where I could actually-- you know, you could smell marijuana coming from the door. And-- and the other part of it that segues into this is-- is my experience over the last several years dealing with the prescription drug monitoring system and opioid abuse. I have a family member who has struggled with opioid abuse, and that was an issue that they had first gotten into with a-- with a back injury. Well, that led to harder drugs, harder opioids such as heroin. And I saw the effects of opioids. Senator Howard had a similar experience, and then that's what brought us together to start working on those issues with the opioids, and the ramifications of what can happen with prescription drugs versus medicinal cannabis. And so if I'm weighing the options as to-- OK, we-- this is going to happen. This ballot initiative is going to happen; it's going to pass. We're going to be dealing with it, similar to the gambling bill. We will lose most of the control, as Senator Lathrop spoke about. We can put in place the parameters that this is medicinal cannabis and control what is going on in the state. That'd be my argument. OK, I'm going to support that. That seems to be reasonable. And then we took a look at what people have access to. And if their access is to opioids, I feel that there is much-- it's much more detrimental to get involved. And I've seen that. I've seen what opioids can do. I've seen the devastation that they can cause. I just haven't seen that with cannabis. And there's-- there's studies then. You can look at different states that have passed medicinal cannabis, and where you've seen the percentages drop from opioid abuse versus medicinal cannabis. Is it ideal? Do we want kids or anybody being addicted? No, but the fact of the matter is there is addiction. People would be addicted. People are addicted to gambling. They're addicted to alcohol. They are addicted to any sorts of things-- drugs, sex, a lot of different things people get addicted to. That doesn't mean that we just say put our hands up--

DeBOER: One minute.

LINDSTROM: --and put a prohibition. It is: How do we take the procedure or the policy and say, how does it benefit the vast majority of people in the state? And so I come down on that argument as in support of medicinal cannabis, and will-- will continue to do so. And I thank you for your time, colleagues, and I will yield my time back, Madam President. Thank you.

DeBOER: Thank you, Senator Lindstrom, Senator John Cavanaugh, you are recognized.

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J. CAVANAUGH: Thank you, Madam President. Well, I rise in opposition to the bracket motion and support of AM824 and LB474. And I would yield the remainder of my time to Senator Morfeld.

DeBOER: Senator Morfeld, you are yielded 4:46.

MORFELD: Thank you, Madam President and Senator Cavanaugh for yielding the time. I want to respond to a few different things, Senator Hilgers' arguments, particularly on the preemption issue. But then, also, I want to point out just a few different things that I've been hearing on the floor. One, all of the opponents that have been talking and touting the FDA's position on this and the federal law are the same people that signed on to LR107, the same people that signed on to LR107, assailing the federal government power, assailing federal government overreach, suddenly are in love with the federal government. So it's very ironic to see that, and it's very disheartening to hear that on the floor. So second, I also want to note that, when it comes to certain things that we like, we don't really care about the FDA. The death penalty drugs that we use to kill people-- not approved by the FDA for those uses. We don't mind that. Nobody is getting up and going: Shoot, man. We got to shut down our-- our death penalty system in this state. Those drugs aren't approved by the FDA for that use. Haven't heard that argument once from any of the people touting how important the FDA's schedules are and how important the federal law is. When we obtained those death penalty drugs illegally by the Governor, none of the people here are arguing about the importance of federal law and the FDA, got up on this floor and talked about the Governor violating the federal law and using drugs for a non-approved FDA purpose. Colleagues, when we're talking about a question of federal preemption, it is a question of congressional intent, it's a question of congressional intent and federal law. Now Senator Hilgers brings up a case that I believe was in 2004 or 2006-- I can't remember the year-- but I've read it a few times. But he fails to mention that since then, Congress has explicitly said: Department of Justice, do not enforce these laws. Do not enforce these laws unless it's under these circumstances, for instance, the funding-- marijuana is being used for some kind of trafficking purpose or something like that. They were very explicit about what parts of the law that Congress was allowing the federal government, the Department of Justice, to be able to enforce, if a state had legalized. And it's just odd that we're talking about, oh, my gosh, we can't violate federal law. And it's just it would lead to all these problems and chaos when, literally, almost every single other state has legalized marijuana in some form, and the federal government has not had a problem with it, and in fact said: No, it's not violating under our

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interpretation and under the congressional intent passed by Congress. We are following federal law, and the states are fine. So again, colleagues, the question of federal preemption is a question of congressional intent. The Controlled Substance Act makes clear that it only preempts state laws under very limited circumstances. 21 USC 903 states that it is not intended to preempt the field of drug laws if there is a positive conflict between state and federal law "so that the two cannot consistently stand together." Courts have generally held that state law is only preempted by the CSA if it is "physically impossible to comply with both--

DeBOER: One minute.

MORFELD: --state and federal law or if the state law stands as an obstacle to the CSA." Neither is the case in carefully crafted marijuana programs. And I've already noted that the federal government has never alleged in federal court that federal laws preempt state medical marijuana or legalization regulation laws. And yes, the Department of Justice is a political body, but so is Congress. So is the Supreme Court. They're all political bodies, colleagues. And before I was cut off a little bit earlier by time, I was noting that Senator Wishart is eminently more reasonable and eminently better to work with than me on this issue. And colleagues, I encourage you to work with her on it. I encourage you to work with her on it, because if you don't, there is going to be a broad constitutional right in our Constitution--

DeBOER: Time, Senator.

MORFELD: Thank you, Mr. President.

DeBOER: Thank you, Senators John Cavanaugh and Senators-- and Senator Morfeld. Senator Flood, you are recognized.

FLOOD: Thank you, Madam President. Good morning, members. I am conflicted. I know what I don't want. I was recently in Las Vegas for a conference, and everywhere I went, they were smoking marijuana. It-- it was an unpleasant experience to be on the streets. Everywhere I looked, it was about marijuana stores and dispensaries. And the whole culture was actually-- it felt like it was built around marijuana. And I don't want that in Nebraska. I don't want recreational marijuana. I don't think it's good. I think it's a gateway drug. I think people that use this for non-medicinal purposes can get into methamphetamines, and they end up, in limited cases but it does happen, down a pathway that is not good. And I sit there in Norfolk and I look at South Dakota, a state that's far more red than Nebraska,

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and they just went whole hog. They're in. They are going to be about marijuana in South Dakota. And it's coming. And my sense is that, in 2022, people like Senator Morfeld are going to be celebrating on election night because it won't be too-- it won't be a complicated question for the voters. It will be: Shall marijuana be legal? And everybody's going to vote for it, and-- well, or at least enough people are going to vote for it. We are going to have recreational marijuana, and it's coming. It's-- it's something that I think if-- if states like South Dakota blow right past those signs, it's coming to Nebraska, and there won't be any restrictions on it, trust me. And then at the same time, I get contacted by people in my district-- and I sit in close proximity to Senator Wishart-- and what-- what makes me think twice about medicinal is the suffering. And-- and this is not a compliment to Senator Wishart; this is the truth. I know she's driven by something that resonates with the good people of my district, and that is the human suffering that happens and the value that their physician and the patient see, and end of life issues, issues with people that are suffering from cancer. And I-- I see sincerity, and I-- it resonates. And so where I'm thinking-- and I want to-- I want to be really clear-- I think that we'd be awfully smart to figure out a way to get a very limited medicinal marijuana opportunity available to patients that need it, and not to the broader public. And you'll see, I have an amendment filed which I know, on its face, has all sorts of problems. And it's actually the only-- I may be the only person that could introduce an amendment that both sides of the marijuana argument probably don't like. In fact, I know that's true. My amendment would basically say there'd be one state dispensary. It'd be operated by the Nebraska State Patrol. You come in, you give your fingerprints, you get checked for warrants, and then you make sure your child support is paid up. We'll keep track of all the prescriptions that come in. And if-- oh, and by the way, the dispensary operated by the Patrol has to be within 500 feet of a county jail so that, if you flunk one of those early tests, you can go right into the other line over into the county jail. And then if you make it through the line, you-- you get up to present your prescription or your referral, you'll get it. And you know why I did that? Because there are some people in my district that I know are going to Denver to get what they need to get to-- to alleviate the pain. And they're criminals now, under our code. And I don't think that Nebraskans mind somebody, at the end of life, using something like that. I would imagine that, if we all thought about it, we've all seen the human condition of suffering. I have seen the human condition of suffering. I have had the experience to be up close with somebody who is--

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DeBOER: One minute.

FLOOD: --suffering through chemotherapy. And I will tell you, at the time that I experienced that-- not myself-- somebody suggested this. We didn't do it because we didn't want to break the law. But I know others that did, and it provided them some relief. I'm not under any illusion that the amendment I have is-- is going somewhere. I'm telling you, though, if we want to avert recreational marijuana, we're going to have to think about something very restrictive or we will see it everywhere, and it will be bad. It will be bad, it will be something we don't want. I don't want to see this in every strip mall. I don't want to see it on every corner. I don't want to-- I don't want to live in the marijuana culture. I really don't want any of it, to be honest. But I'm not going to close my eyes to what I think is human suffering and the sincerity with which some of my colleagues here bring this forward with, which I appreciate and makes me think twice about what to do. Thank you, Mr. President.

DeBOER: Thank you, Senator Flood. Senator McKinney, you are recognized.

McKINNEY: Thank you, Madam President, I rise opposed to the bracket motion. I support LB474 and AM824. I support this because it's time that we really do what we can to end the war on drugs. And this is a step. It's not a complete step, but it's a step to end the disproportionate rates of arrest, and convictions, and things for people that look like me. That's where and-- what a lot of individuals standing up are not thinking about. Marijuana isn't illegal because people think it's really bad. It's legal because of racist propaganda in the past. Do your research and you'll see that. It's not going to destroy the world. I don't understand that-- that argument, and I'll never understand it. We had an argument yesterday about the corporate tax rate in our state, and trying to be competitive with our neighbors. But our neighbors have took this step, majority of them have. Do we want to be competitive with our neighbors or do we just want to sit in the-- what is it-- the Middle Ages? It's-- it makes no sense. The world is changing and it-- we either step up now or a ballot initiative is going to force our hand, and then we're going to be looking crazy in the Legislature trying to do something about it. That is something really to think about. But I support this because this is a step to end the war on drugs for me. I would also love to see, in the future, individuals' with marijuana convictions records cleared, as well. But this is a step that is long overdue for this country and for our state. What if I don't want to go outside and see a bunch of drunk people? Does that mean we should come in here and

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introduce a bill to prohibit the-- the sale and usage of alcohol? I don't like the smell of tobacco or cigarettes. Should I introduce a bill to ban tobacco in the state? Opioids is also killing many Nebraskans, but nobody's coming in here to introduce a bill to ban opioids in the state. What are we doing here, just because of propaganda that isn't based in fact, that we're just going to say no? But we know for sure, in the next year or two, it's more than likely going to be legal, and we're going to have nothing to do with it as a body. We're just going to sit with our hands in our pockets, because we want to stand on two different sides and not actually be-- use our sense and come to a real compromise to put something in place. We're elected to come down here and work for the people. If we know with a high certainty that the people are going to vote to legalize this, why aren't we working for the people? It's something to really think about. Are we here to work for the people or are we here to uphold propaganda that's not necessarily based in fact? I'm also in support of this because I'm all for ending the war on drugs, because a lot of people I know have marijuana convictions on the record that would love to get those off. And the only reason they got them was because a cop supposedly smelled marijuana. But I also believe in making sure that young kids and elders in my community get access to something that may help them that's not a pill. These-- these drugs are killing our communities.

DeBOER: One minute.

McKINNEY: This is an alternative that would help a lot of people, and people should be able to get alternatives. And I yield the rest of my time back to the Chair. Thank you.

DeBOER: Thank you, Senator McKinney, Senator Ben Hansen, you're recognized.

B. HANSEN: Thank you, Madam Speaker. I actually just have a couple of questions for Senator Wishart, if she'd be willing to yield.

DeBOER: Senator Wishart, would you yield?

WISHART: Yes.

B. HANSEN: OK. I've read the bill over-- two times over, getting into the nuts and bolts of the bill, the Judiciary amendment, and some of the specific questions that I have are not just mine, but they also come from my constituents, as well. And it's ones I was hoping you could just kind of answer for me. How many days-- and this is something you may have talked about before, so I apologize for

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reiterating this. How many days is a prescription? What's the maximum amount of days a prescription can be used for?

WISHART: Ninety days.

B. HANSEN: So the prescribing physician prescribes it to a patient. And then after 90 days, what happens?

WISHART: Then that patient has to come back in and go through, again, all of the certification process with that physician to then get prescribed or recommended another 90 days,

B. HANSEN: OK. And then the physician can take a limited amount of patients? Or is there--

WISHART: Yes, a physician is allowed up to 275 patients in a year.

B. HANSEN: OK. And a little bit more on the dispensaries. They are regulated-- regulated by a pharmacist? Or a pharmacist just provides opinions? Or what's the pharmacist's role in a dispensary?

WISHART: Right. So because of this weird interplay between federal and state, pharmacists are not allowed to dispense of cannabis. But what we do, and it's something you-- pretty unique to our state, is we're requiring a dispensary to contract with the pharmacist that will be available for any questions the patient would have, whenever the dispensary is open.

B. HANSEN: OK, makes sense. Now a little bit-- oh, just one more thing with the dispensary. So what's to prevent somebody from going from one-- from one dispensary to another and getting the same-- like, you know, going to one dispensary, getting a prescription and then going to another dispensary and getting the same prescription? What's to prevent them from doing that?

WISHART: Well, the first thing to prevent them from doing that is that it is illegal to contain more than 2.5 ounces of cannabis. It's-- even if a patient is recommended cannabis, they can only have a certain amount in their possession at all times. So that's the first thing. It's just the illegality of it. But we've spoken with the PDMP, which regulates our opioid pharmacy-- other pharmaceuticals, and they would happily incorporate our medical cannabis system into the PDMP. So we, again, have a second sort of hurdle for making sure there's no abuse of the system.

B. HANSEN: Is that currently in the statute or in the bill?

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WISHART: Well, the medical enforcement department is allowed to do that, and I'm happy to even strengthen that language even more, Senator Hansen.

B. HANSEN: OK. All right, OK. And when it comes to, like, the quality control, OK, so you go to a dispensary, you-- you get the medical cannabis, where does it come from? Like, what's the quality control? Are they getting this like from Mexico or are they getting it from Nebraska or California or--?

WISHART: Every-- there is a seed-to-sale component to this. So everything is grown in Nebraska, everything is processed in Nebraska, and everything is sold in Nebraska. This is a interstate licensing structure. There's no cannabis out of the state that would be legal.

B. HANSEN: OK. Who determines the quality or like the mill-- the milligram of THC per flower? Who determines like the quality control? Is it-- is it the processor or is it like the state facility or is it somebody else independent?

WISHART: Yeah, we require every producer and processor to license with a separate licensed laboratory so you can know every single cannabinoid and the amount in every single--

DeBOER: One minute.

WISHART: --medical application you get.

B. HANSEN: OK, all right. OK, those are my questions for now. I appreciate you answering those. I-- I-- I'll push my button again and talk about some other kind of philosophical reasons and political reasons for my being in the middle on this bill currently. So I'm kind of listening to debate right now, and I appreciate everyone's discussing this. With that, I'll leave the rest of my time to Senator Hilgers, 'cause he had some more questions.

DeBOER: Senator Hilgers, you are yielded 0:33.

HILGERS: Thank you, Madam President. Thank you, Senator Hansen. So I-- I think the conversation has been great. I hope to come back on the mike and talk. I have a little more of a dialogue with Senator Morfeld about the role the federal government here, and the arguments made in the AG Opinion, which I think are not just persuasive, I think really are unassailable, and talk about, a little bit more depth, some of the counterarguments that I've heard that I think are-- are actually really important to unpack, and I think are going to be really

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important to put on the record, because I think some of this prosecutorial discretion and the exercise of that discretion, I think, really undermines the rule of law at the federal government.

DeBOER: Time, Senator.

HILGERS: Thank you, Madam President.

DeBOER: Thank you, Senator Ben Hansen, Senator Wishart, and Speaker Hilgers. Senator Williams, you're recognized.

WILLIAMS: Thank you, Madam-- Madam President. And good morning, colleagues. Some of us have been around the body long enough that we have had, and listened, and been involved with this debate for many years. And I really do appreciate the debate we are having today, that this debate today is staying on topic, on point, and is not ranging into those incredibly bad debates, in particular the one that we had in 2015, on this same topic. For those of us that have the opportunity to sit in this body, we have to make a lot of very difficult decisions, and this is one of those. And you either, at the end of the day, have a red button to push or a green button to push, there's no "maybe" button. And as we look at making those decisions, we don't make decisions because they're easy, we don't make decisions because they're popular, we make decisions because they're right. Problem is, what's right here? And as I look at this issue, we've got the initial hurdle, where I stumble and I trip on that hurdle, and that's the issue of legalizing the use of what is federally listed as a Schedule I drug. And then we have the other issue, and that's the issue that's been talked about a lot today-- the humanitarian issue of trying to give people a solution to something that has, at least anecdotally, helped and worked. So at the end of the day, I'm not going to be able to be supportive at this time, but I am listening, and I do have some questions along the lines of the questions that Senator Ben Hansen was asking, if Senator Wishart would yield.

DeBOER: Senator Wishart, would you yield?

WISHART: Yes.

WILLIAMS: Thank you, Senator Wishart. And first of all, I sincerely appreciate your continued work on this effort, and your hard work and your dedication. In-- in the legislation, it talks about the relationship between the doctor, the prescribing medical person, and the prospective cannabis person as a bona fide relationship. Could you tell me a little bit more about that and how that bona fide relationship is established?

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WISHART: Yes, absolutely. So actually, the definition that we created in this legislation is similar to what I brought in LB110, which is-- and I had worked with the Nebraska Medical Association on determining a bona fide relationship. What that means is this has to be your family physician. This has to be a person, a physician or a healthcare practitioner that you go to and you have a relationship with.

WILLIAMS: We've all heard stories, in particular from some of the early states, where a physician might just set up a clinic that was designed to-- this is what I do, provide certification, if that's the word we should use. So your bill does not go down that same line?

WISHART: Oh, no, absolutely not. And again, that's why I worked with the Nebraska Medical Association on most of the-- of the portions of this legislation to ensure we don't go down that route that other states did.

WILLIAMS: Thank you. And as I understand-- understand from reading the bill, the person being certified to have something, there's a couple of ways to do that. One is a quick certification. The other one is going on some kind of registry. Could you describe that registry for me, in particular if that means that once you're on the--

DeBOER: One minute.

WILLIAMS: --registry, how long do you-- thank you, Madam President-- how long do you stay on the registry?

WISHART: Sure. So when you get registered, you do every 90 days, basically you get certified. You can go on to a registry where your name is listed with the state. The reason we allow a little bit of a different system for those who don't want their name is because of gun rights, being respectful to gun owners and making sure that we-- we balance that system.

WILLIAMS: Thank you. And-- and we're going to run out of time. I have some questions about the employees in the workplace with this. I have some questions about the training for the medical providers, and how much of that may or may not be offered in medical school or in pharmacy school for those. I-- I also have some questions about the banking issues that are raised and that are really difficult, and near and dear to me, that I've watched--

DeBOER: Time, Senator.

WILLIAMS: --in other states. So thank you, Madam President.

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DeBOER: Thank you, Senators Wishart and Williams. Senator Morfeld, you're recognized.

MORFELD: Thank you, Madam President, and I will yield my time to my eminently more reasonable and thoughtful colleague, Senator Wishart.

DeBOER: Senator Wishart, you're yielded 4:51.

WISHART: Thank you, Senator Morfeld, for the compliments. We've heard a lot about the federal government today. I feel if-- if I could put an analogy of where we are right now in the argument with the federal government, it is, there's this huge mountain that we seem to think is absolutely insurmountable. But there is a trail all the way up it that's trampled down by 48 other states. And they're just waving to us, waving and like showing us how to get there. And we're sitting down at the bottom of it saying: Oh, but we can't possibly do this. We just-- we can't possibly do it. And some of those states up there have been up there for like years and they're still standing up there-- cannabis legal. When Trump campaigned in 2016, he talked about supporting medical cannabis. DeSanto [SIC-- DeSantis], the beloved governor for conservatives in Florida, he supports medical cannabis. Ben Shapiro supports medical cannabis. Colleagues, this is not a one-party issue, this is overwhelmingly bipartisan. If we want the federal government to reschedule cannabis, then one of the best ways to do that is stop being one of two states that hold out on it, because if every state has a legal medical cannabis system in it, you better believe the federal government will take note of that. Even our own representative in Nebraska, Senator Fischer, in her comment to constituents, says that the legalization of medical cannabis is a state decision. So let's make that decision today. I really appreciate Senator Flood, and Senator Hansen, and some of my more conservative colleagues who have come before us today with questions. I'm happy to work with any of you on problems you have with the bill. Pretty much every time a person has come to me and said: This is a deal breaker for me, I can't have smoking of cannabis in here, I can't have homegrow of cannabis in here, I've said: Look, the people I care about are the people standing out there right now, the people with terminal illness, with cancer. I'm not going to stand in the way of us getting something approved today. If it were up to me, it'd be a one-sentence constitutional right. Let me be really clear. I'm not scared of this plant at all. I've heard too many people across the state who have benefited from it and who it has helped; them get off of something far more lethal and addictive. I have a veteran that I have built a relationship with, his name is Ben. He has the guts to come to

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committee hearings and testify that he currently uses cannabis illegally in Nebraska. In fact, he got pulled over--

DeBOER: One minute.

WISHART: --by the police on his way back from Colorado, and almost faced a felony charge. This is a man who had pretty much half of his body blown up in Iraq, doesn't have a leg, experiences extreme pain every day, was on opiates that made him abusive to his family and almost lose his business. He got on cannabis illegally, and it's changed his life for the better. And he's off of opiates, and he has his family, and he has his business. And he has to drive back and forth illegally to have access to this. And we almost put him in jail. That's what we're talking about. There are consequences to this, and there will be more when more and more states legalize this, and we'll be this one little island that says to everyone else: No, we will fill our already overcrowded corrections system with you, person, who is at an end of life or battling cancer,--

DeBOER: Time, Senator.

WISHART: --or a veteran. Thank you.

DeBOER: Speaker Hilgers, for an announcement.

HILGERS: Madam-- thank you, Madam President. Just briefly, colleagues, schedulingwise, we have a lot to do today. This likely is going to-- it appears it's going to go eight hours. So what we're going to do-- and I've spoken with Senator Wishart, I've spoken with some of the primary opponents on this bill, and some others. We're only going to go an hour for lunch. So we're going to break and recess at 12:00, and then we're going to come back at 1:00, not 1:30. So we're going to come back at 1:00, not 1:30. You've seen that the agenda is pretty packed. And so after this bill is done, we actually have quite a bit of work left to do behind it. And so we're going to shrink that-- that gap just a little bit and give us a little bit more time. Thank you, Madam President.

DeBOER: Thank you, Speaker Hilgers. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Madam President. I do support the bracket motion. I yield the rest of my time to Senator Hilgers.

DeBOER: Senator Bostelman, who did you wish to yield time to?

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BOSTELMAN: To Speaker Hilgers.

DeBOER: Senator Hilgers-- or Speaker Hilgers, you're-- you are recognized for 4:44.

HILGERS: Thank you, Madam President. Thank you, Senator Bostelman. I was only anticipating maybe speaking once on this, and-- but I do appreciate the conversation we're having on the floor this morning about-- about the role the federal government generally, because I do think there's a vast bit of difference between LR107 on the one hand, which is concerned about overreach of the federal government, and something like this on the other hand, which is an actual core responsibility of the federal government, where they have said: You can't sell this. And we are saying: Oh, yes, we can. And the Constitution breaks the tie and says federal government trumps. The Constitution, as defined and interpreted-- I'm sorry, as interpreted by the United States Supreme Court. Now, the argument has generally been-- and by the way, there's some persuasion to this. I want to be very clear. But the argument is: Well, look, all the other states are doing it, so obviously we can do it. And if you were to dig into a little bit-- that a little bit further, you would say, well, the reason why the other states are doing it is because the federal government is not enforcing the law. And by the way, neither of those two facts, you will find me to try to controvert it or contradict. But I believe, colleagues, that is an absolute failure of the federal government, and one that, if it spreads, should worry every single one of us. The way that our system is designed to work is elected representatives legislate, pass laws. The executive branch signs those laws and then enforces those laws. The idea that we could pass laws and that someone, for political reasons or otherwise, would just say: Yeah, I don't want to enforce that, and that would become the basis of our governmental system, is absolutely contrary to the rule of law. Could you imagine-- and in fact, we've seen this argument in other cases before. Could you imagine, though, a bill that you want, that you pass, and the Governor or President of your party, if it's in the United States Congress, decides: Yeah, I don't-- I don't-- I-- yeah, I don't want to enforce that, I don't like it, we're not going to do that? Take it outside of the marijuana context, colleagues, what the federal government has done is an absolute dereliction of duty, period. What they should have done-- what they should have done is not allow this mess that's going on around the country. They should have said: You know what? The proponents of marijuana have made a case that there could be medicinal properties that could be used to help people. Let's research that, either by taking it out of Schedule I or specifically authorizing that research, and do what they do with every

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other drug-- diabetes medication, heart medication, cancer drugs-- peer-reviewed, gold-standard studies, the product of which will inform our doctors, through the FDA, on how to-- how to dosage it, and then say: You can do that, but no more. And if you do more than that, we are going to enforce federal law. Or alternatively, if that doesn't work, we work through the political branches, through the United States Congress to change Schedule I, to remove marijuana from that listing, and allow states then maybe to act in that-- in that sphere. Neither of those two things have happened. And I absolutely get the frustration for proponents of this bill. One hundred percent do I understand the frustration. One hundred percent do I understand the arguments that they're making and saying: Hey, look, this helps me. Why I can't use it? The reason is the failure of Washington, D.C. And the premise underlying that failure, this idea that we don't have to follow the system, this idea that the rule of law doesn't matter, we can just ignore laws we don't like-- and by the way, it's happened in contexts outside of marijuana,--

DeBOER: One minute.

HILGERS: --should give us all cause for concern. The answer to this problem is not in this Legislature. And that's not because I don't want it to be in the Legislature, I do think it should be in the Legislature. It's because of our federal system and the rule of law. So the idea that the lack of prosecution at the federal level is a problem in and of itself-- it absolutely, in my view, does not-- it does not follow from that problem-- that we should then jump into the breach. It means that we ought to fight this battle in Washington, D.C. Ultimately, Congress has spoken to the CSA. These things cannot be sold. We do not have the authority to permit their sale. And that's the end of the analysis for me. Thank you, Madam President.

DeBOER: Thank you, Senators Bostelman and Hilgers. Senator McDonnell, you're recognized.

McDONNELL: Thank you, Madam President. Senator Hilgers, if we start talking about dereliction of duty by the federal government, we'll never leave this building. There's some people that have discussed the idea of how we can improve this bill and-- and sincerely thinking about, well, we could work on it over the summer. We could-- we could get something next year and bring it and get something done. And here's-- here's my prediction. And I believe Senator Wishart discussed a little bit about polling and-- and people that are going to go out and get signatures and-- and what it's going to-- it's going to look like in November of '22, is that we're not going to have that opportunity. This is it. This is the day to have this discussion,

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because I believe there's going to be a group in July, and they're not going to be talking about just medical marijuana. They're just going to say, in the state of Nebraska, marijuana is legal. We're not going to have another opportunity. This is-- this is-- this is it for us. Because then there next year, if we come back and we say: OK, well, we've done something with medical marijuana-- I'm sorry, that ship sailed. That ship is gone, because they're going to be collecting those signatures so quickly, and spending so much money, and saying: No, we're not going to back up now. Senator Wishart, would you yield to a question?

DeBOER: Senator Wishart, would you yield?

WISHART: Yes.

McDONNELL: Senator Wishart, with this law, if-- if we can move this-- this forward, would this be the most conservative law in the state, in the United States?

WISHART: Yes.

McDONNELL: Is there any way to make it more conservative?

WISHART: I am open to any suggestions, but it would be hard.

McDONNELL: I yield the remainder of my time to Senator Wishart.

DeBOER: Senator Wishart, you're yielded 3:06.

WISHART: Thank you, Senator McDonnell. Thank you, Madam President. You know, we didn't used to be like this in Nebraska. We didn't used to be the last state to be smart on cannabis reform. We were one of the trailing states to prohibit it. We weren't the first. We were towards the end of prohibition in the '30s. And we were actually one of the first states to start to decriminalize cannabis in the 1970s, one of the first states to do that. Colleagues, we have this in our roots to be commonsense on this issue. And it's really only until a very powerful few people, who have a lot of money, have come into the picture and changed the way Nebraska used to be, in terms of common sense on this issue. I want to talk to you a little bit about the ballot initiative, 'cause I want to make it clear to everybody that this issue is going to pass, and it will be a one-sentence constitutional right. So in November of 2022, when we get the signatures, which we will-- and we'll get them this summer, by the way-- so this is the last chance 'cause they will be here this summer. When we get the signatures, and this goes to the ballot, and it's

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certified again, like it was by the Secretary of State-- and we've gone the ride of the gambling initiative, so we know we'll meet single subject requirements-- this will be voted in overwhelmingly by Nebraskans. And then let me tell you what happens.

DeBOER: One minute.

WISHART: There's 30 days, because this will be self-effecting, by the way. We don't need the Legislature. Frankly, this is the last chance. It will be self-effecting in 30 days. And marijuana will be legal in December for medical purposes, period. And that's it. And then, unlike a tightly regulated system that I have before you, one of the most conservative, we will have the most liberal medical cannabis laws in the state. Think about that, colleagues. We have a chance today to do what we were elected to do, which is lead on a tough issue, recognize the reality of the situation in Nebraska, and move forward in supporting LB474. Thank you.

DeBOER: Thank you, Senators McDonnell and Wishart. Senator Geist, you're recognized.

GEIST: Thank you, Mr. President-- Mrs.-- Madam President, excuse me. Well, it was said earlier that people are doing this and opposing it for political reasons, and I can tell you that it's much more politically popular to go with this-- this bill than it is to oppose this bill, for one thing. And for two, I just take exception to that, because some of us-- and I can only speak for myself-- but some of us support this because of a deeply held belief that this is the wrong path for our state. That is my deeply held belief, and I do believe that this is a social experiment, that in 15 or 20 years, states that have medical-- which is always the first step to recreational marijuana, will look back and regret passing this type of legislation. I do want to also speak to some of the things that are assumed, that medicinal marijuana is effective for. And I'm going to read from the paper that-- of the psychiatrist that I quoted earlier when I was on the mike. And I'm going to try to get through this in the amount of time I have left. But it talks about numerous studies have demonstrated that using cannabis prior to the age of 15 to 18 significantly increases the risk of children, adolescents developing psychotic symptoms. The risk is dose dependent and increases with the greater frequency of use and higher potency-- potency THC. And again, remember, this bill does not cap THC limits, so this is a great possibility with what we're discussing today. A landmark study out of the U.K. analyzed 780 adults, ages 18 to 65, 410 with their first psychotic episode versus 370 matched healthy controls. They found that the use of high potency THC, greater than 15 percent resulted in three

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times increased risk of psychosis. And if the use was daily, there was more than a five times increased risk. Those using greater than five percent THC did not exhibit-- or less than, I'm sorry-- THC did not exhibit psychotic symptoms, so it's very dependent upon high dosing or high levels of THC. A growing number of states have identified PTSD as approved condition. That's also included in our bill. However, this is not based on any research. There is no evidence that marijuana successfully treats PTSD, and there is evidence that it can make it worse. Marijuana is not the answer for PTSD, similar to the reason why benzodiazepine or alcohol are not the answer for PTSD. All of these-- all these compounds do is provide temporary relief by numbing the individual and disconnecting them from the traumatic emotion. It does not resolve the trauma, and they have to continue to use multiple times a day in order to continue with the benefit. This can lead to increased addiction potential, and that also goes hand in hand with high levels of THC and withdrawal symptoms, cognitive impairment,--

DeBOER: One minute.

GEIST: --a motivational syndrome, and the potential for psychosis or worsening psychosis from PTSD. I'm not going to go into all the details of this study, but studies have been shown this-- this does not work for everyone. Yes, maybe some people experience some transitory effect from medicinal marijuana, but the long-term effects are negative and studied. Thank you, Miss-- Madam President.

DeBOER: Thank you, Senator Geist. Senator Slama, you're recognized, and this is your third opportunity.

SLAMA: Thank you, Madam President, and good morning, colleagues. I rise today, still opposed to LB474, still opposed to AM824, but in support of my bracket motion, MO65. I-- I completely agree with Senator Williams' comments from earlier this morning about this-- really sticking with the substantive debate. I think that's a very valuable thing that we've been able to do this morning. And I'm very hopeful that this can continue through the afternoon as we discuss LB474 further, in its merits and its consequences. I think it's been a really great debate. And I'd also like to give credit to Speaker Hilgers. He is far better at breaking down the nuance of the AG's Opinion, and the law surrounding LB474, and the failures of Washington, D.C., than I am, so credit to him. Just to put it as succinctly as I can, Washington, D.C., has systematically failed each and every single one of us on the floor today, regardless of your position on this issue. The dereliction of duty from the federal government to enforce our own laws has failed every single American and our very system of government. With that, I'll head back to the

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AG's Opinion just so that we have this fully in the record for today's debate. So we're on page 6, three paragraphs down, of the Opinion from August 1, 2019: The Supreme Court agreed, having no difficulty concluding that Congress had a rational basis for believing that failure to regulate the intrastate manufacture and possession of marijuana would leave a gaping hole in the CSA. First, the Court said, the fact that marijuana is used for personal medical purposes on the advice of a physician is irrelevant because the CSA designates marijuana as contraband for any purpose. Moreover, said the Court, the CSA is a comprehensive regulatory regime specifically designed to regulate which controlled substances can be utilized for medicinal purposes and in what manner. Thus, even if respondents are correct that marijuana does have accepted medical uses, the CSA would still impose controls beyond what is required by California law because the CSA requires manufacturers, physicians, pharmacies, other handlers of controlled substances to comply with statutory and regulatory provisions, mandating registration with the DEA, compliance with specific production quotas, security controls to guard against diversion, recordkeeping and reporting obligations, and prescription requirements. Accordingly, the Court concluded, the mere fact that marijuana-- like virtually every other controlled substance regulated by the CSA-- is used for medicinal purposes, cannot possibly serve to distinguish it from the core activities regulated by the CSA. One need not have a degree in economics to understand why an exception from the CSA for the vast quantity of marijuana-- or other drugs-- drugs-- locally cultivated for personal use. . . would have a substantial impact on the interstate market for marijuana. Thus, the policy judgment Congress made in the CSA that an exemption for such a significant segment of the total market would undermine the orderly enforcement of the entire regulatory scheme, is entitled to a strong presumption of validity. Nor, said the Court, can limiting the activity to marijuana possession and cultivation, in accordance with state law. . . served to place California's law beyond congressional reach. The court thus soundly rejected the notion that the marijuana production and use at issue were not an essential part of the larger regulatory scheme because they had been isolated by the state of California and are policed by the state of California, and thus remain entirely separated from the market.

DeBOER: One minute.

SLAMA: Thank you, Madam President. The notion that a California law has surgically excised a discrete activity that is hermetically sealed off from the larger interstate marijuana market is a dubious proposition, concluded the court, and one that Congress rationally

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rejected when it enacted the CSA. In the end, concluded the court, if California wished to legalize the growing, possession, and use of marijuana, it would have to seek permission to do so in the halls of Congress. And I'll stop there for this turn on the mike. But again, I do appreciate the substance and depth of today's debate. Thank you, Madam President.

DeBOER: Thank you, Senator Slama. Senator Day, you're recognized.

DAY: Thank you, Madam President. And good morning-- or almost good afternoon-- colleagues. I will echo the sentiments of several of my colleagues in saying that I appreciate the debate this morning, and staying on topic, and having lots of substantive-- substantive discussion today, I rise in opposition to the bracket motion and in support of LB474. I very strongly support this-- this bill. I think, first and foremost, because I think it's absolutely necessary that we get Nebraskans the compassionate medical care that they need and deserve. We've been having this discussion for years. And if there is any form that could-- any form of marijuana that could be viewed as a conservative application, I think this bill is it. Senator Wishart has worked very hard on making this as restrictive as possible, to the point that when this bill came out this year, many in the marijuana community were opposed to this bill because it was so restrictive in its application. But just going back to a couple of things that have been mentioned, I think Senator Geist had mentioned something about THC. And I did just want to mention that, in terms of THC being a very scary thing, the-- currently the FDA has legalized a synthetic form of marijuana called Marinol, which is 100 percent THC, and many people don't tolerate it well. In terms of the entourage of-- of the effects that come from the actual plant, people handle that much better than they do the synthetic form. So in terms of the reactions from the drug THC, there is currently a legal FDA-approved synthetic form of that. Additionally, in terms of what kids are given that is legal, that has been FDA approved, children like Colton Eggers, who is a constituent of mine, he has been diagnosed with epilepsy and his mother and his family have been advocating for medical marijuana for years. They are often prescribed two medications, by doctors, that have never been tested or approved for use in children. So I think sometimes we get caught in the idea that-- that marijuana or THC or cannabis is this very scary idea. But I think, when we look at what's actually going on and what kids are being prescribed currently by doctors, we know that 20 percent of doctors are prescribing medications that are off-label. So I-- again, just going back to what we're-- what we're talking about with the potential negatives of legalizing medical marijuana, this-- you know, some of the fear tactics I think that people are discussing,

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it just doesn't follow through, especially when we know that there are already legal FDA-approved synthetic forms of THC. So I just wanted to make that point while I was on the mike this time, and I will yield the rest of my time back to the Chair. Thank you.

DeBOER: Thank you, Senator Day. Mr. Clerk, for items.

ASSISTANT CLERK: Thank you, Madam President. A new resolution, LR138 by Senator Lathrop, is an interim study and will be referred to the Exec Board. Your Committee on Enrollment and Review reports LB90, LB166, LB166A, LB209, LB296, LB313, LB407, LB521, and LB540 all placed on Final Reading. In addition to that, a series of amendments to be printed: Senator Friesen to LB264, and Senator Hunt to LB496 and LB496A. Name adds: Senator Sanders to LR128, and finally, a priority motion, signed by the Speaker, to recess until 1:00 p.m.

DeBOER: Colleagues, we will preserve the speaking queue. As a reminder, we only have one hour for lunch today. We will reconvene at 1:00. And you've heard the motion, colleagues. All those in favor please say aye. Those opposed please say nay. We are in recess.

[RECESS]

HILGERS: Good afternoon, ladies and gentlemen. Welcome to the George W. Norris Legislative Chamber. The afternoon session is about to reconvene. Senators, please record your presence. Roll call. Mr. Clerk, please record.

ASSISTANT CLERK: There is a quorum present, Mr. President.

HILGERS: Thank you, Mr. Clerk. Do we have any items for the record?

ASSISTANT CLERK: One item, Mr. President, an amendment to be printed to LB496 from Senator Hunt. That's all I have at this time.

HILGERS: Thank you, Mr. Clerk. We will proceed to the first item on the afternoon's agenda.

ASSISTANT CLERK: Mr. President, returning to LB474, which was considered before lunch, under consideration was a motion to bracket the bill until June 10 by Senator Slama.

HILGERS: Thank you, Mr. Clerk. Colleagues, we have most of the body in the queue. The next three speakers are Senator Lowe, Senator Walz, and Senator Matt Hansen. Senator Lowe, you're recognized.

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LOWE: Thank you, Mr. Speaker. I have concerns that this bill may inadvertently put Nebraskans in a position where they give up their right to legally buy and own a firearm. In order to avoid this and may additionally encourage people to criminally lie on a government form. LB474 may not cause any issues with Nebraska gun laws, but it clearly causes an issue for Nebraskans going through the federal background checks for purchasing firearms. If someone wants to buy a shotgun or rifle in the state of Nebraska, they must do a criminal background check. The document that a person will need to fill out is-- out is created by the Bureau of Alcohol, Tobacco and Firearms and Explosives. This is Form 4473. I have distributed out this form to you. This form includes the question which is key to our discussion, question 11.e. 11.e. asks, are you unlawful user or addicted to marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance? This question is pretty problematic if you are someone who is using medical marijuana. Now you may say, but LB474 says that you cannot get in trouble if you have a valid medical marijuana prescription. Unfortunately, for that argument, question 11.e. from Form 4473 adds the clarifying-- clarifying follow-up language. Warning: The use or possession of marijuana remains unlawful under federal law, regardless of whether it has been legalized or decriminalized for medical or recreational purposes in the state where you reside. My fellow legislators, fellow Nebraskans, this could be the way for them taking our guns away. Beware. Colleagues, this is very clear language and makes it very clear that if someone with a medical marijuana card truthfully fills out Form 4473, they will not be allowed to purchase firearms because they will not be able to pass the federal background check. We are taking away people's constitutional rights with this bill. This would be a major problem in and of itself. But what more concerning to me is the fact that this is a risk not being overtly or thoroughly discussed. The discussion around medical marijuana is years old in Nebraska, and yet we have not thoroughly discussed how probable it is that someone who uses marijuana could lose their right to purchase a firearm. People, we will see that medical marijuana has been legalized and it has-- and it may try to alleviate the medical condition. After that point, if they want to purchase a firearm, then they are out of luck and have inadvertently waived their Second Amendment rights by using marijuana while it is still legal [SIC] on the federal level. Of course, the other option is someone could decide to falsify their response on 11.e. on Form 4473. Falsifying this document would be a felony and can and has led to jail time. Do we really want to establish a precedent that encourages citizens to criminally lie on government forms? What other issues might we imply that it is permissible to lie about in order to preserve personal rights and privileges? Should it be OK to

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try to make your college more affordable by lying on your FAFSA form? Should you try to enact your own personal tax relief by lying on your tax return? This is certainly not a path--

HILGERS: One minute.

LOWE: --that we-- thank you-- that we wish to pursue-- pursue. It is dangerous and immoral for a government to encourage citizens to obey most laws but ignore the ones we dislike. There's a very interesting and informative article that I have come across when I was looking into this issue. It is from Salon magazine, a more liberal-leaning publication. The article was written by Travis Dunn on April 27, 2019, and it is titled "Guns versus weed: How background checks conflict with state cannabis laws." As more states pass laws allowing the use of cannabis for medical and recreational purposes, the potential for legal conflict with the federal government increases as well. Direct conflict between state laws legalizing cannabis and federal law, which puts cannabis in the same category as heroin, cocaine and amphetamines--

HILGERS: That's time, Senator.

LOWE: Thank you.

HILGERS: Thank you, Senator Lowe. Senator Walz, you're recognized.

WALZ: Thank you, Mr. President. Sorry. Colleagues-- whoa. I wanted to rise in support of LB474 and oppose the bracket motion. I really want you to consider, first of all, who the introducer of this bill is: Anna Wishart. Senator Wishart, as you all know, is compassionate about humanity. She listens and empathizes with constituents not only in her district, but as she has mentioned, she has visited people in every-- every one of our districts. She has heard people in every corner of our state express their strong desire to legalize medical cannabis as an alternative to addictive, addictive medications. She is studious. She has spent hundreds of hours researching medical cannabis, the components that make up medical-- medical cannabis, how effective it is as a treatment for patients suffering from chronic pain and seizure disorders, and the history. She studied the history of the medicinal use dating back to thousands of years. She has done her research. She's responsible. She's created a policy that includes guardrails needed to assure patient qualifications, to include an oversight board to advise on rules. She included regulations and oversight of the program and requirements for health practitioners that participate in the plan. Senator Wishart is trustworthy, as we all know, she's honest, and she's determined to advocate for and support people who

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need relief from suffering and pain without having to rely on, again, highly addictive drugs that cause major side effects. And, yes, she is way more thoughtful than Senator Morfeld. Senator Wishart-- I'm sorry, I'm going to go back to that. So this, colleagues, again, as-- as Senator Flood and many other colleagues have said, this is inevitable. Overwhelmingly-- overwhelmingly, Nebraska will vote to pass medical cannabis and the ballot initiative will simply say, persons in the state of Nebraska have a right to the use of medical cannabis, period, no thoughtfulness, no guardrails, no oversight, no practitioner requirements, no prohibited patient activities, just the right to use, period. It is not going to disappear. It is not going to go away. This will pass. And I think it's our responsibility to ensure that when it does, we know that we have been proactive, assuring the best policies are in place, that it has been well-thought-out, and that it is regulated. I strongly believe that this is an issue that our body-- our body needs to be accountable for, to act independently and to make responsible decisions for the future. Thank you, Senator Wishart, for your wisdom, for your dedication, and for your compassion. Thank you.

HILGERS: Thank you, Senator Walz. Senator Matt Hansen, you're recognized.

M. HANSEN: Thank you, Mr. President, and good afternoon, colleagues. I do rise in support of Senator Wishart's LB474 and of the Judiciary Committee amendments, and I'm opposed to the bracket motion. I've supported this concept and I've supported this concept over a number of years, a number of iterations, and will continue supporting it until we can get medical cannabis available to the people of the state of Nebraska. I do want to respond just a bit to the-- Senator Lowe's comments and the reference to the firearms laws. Senator Wishart's bill, as it stands now, has pretty strong protections on the state level for firearm owners within the concept of this law. And to say that the federal-- it is correct to say that the federal government does have their own opinions and statutes on prohibited possessors and firearms laws. But I will point out that in other contexts, those laws are routinely critiqued and criticized, and-- and on this floor, including we've had some legislation this year to make it harder for the state to cooperate and cooperate with federal firearms laws. If we want this to be a state issue, we want it to be a state issue, then we are the state and we can do it. This is not a back end around or having anything to do with guns. Yes, there are some technical regulations that might impact one way or the other, but that's not the meat of this bill; that's not the purpose of this bill. And I think Senator Wishart and the Judiciary Committee has worked as hard as they can to make it as clear as possible what we as the Nebraska

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Legislature will intend in this area. So that's a bit of a red herring, and it might come up again, but just know it's a red herring. With that, I don't-- there are better people to talk to this bill with more issues to say. But from my experience serving this body, having served on Judiciary Committee one of the first times Senator Wishart brought this bill, you know, hearing from some of the-- the parents of children suffering from epilepsy and other related-- hearing from veterans who are dealing with pain management, I simply cannot say-- I cannot be a barrier in this process to get people the help and the need-- they absolutely need. And with that, Mr. President, if I have any remaining time. I'll yield it to Senator Wishart.

HILGERS: Senator Wishart, 2:40.

WISHART: Thank you, Senator Hansen. Good afternoon, colleagues. It's good to be back on this debate. As you can tell, it's an issue since I've prioritized it for four years and taken my entire summer during a global pandemic to also prioritize this in terms of my hours. I love this issue. Just wanted to add a little bit to what Senator Hansen had said. I actually worked with gun advocates on this bill to make sure that we have some of the strongest protections in place for Nebraska firearm owners so they don't have to make the decision about whether they can get access to a treatment that will help their illness in terms of medical cannabis and having a firearm. So if we pass LB474 forward, in terms of firearm protections, we will be setting the standard for other states to move forward on and protect firearm owners across the country. So for those of you who care about gun rights and ensuring that legislation that moves forward always takes into account people's Second Amendment rights, you should be voting in favor of LB474, and let's create a model system in our state that other states then can adopt to protect people's section-- Second Amendment rights and to protect their medical freedom to have access to cannabis. I did want to talk a little bit.

HILGERS: One minute.

WISHART: You know what, I will wait to talk a little bit more about this on my next round of discussion. But I do want to break down from-- for some of you, you know, we had the opportunity when we collected close to 200,000 signatures to be able to pull the data and to see from all of your districts how many people signed the petition that allowed us to collectively get across the finish line. And so I will be spending some more time walking through so that Nebraskans listening and my colleagues today can understand the diversity of support that exists in the state, in their own districts, for this type of legislation. Thank you.

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HILGERS: Thank you. Senator Wishart and Senator Hansen. Senator Blood, you're recognized.

BLOOD: Thank you, Mr. Speaker. Fellow senators, friends all, it's been an interesting debate, I don't know if it's a debate because a lot of people are reading things that they've been given to read on the mike. But I stand opposed to the bracket motion made by Senator Slama, in favor of the Judiciary amendment and then what's attached to the underlying bill. I just want to build a little bit on what Senator Hansen said in reference to Senator Lowe's comment on the mike. We have the strongest gun protections of gun rights in LB474 than any other state. Second, there's really no evidence of any gun issues and medical cannabis-- with medical cannabis in any other state. So we always say, show us the facts, show us the proof. There's your facts; there's your proof. But what I want to say about that is that you make choices in life. You may choose to utilize a doctor's prescription for cannabis knowing that you must answer 21.e. on cannabis use on your firearms transaction record that was passed around, or you may choose to pass on that choice of medical support because in America we have freedom of choice. Seems pretty logical-- logical to me. I mean, I think it's kind of insulting to say you'll have to lie on your form or to say you may not know this, that you'd actually be lying when it says right in black and white that you have to tell the truth and that, if it's a state cannabis law, it doesn't matter because it's not legal at the federal level. So I just-- and this is from the same senator who said that when you feed hemp to animals, they eat their young, so I-- I don't know. I will always remember that statement, Senator Lowe. So then I go back to all these quotes that we're getting from doctor this and doctor that from this state and that state and university. And you know, what's really unfortunate about the Internet is that there are actually people that are paid, and actually there was a great story on NPR about it today, paid to put out misinformation as part of a business model. They are making money from this. So you have people who are purposely publishing information, telling you that it's based on science and facts, and people take it hook, line, and sinker. Just because it's-- it's on the Internet, folks, and because they claim that it's doctor this or doctor that doesn't make it so, doesn't make it true. Do your research. So when I heard some of the data that's been spewed on the floor that I knew was wrong, I went to the world's largest biomedical library, the U.S. National Library of Medicine, National Institutes of Health, and they have studies on hallucinations and cannabis, because we keep hearing about this, right? So most case reports that have described hallucinations after cannabis exposure involved individuals with current psychosis or a family history of psychosis, populations that

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we know will have an atypical response. But if you look at peer review-- peer reviewed-- I can't talk today-- peer-reviewed reports in healthy adults who were predominantly from research studies involving the administration of purified THC or after use of synthetic cannabinoids, then they often had trouble, as well, which created incorrect information, because that's not what we're talking about, right? We're talking about whole-plant cannabis.

HILGERS: One minute.

BLOOD: So the data that you guys spewed today is based on skewed information because we're not talking about whole-plant cannabis, and research has demonstrated the importance of considering dose and route of administration in decision-- decision making when prescribing cannabis, that if you do it right, you don't have these types of issues. But when you use things that are not what we're talking about, such as a synthetic version of it, yes, you do have issues. So I really encourage you that when you start talking about this alleged data that you have, that you look and see, first of all, if it's been peer reviewed, and that you look outside of that individual and-- and see if anybody else has mirrored their results because you are way too smart for fall-- to fall for that stuff, and I know you're all smart enough to read. Thank you, Mr. President.

HILGERS: Thank you, Senator Blood. Senator Wayne, you're recognized.

WAYNE: Thank you, Mr. President and colleagues. I-- it's my first time speaking and probably my last time, the way the queue is going, and I just want to-- I heard Senator Arch say something earlier, and I just want to clarify or at least talk a little bit about off-label drugs. Right now, about 20 percent of all FDA-approved drugs are used off label. That means they're not actually used for their intended purposes. So when I-- when people get on the mike and talk about dosages, there is no dosage recommend-- recommendation for any off-label drug use. It's actually trial and error. And what I'm going to do next year, since everybody brought this up and I'm going to use these transcripts, I'm going to bring a bill to make sure any kid in state custody or as a state ward cannot be prescribed off-label drugs. If we're so concerned about dosage and how things are used, we're going to stop that from-- with any kid that we are responsible for. We're just going to eliminate it because there is no recommended dosage use. There is no-- it's actually being used outside of its intended purposes. And what we're finding across the country is about 40 percent of the kids who are in our custody are getting prescribed drugs, off label, to control behavior, not necessarily the underlying thing. So we need to make sure we're going to have that conversation

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next year. We're going to get votes on that because we're going to read everything that was said today about dosage and make sure it's being used for FDA purposes when, in fact, most mental health treatment and, in fact, most behavior treatment is off-label drugs. So we'll have that conversation and we will definitely have a vote, even if it's a pull motion, because that's how strongly I feel about our children being prescribed off-label drugs when we sit up here and say we can't even use cannabis, which has been around forever and there's been no deaths linked to cannabis and we can cite that over and over. But how many alcohol-related deaths each year, Lowe, are there out there? But we won't have that conversation because we want to pick and choose when time we want to use data and when we're not. And I will tell you, I struggle with this bill. I struggle with this bill because it is so restrictive. This is the most conservative bill regarding medical marijuana and cannabis across the country. For those of you who don't know, I used to sit on a national cannabis board that developed how we do social equity across the country. I actually know this industry very well, and this is the most conservative that I've ever seen. And I guarantee you, when it goes to the ballot, it's going to be a lot worse than this. And I'll tell you why I struggle with it. One, you can't grow it, so it makes the pharmaceuticals and those in the industry who actually have the means to produce it, be able to produce it and not be able to take care of yourself. Two, you can't even smoke it, so the cheapest way of getting it through this process, which is through flower, you can't even really smoke it. And the last thing is they outlaw my favorite type of medical cannabis, which is right here, a gummy. And we can all pick them up right here on Senator Hughes's desk. That's even outlawed. That's crazy to me. That is absolutely crazy to me that we are afraid so much of the actual facts that are out here regarding this, that we won't have an honest conversation about it. So next year we will when it comes to our states who-- our-- our kids that are in state's custody around off-dosage and off-label uses, because there is no recommended dose when it comes to off labeling. In fact, aspirin-- aspirin was not approved until recently for heart treatment, but it's been used for the last 20 years as an off-label prescribed medication. The low aspirin dose that everybody uses to-- for their heart, that's off label, and they actually played around with it for years to figure out which one to come up with. So I'm not necessarily-- and it's-- and the last thing ironic about this, then I'll yield the rest of my time to Senator-- Senator Wishart, is the people who hate big government, who are afraid of big government, who won't get vaccinated because it's FDA and they don't trust the process, are out here quoting the FDA. With that, I'll yield the rest of my time to Senator Wishart. And I'll finish my gummies.

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FOLEY: Senator Wishart-- Senator Wishart, 0:53.

WISHART: Thank you. Colleagues, I just also wanted to add to the conversation that Senator Wayne so eloquently, as he always does, said, actually, the Department of Health and Human Services in Minnesota, which has had medical cannabis legal for a while, came out with a whole list of recommendations for dosing medical cannabis. See, when we put our heads together and we work together, we can make these things happen. There is no challenge that is insurmountable on this issue. Thank you.

FOLEY: Thank you, Senator Wishart. Senator Friesen.

FRIESEN: Thank you, Mr. President. I'm going to stand in favor of the bracket motion, still opposed to LB474, and I think Senator Wishart probably knows where I stand. I'm going to talk about some different things, and I'm sure not going to talk about dosage right now. But let's-- I'm going to talk a little bit more about an experience I had, and I think it was at a CSG conference or NCSL, where we met in Denver and we had the chief of the Denver Police Department talk to us about drug use in Denver after they permitted marijuana usage there. And-- and the reason I want to talk about this portion of it is I strongly believe, whether or not we pass this bill, whether or not, next year or the year after, there will be a petition drive to put recreational use on the-- on the ballot. And I-- I do feel that probably, from what I've heard and seen, it would pass. But I don't think that I'm ready to approve what I would call drug use in this body, because we've never done that before in this body. We have never approved of a-- a substance that you can put into your body. We've always relied on the FDA to do those types of things. So as far as I know, at least, we have not approved a drug to be used. When we were in Denver, they talked about what they called polydrug use. And you all know, when people-- when you go out to party, you-- you knew how many beers you could drink and still think that you could safely drive home. And those who like to smoke a little-- a little weed, they knew about what-- what they could do and still safely navigate their way home. But what they're finding is that now you have people go to a party and they drink one or two beers, which is very small amount for them, and then they eat a-- a brownie or some gummy bears, which they have no idea what the THC content is, and they are severely impaired and they drive home. And so the accident rate went up considerably and what they did was in-- in Colorado, they do blood testing for THC levels and they do the blood testing for alcohol levels, and they would have drivers that would pass both of those tests. So what they started doing was using a drug recognition expert, which uses the eye test to

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test for impairment. And they showed a high-speed camera view of a person's eyes when they're giving them the eye test, and they have said no one ever yet has been able to beat that test. And troopers that were trained in that were so accurate they could detect the blood alcohol level content pretty well to a tenth of a point. And so what they're going to do is train all their officers in drug rec use-- recognition experts, DREs, and they were not going to do the other expensive tests anymore. But what they're finding is that exactly what was happening is when you mix the two-- and that's why they talked about polydrug use. When you mix any two drugs, suddenly you become impaired and you don't even recognize the fact that you've done this, and so they were experiencing an uptick in accidents. There were uptick in kids going to the emergency room because they ate mom and dad's brownies that they weren't supposed to be in. And so they have at least-- burglaries were up and they were struggling with this. And they all thought that the tax revenue that was going to come in was going to be so good, and they found out they couldn't tax it at the levels they thought because the black market came in and undercut their prices. And to me, I guess it starts with the feds-- the federal government changing the classification of the drug. And at that point, I'll look at things differently. But--

FOLEY: One minute.

FRIESEN: --we can complain all we want about, you know, laws that are on the books, and I don't know that I can just ignore one because I want to. I can think of a lot of other ones that I'd like to ignore. But again, I-- I look at this a little bit like we have a lot of bad habits, all of us do. We all-- some-- some drink too much, some eat too much, and this just adds one more. And I do think doing the medical marijuana, yes, it-- it makes people-- it-- it makes them feel like we've done something good. I've not seen the facts yet, until they've done more testing with the Food and Drug Administration and more clinical trials, that it actually serves enough of a purpose that we would approve it. But until that day comes, I will still-- I will be opposed to it. And I-- I do think that we need to look at it in the bigger picture. I-- and I do feel that if it was put on the ballot, it would pass. But I think people need to be educated as to what--

FOLEY: That's time, Senator.

FRIESEN: --the dangers are--

FOLEY: That's time.

FRIESEN: --the danger that happens. Thank you, Mr. President.

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FOLEY: Thank you, Senator Friesen. Senator Clements, you're recognized.

CLEMENTS: Thank you, Mr. President. As I was researching this, I found written testimony given to the Judiciary for the hearing March 10 regarding LB474, which I-- I oppose. And this is-- well, I'll just-- you'll hear who it is when I read it. It says: Good afternoon, Chairperson Lathrop and members of the Judiciary Committee. My name is Lorelle Muetting and I am here on behalf of Heartland Family Service of Omaha in opposition of LB474. I am the prevention director at Heartland Family Service and oversee all the programs we provide in the community related to substance abuse and problem gam-- gambling prevention. I have been in prevention for the past 18 years and have spent countless hours researching this issue. This is why I wanted to share this testimony, because I have not spent countless hours, but let's go on: Our stance on this issue is not taken lightly as we know there are many individuals who are suffering from serious health conditions who would like the opportunity to try marijuana to see if it would relieve some of their symptoms. And while our thoughts and compassion go out to those Nebraskans who are struggling, we are in opposition to LB474 because marijuana has not been approved by the FDA as a safe and effective medication. We believe the science and research should bear out the safety and efficacy of marijuana, not popular opinion or simply what people want. In addition to the reality that marijuana has not passed clinical trials as a medication used to treat many chronic health conditions, there are several additional concerning provisions in LB474. One such provision in Section 3 would allow cannabis products containing up to 2,000 milligrams of delta-9-THC. This is concerning because in Colorado, a serving size of THC is 10 milligrams. This would mean that one product could contain 2,000 milligrams of THC, which is equal to 200 servings of THC. This is a lot of THC in one product and the result is going to be impairment way above medicinal value. Another concern occurs in Section 3 and Section 57. In Section 3, it says an allowable amount of cannabis means 2.5 ounces or less of cannabis in any form other than a cannabis product. This measurement in ounces is in reference to a leafy substance or flower bud product that would typically be smoked. Additionally, 2.5 ounces is equal to roughly 150 joints, which is a lot of cannabis to have for an allowable amount of medicine, in quotes. However, in Section 57, it says it is unlawful for a certified patient to smoke cannabis. We are in favor of the no-smoking provision. However, the concern is, why is it allowable to have up to 2.5 ounces of cannabis in any form, including leafy product, if you can't smoke cannabis pursuant to the Medical Cannabis Act? And will dispensaries be selling leafy product even though it's unlawful to

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smoke it? You can see the possible confusion and problems this might cause. Regarding the list of qualifying health conditions, there is not conclusive science--

FOLEY: One minute.

CLEMENTS: --or research-- thank you-- for what medical conditions cannabis provides relief for, as it has not been effective enough to pass clinical trials for any medical condition, with the exception of CBD being effective for a couple of rare types of seizure disorders. All other medicines are used to treat medical conditions that have passed clinical trials. I've heard legislators say in this committee this is what people of Nebraska want. To that I would say not all Nebraskans want medical marijuana. I would also respond that public health legislation and policy should be based on science and research, not on anecdotal stories, popular opinion, or what people want. I urge you to consider science and research and not vote LB7-- LB474 out of committee. Sincerely, Lorelle Muetting, prevention director of Heartland Family Service. Thank you, Mr. President.

FOLEY: Thank you, Senator Clements. Senator Albrecht.

ALBRECHT: Thank you, President Foley. I'd like to continue on as I'm talking about the mothers that are exposed to these sort of things. Nearly 70 percent of the dispensaries in Colorado were recommending high potencies of THC products to expectant mothers to treat symptoms of morning sickness. This is especially concerning, given these dispensaries are not staffed with medical staff and are not able to give accurate medical advice. This person wants to share that what happens in dispensaries when people ask how much of the product they should take in order to get their medicine, they'll be advised to have a little bite of a brownie or take a few pulls off of a blunt, wait a while, and see how that feels. If they start to feel better, then that's how you know how much you should take. If you wait a while and you're still not feeling anything and have a little bit more, after you take that much, you start to throw up so-- so much that you feel like your head is going to explode. That's how you know that you've taken too much. This word for-- this is word-for-word medical advice from people, not a nurse or a pharmacist, but a dispensary worker. It's insulting that we would put some of our most vulnerable patients in the care of dispensary workers that no-- that have no more seasoned training than-- to be able to-- to prescribe whatever these folks are needing. This came from a facilitator from the Heartland Family Services. I did ask for information over the lunch hour on what's happening in Colorado with some of their dispensaries. Some of the numbers about the local impact, 64 percent of Colorado's jurisdictions

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have banned both medical and recreational marijuana, their retail activity. And according to the Colorado Department of Revenue, 52 percent of the state's dispensaries are concentrated now in just three counties. You know, whether somebody comes up and tells me how many people are going to vote for this on the ballot or not, to me, I look at this just like I looked at gaming. You need to give people the right information. Nebraskans, you need to be exploring this for yourself, if you really do believe that this should be in your communities, whether you really do believe that this should be given out to individuals or a card to our children. You know, this-- this is just, to me, a very slippery slope that we don't need to be going through and going down. As policymakers, I can't even fathom the thought of-- of overdosing somebody to a point that they either lose their life or something much more serious happens. Another thing, when I think about the workforce, I really can't believe that the chambers were even behind this because there are so many different businesses that you need people to show up on time, you need them to be clear and ready to-- to do the day's work, but the liabilities that could lie with people overdosing on things that they shouldn't be taking and then going to the next level of legalizing this is just something that I don't want to see happen in the state of Nebraska. Thank you, President Foley, for your time.

FOLEY: Thank you, Senator Albrecht. Senator Murman, you're recognized.

MURMAN: Thank you, Lieutenant Governor Foley. When I was on the mike the first time this morning, I was talking about my concerns with marijuana use and impaired driving. And I was quoting from the U.S. Senate bipartisan report on narcotics control that was recently issued, and I'd like to finish speaking from that document. Notwithstanding the language in Section 28 of LB474, I'm very concerned about the unintended consequences of an increased number of individuals driving while under the influence of cannabis on Nebraska's roads and threatening public safety. And according to this bipartisan Senate report, a universal standard to detect-- to detect cannabis-impaired driving does not exist, largely because THC presence in the bloodstream alone does not indicate impairment. Because of this shortcoming, the National Highway Traffic Safety Administration supports new research related to reliable roadside tests. The Senate caucus report strongly urges the federal government to accelerate research regarding the detection of cannabis-impaired driving, including the development of standardized field testing. So I've talked to law enforcement in my area, and they're very concerned about, even before-- before this possible legalization of medical marijuana, about how would they test for the use of marijuana when

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they do have suspecting driving problems from its use. So in addition to my public safety concern with regard to impaired driving, I'm concerned also that we don't have universal testing currently available to accurately detect impairment by law enforcement. And I'd like to just speak a little bit more about marijuana legalization and public safety on the road. It is well established that marijuana use impairs driving. THC, the component of marijuana that creates the high, has been shown to decrease reaction times, reduce road rule following, and increase variable speed and lane position. The dangers on the road are not only from those who drive while high. A study conducted by Harvard researchers, published in March 2020 in the scientific journal Drug and Alcohol Dependence, found that marijuana users showed driving impairments even when no longer intoxicated, with greater danger posted by heavy users and young adults who start marijuana use at a young age. And I know the bill doesn't legalize it for children, but making marijuana more widely available will only increase these kinds of problems. And another problem with driving, marijuana intoxication does increase crash risk. The American Automobile Association study in Washington State found the number of marijuana-positive drivers involved in fatal car crashes doubled following legalization, with almost one in five fatal car crashes involving marijuana. Pot is the second most-commonly detected substance among drivers, according to the U.S. National Roadside Survey. A University of Michigan study of medical marijuana-- medical marijuana users found that 56 percent reported driving within two hours of--

FOLEY: One minute.

MURMAN: --using marijuana, while 21 percent reported driving while very high. So making marijuana more readily available will just increase all kinds of unintended consequences. And as I stated earlier, I think there are some medical problems where marijuana-- medical marijuana would be-- is valuable. It-- it can be used now. We just don't need to make medical marijuana more-- or so-called medical marijuana more widely available in Nebraska. It'll bring many more problems, many more unintention-- unintended consequences than-- than it will help. And it is at least available, not legally, but available for those who really need it now. Thank you, Mr. Lieutenant Governor.

FOLEY: Thank you, Senator Murman. Senator Pansing Brooks, you're recognized. Is Senator Pansing Brooks on the floor?

PANSING BROOKS: Thank you, Mr. Lieutenant Governor. I-- I'm standing to oppose the bracket motion and to support, of course, Senator Wishart's bill and the Judiciary amendment. I have-- during the whole

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six-and-a-half years that I've been here, my heart has been broken time and again by the wonderful, beautiful, strong, courageous mothers who have come to tell their stories time and time again with their beautiful, strong children who have had to endure seizure upon seizure upon seizure while our ears have been closed to their trauma, to-- to the heartrending sadness of trying to deal with their disease, to the-- to the lack of seeming compassion that is coming from this body. It is-- this is, to me, probably the hardest issue I have dealt with in my whole time here. And you all know that I care about children and I fight for children all the time, but this issue, my friends, this issue about our Nebraska children should speak to every heart within this Chamber. This issue is-- is critical to the lives of young people around us. And this morning when I walked in, again, I was greeted and of course broke into tears as I hugged the moms holding the pictures of these young people that I've gotten to know through my position, that I've gotten to be able to represent through my position in the Legislature. And I ask you to open your hearts and open your minds. This body is way behind, once again, way behind where the people of Nebraska are. I thank Senator Wishart and Senator Morfeld for their incredible, steadfast efforts on behalf of people who are hurting, on behalf of people that we have to care about and-- and give love and compassion to and change the laws to help heal. And I give the rest of my time to Senator Morfeld.

FOLEY: Senator Morfeld, would you yield, please? Oh, the time has been yielded to you, 2:00.

MORFELD: Thank you, Mr. President. Colleagues, I want to note just a few things, and then I'm going to start talking a little bit about the AG's Opinion and a legal analysis of it. So first off, I think that there's a lot of paternalism going on right now in the Legislature. Well, Nebraskans just need to know the facts. They were overwhelmingly in support of casino gaming, they're overwhelmingly in support of medical marijuana, but, man, if they just knew the facts, they probably wouldn't be in support. What nonsense. Who are we to tell Nebraskans that we know more than them about certain issues and how they feel about certain issues? They said the same thing about Medicaid expansion, as well, and Nebraskans decided to vote that in and the world hasn't ended. And you know what's going on? More people have coverage. That's all that's happened. Nebraskans understand what marijuana is, and statistically they know personally what it is, overwhelmingly, so we don't need to be paternalistic with Nebraskans about that, Senator Albrecht. They know what marijuana is. They know the dangers. They don't need you to lecture them. So let's talk a

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little bit about the Attorney General's Opinion. Professor Robert Mikos, who is actually an expert on federalism, unlike--

FOLEY: One minute.

MORFELD: --many of us, did a point-by-point analysis of the Attorney General's Opinion. And I want to start going through that. I'm going to run out of time here in a minute, but I'm going to go point by point and talk about the Attorney General's Opinion and the fact that it omits several things. And its implications, if true, if that Opinion is true, has much broader negative impacts in terms of other issues when it comes to federalism. The Attorney General's Opinion is extremely flawed, so I'll go by-- through that point by point. I don't want to start now because I have less than a minute. But, colleagues, Nebraskans know what they want. And let's not talk down to Nebraskans and pretend like they don't know what marijuana is and what the dangers are and what the dangers are not. Thank you, Mr. President.

FOLEY: Thank you, Senator Morfeld. Senator Arch, you're recognized.

ARCH: Thank you, Mr. President. I want to go back to my comments that I began this morning regarding my opposition to LB474 and my rationale for that. Again, I was-- I was talking about the-- this vote, in my mind, becomes a vote to declare to the citizens of Nebraska that we believe that medicinal marijuana is both safe and effective. By setting up dispensing, by setting up how-- how we would distribute, we are saying it's OK, it-- that we're-- that we're endorsing the medicinal use and-- and, in essence, saying safe and effective. And I talked about effectiveness. I want to go back to an article that was published in April of this year. Just a month ago. The AMA published an article by its president, Dr. Susan Bailey, regarding the use of cannabis. And-- and here-- here again is her quote: Public attitudes about legalizing the use of cannabis have changed dramatically over the last 30 years. Recent national polling suggests that roughly two-thirds of Americans favor legalizing cannabis for adult use, while even more support legalizing it for medical use. Adult use of cannabis is now legal in 16 states and the tax revenue generated by its sales is calculated in the billions of dollars. But even so, significant public health and safety questions remain. The National Academies of Sciences, Engineering and Medicine maintains that the medicinal benefits of cannabis are largely unknown and that its use is associated with lower birth weight and increased number of car accidents and other risks. The U.S. Surgeon General has also issued warnings about health risks tied to cannabis use. The science about the benefits of cannabis is limited, while the available evidence demonstrates that legalizing adult use of cannabis poses a threat to

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public health. Our AMA does not support legalization of cannabis for adult use until additional scientific research has been completed to fully document the public health, medical, and economic consequences of its use. We remain particularly concerned about cannabis use by young people, as well as by pregnant or breastfeeding women, and continue to call for a robust public health messaging on the deleterious health effects of cannabis. We cannot ignore the fact that more than 35 states permit patients to use cannabis for a wide variety of what legislatures have determined to be, quote, qualifying medical conditions. It is the AMA's position that scientifically valid and well-controlled clinical trials conducted under federal investigational new drug applications are necessary to assess the safety and effectiveness of all new drugs. The same goes for potential cannabis products. As physicians, we rely on clinical experience, combined with evidence from clinical trials and biomedical research, to guide us during the diagnostic and treatment process, and cannabis should be no different. That from the president of AMA in April of this year. And now I want to turn for a second to the safety issues involved with cannabis. Research has shown that the use of cannabis is not without its risks. Therapeutic Advances in Psychopharmacology, a journal, published an article in December of 2012 entitled "Cannabis, a complex plant: different compounds and different effects on individuals," and I'd like to read-- read some excerpts from that article. Cannabis is a complex plant with major compounds such as delta-9-tetrahydrocannabinol and cannabidiol, which have opposing effects. The discovery of its compounds has led to further discovery of an important neurotransmitter system called the endocannabinoid system. This system is widely distributed in the brain, in the body, and is considered to be responsible for numerous significant functions. There has been a recent and consistent worldwide increase in cannabis potency with increasing associated health concerns. A number of epidemiological research projects have shown links between dose-related cannabis use and an increased risk of development of an enduring psychotic illness. However, it is also known that not everyone who uses cannabis is affected adversely in the same way. What makes someone more susceptible to its negative effects is not yet known. However, there are some emerging vulnerability factors ranging from certain genes to personality characteristics. During the last decade, endocannabinoid research has been one of the fastest growing fields in psychopharmacology, opening ways to discover new medicines for a wide variety of health problems--

FOLEY: One minute.

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ARCH: --ranging from metabolic disorders to glaucoma and schizophrenia. The distribution of the endocannabinoid system in the brain is interesting, as the very same brain areas are also implicated in psychoses, particularly in schizophrenia. Furthermore, complex and intricate involvement of this system with other neurotransmitters, such as dopamine, GABA, and glutamatergic systems may have implications for the development of a psychotic illness. Finding groups who are vulnerable is particularly important so that they can be targeted for early preventative and therapeutic interventions. Such a search would also lead to the discovery of the biochemical mechanisms involved in cannabis and endocannabinoid research and ultimately to a better understanding of how the brain and body functions. Two experts, two opinions, one having to do with effectiveness, one having to do with safety, so we stand here again with this decision of safe and effective and-- and I don't see that in the literature. I don't see the medical community standing up and saying, yes, it is safe and effective, whether it be physicians or the FDA. Thank you very much.

FOLEY: Thank you, Senator Arch. Senator Hilkemann, you're recognized.

HILKEMANN: Thank you very much, Mr. President. This has always been a difficult issue for me since the first year I was here, when Senator Garrett brought it. You know, according to the FDA, this is a Schedule I drug. There's no currently accepted medical use. There's a high potential for abuse, such as marijuana-- and Senator Arch referred to that in his opening comments. And if we accept this, then this is a very simple vote. Why should we be voting to legalize illegal drugs? But, as Senator Arch said, we also have empirical data from our patients that says marijuana has helped them and the list of pain, epilepsy, maybe Alzheimer's, I think that any one of us, we have a friend or a relative that suffers from chronic pain. We've had people then had pain stimulators put in them. They take terrible pain-- pain medications all the day. They've had spinal injections. Some have developed ulcers. Some have had their stomachs wiped out because of using these medications. Wouldn't that be interesting if they could just be taking care of their pain with a simple tablet of marijuana? Then there's those with epilepsy, which we know with Epidiolex that as a prescription it has helped. It was studied right here at UNL-- or at UNMC. It has been approved for patients who want to give their child the opportunity to deal with medical-- with-- with their epilepsy. And I'm going to say that that's a very limited number of areas where that can be utilized as a prescribed drug, as it was done with the research. You know, think about it. I know that if I had a child with epilepsy, if I had a child with epilepsy, I think I would do my

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darndest to get that child in some state-- I would have some friend or some family member take-- take-- take cu-- not custody, but have that child there so that we could give them a try. That's what I would do. I'm also fortunate. I have-- in my career as a podiatrist, I could have practiced in Nebraska. I could practice in Colorado. I could practice in any state I wanted to go to. I have that opportunity to be flexible. Many people do not have that opportunity. So if I had a child with epilepsy, I would do everything I could to help that particular person. That's the compassionate side of me; that's the physician side of me. You know, this is one of these situations, actually, where patients are educating the doctors, rather than doctors educating the patients, when it comes to this whole thing. Now there's the science side of me. At UNMC, we did this study with Epidiolex and the results were that it was effective for certain treatments of epi-- of epilepsy. Why aren't there more studies? We say, why hasn't this been studied more? Well, it's because it is a Schedule I drug. That's the reason why that there is not more research that has been done with these. You know, as a physician, when I prescribed ciprofloxacin or celecoxib, I knew that that drug, when I wrote it, was going to be very predictable, the quality of the drug; when I wrote a particular quantity, how much it could be. But when we get to-- when we get to the marijuana--

FOLEY: One minute.

HILKEMANN: --there's part of me that, you know, we-- we've had studies where the THC levels and the CBD levels and these vary from product to product, and that's a problem. And then there's the practical side to me. Forty-seven other states have been able to make this option available to their citizens, and I say, why can't Nebraska? I would just ask you to look up a couple of things. Go to the Harvard Health blog and look up marijuana. Go to the Mayo Clinic and look at their talk on-- on their page about marijuana. Look at WebMD.com, see what they say about marijuana--

FOLEY: That's time, Senator.

HILKEMANN: --see what these other states--

FOLEY: Senator Hilkemann, Senator Hilkemann--

HILKEMANN: --that have had to deal with it.

FOLEY: Senator Hilkemann, that-- that's time. Thank you. Thank you, Senator Hilkemann. Senator Machaela Cavanaugh.

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M. CAVANAUGH: Thank you, Mr. Lieutenant Governor. Good afternoon, colleagues and-- and Nebraskans. I wanted to respond to something that Senator Lowe had mentioned. He-- he passed out this firearms transaction record and he brings up a very concerning point. I wasn't aware that Senator Wishart's bill was going to require people to use marijuana, regardless of their situation, their health, their own decision making. But according to Senator Lowe, and when you have a gun application, you-- and you live in the state of Nebraska, you are going to have to perjure yourself in your application in order to get a gun, not use your adult decision-making skills to say, I know that it's a federal-- it's against federal regulations, therefore, if I want to have a gun, I cannot accept this prescription for marijuana. But instead, you have to take the prescription for marijuana and then you have to perjure yourself. I mean, that is-- that's something that we should all be concerned about. If you qualify for a prescription for marijuana, you no longer get to decide whether or not to take it. Is that accurate? I'm going to let Senator Wishart let us know if that's accurate and share whatever thoughts she has on her bill that I fully support. I will yield the remainder of my time to Senator Wishart.

WISHART: Thank you.

FOLEY: Senator Wishart, 3:30.

WISHART: Thank you, Senator Cavanaugh. Again, just to restate, we have model legisla-- we have model legislation, if LB474 is passed, to protect gun rights, so people in our country don't have to, and in our state, don't have to make a decision between whether they get access to cannabis for their serious illness or have a gun. So if you support gun rights and the Second Amendment, you should be voting in favor of LB474. I did want to also talk about the medical eff-- efficacy of cannabis. There has been some conversations about the fact that maybe this plant is helpful, maybe not. There is now conclusive evidence to show that cannabis is beneficial for the-- for the list of medical conditions that are included in my legislation, minus PTSD, where there is new information coming out that shows the medical benefit of cannabis in treating PTSD. The medical conditions that are allowed to utilize cannabis in my bill, I have gone through with the Nebraska Medical Association and they have looked at their medical journals and come back and said, yes, there is evidence that this plant-based medicine will work to help somebody who is battling cancer. And let me give you a picture. First of all, colleagues, we-- we talk like we're living in this world where if we don't pass this bill, people aren't going to be illegally using cannabis right now. I drove across the

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state. I talked to people who are illegally using it, the majority who are 50 and older, which is why the AARP has been supportive of this issue. The fastest growing population of people who are utilizing cannabis for medical purposes are 50 years and older, and a lot of them live in Nebraska and I've met them. So this is the situation we're dealing with. Are we just going to sit our head-- stick our heads in the sand and say, well, this person is going to have to drive to Colorado and get recreational cannabis, where they cannot talk with their doctor about utilizing it and what they should use?

FOLEY: One minute.

WISHART: That makes absolutely no sense. Part of policymaking is you weigh the risks and you don't live in a vacuum that isn't the real world, which is what we're dealing with now, which is the fact that we have a 100 percent black market of medical cannabis and cannabis use in Nebraska, 100 percent black-market use. And what I'm asking you to do is to reduce the amount of black-market use in our state by providing a legal, safe, and regulated system for people with serious medical conditions to get access. That's what we're asking with LB474. We're not going back to a period where people aren't accessing cannabis, so you're going to either allow people to access it in a safe and regulated system or, if you vote this down, you're voting in favor of a black-market system where people who are sick have to act like criminals.

FOLEY: That's time, Senator.

WISHART: Thank you.

FOLEY: Thank you, Senator Wishart. Items for the record, please.

ASSISTANT CLERK: Thank you, Mr. President. New resolutions: LR139 by Senator Matt Hansen, LR140 by Senator Matt Hansen, both proposing interim studies. Have a communication from the Clerk of the U.S. House of Representatives regarding the number of congressional representatives that Nebraska is entitled to. LR141, by Senator DeBoer, proposes an interim study. Amendments to be printed: Senator McCollister to LB108; Senator Machaela Cavanaugh to LB376. That's all I have at this time.

FOLEY: Thank you, Mr. Clerk. While the Legislature's in session and capable of transacting business, I propose to sign and do hereby sign the following two legislative resolutions: number LR119 and LR120. Continuing discussion on LB474 and con-- and related matters, Senator Hunt.

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HUNT: Thank you, Mr. Lieutenant Governor. Good afternoon, colleagues. Good afternoon, Nebraskans. You know, I rise still listening to both sides of the conversation. I'm not really sure where I fall on this debate. Just kidding. [LAUGH] Just kidding. This is one where I think there are very few people who are listening to both sides of the debate. And I think that from the conversation that I've been listening to since 9:00 a.m., the opponents to this bill are bringing up opposition that doesn't even apply to this bill, that they're bringing up problems that are completely addressed and solved by this bill, which shows me that they aren't in opposition to LB474. They're in opposition to the whole entire concept, which has nothing to do with the bill, and that, to me, is frustrating. One thing that I've learned in the Legislature here is people often ask, like, what's the hardest part of the job? And what I didn't expect to be the hardest part of the job is that so much of the work we do here is so level one; it's so level one. I feel like life is like a book and the world is like a wonderful novel that we all have the chance to read, and in Nebraska we just keep rereading chapter one. We could be solving big questions, we could be working on big problems, we could be innovating for the future of our economy and our culture and our state, but we just want to keep rereading chapter one. The whole point of life, colleagues, is to live and figure out what makes you happy and let other people have the opportunity to do the same thing, to use all the colors in the crayon box. In Nebraska, we never use all the colors in the box. We just stay on level one. It's boring. Stuff is boring, and it's the kind of stuff that makes our state a laughingstock. It's the kind of stuff that makes corporations and companies and businesses and academics and young professionals look at our state as a place to move and go, phew, I don't know if Nebraska is the place. Look at this 1992-level discussion they're having about medicinal cannabis for people who need it. It's hard to even have a serious debate about this because we aren't starting from a serious premise. We're kind of play-acting in here, a political theater thing where we're all pretending to have a serious debate, but the opponents in this debate aren't even familiar with the bill. They're bringing up things that have nothing to do with the bill, stuff like, well, it's not good for nursing mothers. This bill says that you cannot use it if you're a nursing mother. Marijuana smoke is disgusting. Well, this bill says you can't smoke it. Know what you're talking about before you come in opposition and sound like you're 1,000 years old and keep turning people off of our state. I don't even like marijuana. It doesn't do anything for me. And of course, I've used marijuana, because I'm 35 and I'm normal. But that doesn't mean that I'm going to prevent other people from using it if it does something good for them. I've worked with Senator Lowe and Senator Geist on bills to expand access to

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alcohol, with sealed containers for takeout and support for craft brewers, and of course I've never heard anyone contact my office and say, well, I need to take alcohol for my health, I need to be able to get alcoholic slushies to-go from Night Owl in midtown so that I can help my Parkinson's or my glaucoma. But we have thousands of Nebraskans who have been telling us that cannabis will improve their health, and we have thousands who are already using it in our state who do not-- who do not deserve to be treated like criminals. They don't deserve to be treated like criminals. They deserve to be healthy and they deserve to mind their own business without the interference of politicians. The premise that marijuana is dangerous--

FOLEY: One minute.

HUNT: --within the guardrails and the parameters of LB474, which, as Senator Wayne said, is one of the most conservative medicinal cannabis bills in the country, to say that it's dangerous within those guardrails is ridiculous. You sound out of your mind when you say stuff like that. How do we attract and retain talent in Nebraska? This is the number-one issue that I stand for consistently all the time. We champion issues that matter to young people, like legalizing cannabis. Every day that we wait is another day that we turn patients into criminals, and there's nothing radical about it. It's very medium; it's very chapter one; it's very level one. And I just want to get to level two. I thought when I ran for office, we might be on level two.

FOLEY: Time.

HUNT: Thank you.

FOLEY: Thank you, Senator Hunt. Senator Vargas.

VARGAS: Colleagues, I stand in support of LB474. I've been in support of this in the past. You know, mine is really simple. This bill has been worked on for some time. It's going to be probably the most restrictive-- I think what we heard on the mike in the debate, most restrictive medical cannabis legislation in the country. What's compelling to me is we often come up here and we talk about public support for issues, that public support is driving, and I've heard this from my constituency, I've heard this from my town halls, and that drives us. It's not-- we're not listening to a-- a debate and we're-- we're making decisions based off of the 1 percent or 2 percent or 5 percent or 10 percent. Public opinion does matter in a lot of things. I think it's helpful to inform what we're doing. And in terms of in the positive column, what public opinion on this is, is in support of some form of a medical cannabis legislation. I think that's

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something we can't ignore. The other thing that I take into account is when we are the last ones to do something or we are holdouts and our rationale isn't on trying to make the policy better necessarily; it's sort of, let's make sure the federal government puts their ducks in a row and figures something out. That's what we're also doing here. You know, we-- we look at this map of the number of states that have some existing or even limited or fully legalized program, we are an outlier by far. We're one of the single digits, less than five that have anything in place. And the question that I ask myself is, then at what point do we then do something about that or at what point do we-- do we not? And I think what I'm hearing is that people don't want to do anything, but the rationale is more rooted in more of their personal viewpoint and less on some of these other positive factors in-- in that column for supporting this type of legislation. Other states have been dealing with the same questions and conundrums we have about the federal government's role and-- and whether or not these types of drugs should already be approved and regulated at the federal level and whether or not that's the right pathway. And they debated it and decided, you know what, we do think that the state has the ability and has the wherewithal and the motivation and intent to do something to then provide this as an option. They made it so because states do have their own rights that they're able to then exercise. That's probably the most compelling aspect of this, which does really-- you know, sometimes I look at things we do and I'm looking for lines of consistency across things. The consistency lines, this one really jumps out to me as like I don't understand why we're not being fully consistent. Sometimes we pass things that the AMA has supported; sometimes we don't pass things that the AMA has supported. I don't think it's whether or not something should move forward. I think it is whether or not we're informed amongst legislators and are looking at the policy and has enough safeguards and has been worked on to then move a version of it forward. I am always concerned about whether or not a ballot initiative has more say over what we do. And in this instance, what I'm looking at, we're an outlier for not doing it; our rationales, our reasons are usually been answered by other states and have been able to figure it out. We have people on both sides of this in the medical community that think this is both good and bad--

FOLEY: One minute.

VARGAS: --which means that is not a definitive, it's good or bad, but we have the ability to do something about it. We ran into this when we were regulating opioids where-- where the AMA and different medical associations weren't necessarily black or white on the issue to begin with. We've had these-- these conversations in the past. I think

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that's what's the most compelling thing about this. I may not hear this as much at the doors, but like I've told other people, I don't always hear issues of property tax at my door. That doesn't mean that we still don't discuss it and debate it and at times we're working on it or we work on it in-- in the committee that I work, in Appropriations. We do. There are many issues that don't necessarily always affect what we're doing. But at the end of the day, every time we're an outlier and we don't do something and other states have figured out how to do it, the question I ask myself is, are we choosing not to do it and are sort of putting this stopper in listening to Nebraskans, or do we have an opportunity to--

FOLEY: That's time, Senator.

VARGAS: --step up and be innovative? What was that?

FOLEY: That's time.

VARGAS: Thank you.

FOLEY: Thank you, Senator Vargas. Senator Wishart.

WISHART: Thank you, Mr. President. Let me paint a picture for you of why it is so important that we have a safe and effective medical cannabis system in our state. So when I was first working on this issue, when I was knocking door to door, and this was not an issue that was on my radar, and I happened to knock on the door of a constituent, she is a physician in town, and she started talking-- talking to me about the fact that her grandson has epilepsy, hundreds of seizures a month, hundreds of seizures a month. And her daughter had to move him to a state where cannabis is legal, and it eliminated his seizures and he's a normal boy. And they would love to come back to Nebraska and live with their extended family, but they can't because she would be a criminal and her child would be taken away from her. And I heard the story and I went home and my husband was on LPD at the time, a Lincoln Police officer, and I asked him, I said, I think I'm going to bring a bill on this, am I crazy for doing this as a freshman senator? And he told me first, you should never worry about what people think, you should do what's right, and secondly, that he deals with-- he has so many more issues that he was dealing with in terms of prescription medications and alcohol. It wasn't cannabis that was causing him as a law enforcement officer a lot of issues. It wasn't cannabis at all. So I brought a bill as a freshman senator and I prioritized it as a freshman senator and I took a deep breath and I thought, I might get skewered on this hot-button issue, and here's the thing. I can count on my hands, on my fingers, the amount of times

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I've had a negative email come in about this issue. But I've had countless amount of people across the state talk to me about this, including a gentleman who sat across the table from me. He's a professor who was given a death sentence by his doctor. He had a very severe form of cancer. He was stage IV and his doctor said, you've got ten months to live. And so he went online and he looked at all of the-- the variety of things he could do to try to battle and live, and one of them was cannabis because it helps people have an appetite. We all laugh about the fact that it gives people the munchies. Well, when you're undergoing chemotherapy treatment and one of the main reasons you might die is because of wasting syndrome, you literally can't keep anything down, the munchies is very helpful. So he went to Colorado, because it's illegal here and he can't talk to his doctor about it, and he got recreational-- he went to a recreational store and got some and he didn't have a good experience. So he went and called a doctor in Oregon. Cannabis was just legalized there, and she-- he flew out and he worked with her and she walked him through the specific strain he should have through a suppository, and he used that and he fought cancer. And he came back to me a year later and sat across my desk and he was cancer free. This is what we're talking about.

FOLEY: One minute.

WISHART: Why in the world would we have a system that encourages people to go to the black market instead of talking with their doctors? I mean, think about that. Think about the public health model we are putting in place where cannabis is legal in almost every state and people are using it black market right now, recreationally, medically. And instead we're saying, how about we create a system where you talk with your doctor; when you have a terminal illness, when you're battling cancer, you can talk with your doctor and figure out if this the right direction to go. That's common sense, and that is a good public health policy, which is why you should be supporting LB474. And I hope I'm moving some people on this, but, you know, we'll see. Thank you.

FOLEY: Thank you, Senator Wishart. Senator Williams, you're recognized.

WILLIAMS: Thank you, Mr. President, and good afternoon again, colleagues. And the first time I had the opportunity to talk today, I talked about making difficult decisions in here, and of course that's what we're doing. And I do stand in-- in opposition to LB474. There's been recent talk on the mike about public opinion, and absolutely public opinion matters, matters to each one of us. It certainly matters to me. In my district, I've been sent a clear message by the

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people that come to my town halls: No legalization of marijuana. Now that seems to run counter to what other people are talking about here, about the vote of the people, and I do not doubt at all some of those surveys that have been done and I do not doubt at all the signatures that were signed on the petition to legalize marijuana. But specifically, in my legislative district, I've been contacted many times about that. We-- we've talked about, what would you be willing to do to reduce the tax burden in the state, what are other revenue sources, and when mar-- marijuana comes up as a revenue source, it's a resounding no. I have appreciated the debate. I do have some additional questions that I would like to ask Senator Wishart if she would be willing to respond.

FOLEY: Senator Wishart, would you yield, please?

WISHART: Yes.

WILLIAMS: Thank you, Senator Wishart. We-- when we were talking before, I was just starting to ask you about the protections built into your bill that I'm seeing are on employees in the workplace. And as an employer myself, I'm concerned about what we can do and what we can't do as an employer. Could you kind of walk through that briefly with me?

WISHART: Yes, absolutely. So when I was introducing this bill, the state and local chambers came to-- do you mind if I take some time on this?

WILLIAMS: That's fine.

WISHART: When I was introducing this bill, the state and local chambers came to me with concerns that there needed to be employer protections. And so what I did is I worked with them and accepted everything they requested. So first of all, an employer can drug test and if they drug test and find somebody has THC in their system, they can fire them. I don't have any protections for people who have medical cannabis cards on the job, get tested with THC, and are fired. What I--

WILLIAMS: So an employer--

WISHART: Yeah.

WILLIAMS: --from an employer's standpoint, you should have no fear of that issue with this.

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WISHART: No, and on top of that, we also allow-- we-- we also have in this language that if you are caught and fired, you are not eligible for unemployment.

WILLIAMS: I saw that there were some immunities granted. I'm not sure how you got the trial lawyers and Senator Lathrop on board with that one, but we'll talk about that another time. I want to switch gears a little bit, Senator Wishart. One of the things that has been a-- a troubling matter in other states are the issues with banking and how those have related to the cannabis interest because of the federal regulations that banks are under. Last month, in the middle of April, the House passed the Safe Banking Act in the House. Do you know where that stands now with the Senate in Washington, and what-- what are your thoughts about where that's going?

WISHART: Sure, so this is a great question. I think that we-- there is a strong likelihood that banking reform in the cannabis industry will happen on the federal level; but, nevertheless, this has actually been a windfall for your local bankers who don't have a federal system of banking. Those that are willing to take a little bit more risk are able to bank with marijuana companies in states where it's legal.

WILLIAMS: Well, whether I agree or disagree with LB474, I certainly think that--

FOLEY: One minute.

WILLIAMS: --the industry across our country would be-- be well-served with passage of the Safe Banking Act. If-- if we have just a little bit of time left, and we do, I was concerned about the packaging and the prescribing and the what's-- what's-the-dose kind of concept. Can you talk about the packaging in your bill?

WISHART: Yes, absolutely. So our packaging is required to be packaged similar to other medications, childproof, listing of every ingredient in cannabis and in-- in that medicine.

WILLIAMS: Is there any cap on this THC level in your bill?

WISHART: There's no cap on the THC level, but there's a cap on how much THC you can possess at one time.

WILLIAMS: So they can only--

FOLEY: That's time, Senators.

WILLIAMS: --acquire how-- thank you, Mr. President.

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WISHART: Thank you, Senator Williams and Senator Wishart. Senator Morfeld, your third opportunity, Senator.

MORFELD: Question.

FOLEY: The question's been called. Members, as a point of reference, we've heard from several dozen speakers over several hours. The speaking queue is very lengthy, but the speaking queue will remain intact. We will not dispense the queue regardless of what happens with this motion. Do I see five hands to cease debate? I do. The question is, shall debate cease? Those in favor of ceasing debate vote aye; those opposed vote nay. There's been a request to place the house under call. Senator, you--

MORFELD: [INAUDIBLE]

FOLEY: [LAUGH] Record, please.

ASSISTANT CLERK: 26 ayes, 10 nays to cease debate.

FOLEY: Debate does cease. Senator Slama, you're recognized to close on the bracket motion.

SLAMA: Thank you, Mr. President.

FOLEY: Excuse-- excuse me, excuse me.

SLAMA: Oh.

FOLEY: I had that right. Senator Slama, you're recognized.

SLAMA: Thank you, Mr. President. How much time do I have for my close?

FOLEY: Five minutes.

SLAMA: Thank you, Mr. President. Good afternoon, colleagues. I-- I do appreciate the extensive debate that we have had on this bracket motion thus far. I do think overall debate today has been really substantive, aside from a few exceptions where we haven't gotten personal on the floor, so I-- I really do appreciate that. I think Nebraskans deserve a well-grounded debate about the benefits, drawbacks, and potential consequences about LB474. I remain opposed to LB474. I would appreciate a green light vote on my upcoming bracket motion on the basis of I do believe that LB474 is unconstitutional. And I have not yet gotten to the finish of what I believe is a-- a great Attorney General's Opinion on this issue. It's from 2019, from a substantially similar piece of legislation, and I'm to the last bit of

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it. So with the remainder of my closing, I will wrap this up as best I can. I think we may have other motions pending after that. But returning to that Attorney General's position, which Senator Hilgers has done a great job of breaking this out and summarizing it in different ways so everybody in the body can understand the Attorney General's position and why I do believe this is unconstitutional, but I do think it's important for the record to have this Attorney General's Opinion in there, in full. So continuing on, on page 7, paragraph four: It is the opinion of this office that the MCA would suffer from the same legal infirmities as the California scheme in Raich. Notwithstanding the fact that state-level marijuana legalization schemes have spread in recent and discretionary unwillingness by the federal government to civilly enforce the CSA against the states, that exercise of discretion simply does not change the federal law that remains on the books and which Congress has steadfastly maintained. So the AG's Opinion gets to a point that Senator Hilgers and I have said on the mike, is that a big downfall of our federal government is that they fail to enforce their laws. Marijuana is still a Schedule I narcotic, and we've seen a widespread failure of the federal government to enforce their own laws, which I-- I think is what's drawn us to this point here today. And it's a real letdown for anybody. Whether or not you agree with marijuana legalization or not, you have to admit that the federal government has dropped the ball in their enforcement or at least being consistent in how they're enforcing federal law when it comes to marijuana. Returning to the Opinion: That is evident from the text of the various administrative memoranda that have been issued to guide the federal government's present posture of nonenforcement. In the most recent of these, issued in early 2018, even as the U.S. Attorney General directed federal prosecutors to follow well-established principles in determining which marijuana activities merit-- merited prosecution within their jurisdiction, he promised his guidance with a reaffirmation of the CSA's prohibition on the cultivation, distribution, and possession of marijuana, memorandum from Jefferson B Sessions, Attorney General, U.S. Department of Justice, to all U.S. attorneys. Intrabureaucratic guidance memoranda simply do not change federal law. Let me repeat that: Intrabureaucratic guidance memoranda simply does not change federal law. Given *Gonzales v. Raich* and given the text and legislative history of the CSA, there is no doubt that Congress intended the CSA to serve the purpose of making all manufacture, sale, and possession of regulated drugs illegal, except to the extent explicitly authorized by the CSA. Nothing about the federal government's relaxed view of its enforcement obligations under the CSA changes the fact--

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FOLEY: One minute.

SLAMA: Thank you, Mr. President-- that Congress intended the CSA to prohibit the type of legalization proposed by the MCA. Indeed, in the briefing it filed with the Supreme Court in *Gonzales v. Raich*, the federal government confirmed that it shares this understanding of the intent and purpose of the CSA. Congress has taken no action in the decade-plus since to indicate a different intent and purpose. And, if exception-- excepting drug activity for personal use or free distribution from the sweep of the CSA would discourage the consumption of lawful controlled substances and would undermine Congress's intent to regulate the drug market comprehensively to protect public health and safety-- now there's a couple of paragraphs left, including the conclusion. I want to make sure we get there. I'll be up on another time on the mike, but I would encourage the adoption of my motion to bracket this bill until June 10, 2021. Thank you, Mr. President. And with that, I'll request a call of the house and a roll call vote in reverse order, please.

FOLEY: There's been a request to place the house under call. The question is, shall the house go under call? Those in favor vote aye; those opposed vote nay. Record, please.

ASSISTANT CLERK: 20 ayes, 3 nays to go under call, Mr. President.

FOLEY: House is under call. All senators please return to your desks and check in. The house is under call. All senators please return to the Chamber and check in. The house is under call. Senator Linehan, would you check in, please. Senator McCollister, check in. Senator Wayne, please return to the Chamber and check in. Senator Slama, we're lacking Senator Wayne. We can wait or proceed.

SLAMA: [INAUDIBLE]

FOLEY: We'll wait. All unexcused members are now present. The question before the body is whether or not to bracket the bill. A roll call vote in reverse order has been requested, Mr. Clerk.

ASSISTANT CLERK: Senator Wishart voting no. Senator Williams not voting. Senator Wayne voting no. Senator Walz voting no. Senator Vargas voting no. Senator Stinner voting no. Senator Slama not voting. Senator Sanders voting yes. Senator Pansing Brooks voting no. Senator Pahls voting no. Senator Murman voting yes. Senator Moser voting yes. Senator Morfeld voting no. Senator McKinney voting no. Senator McDonnell voting no. Senator McCollister voting no. Senator Lowe voting yes. Senator Linehan voting yes. Senator Lindstrom voting no.

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Senator Lathrop voting no. Senator Kolterman voting no. Senator Hunt voting no. Senator Hughes. Senator Hughes voting yes. Senator Hilkemann voting no. Senator Hilgers voting yes. Senator Matt Hansen voting no. Senator Ben Hansen not voting. Senator Halloran not voting. Senator Groene. Senator Gragert not voting. Senator Geist voting yes. Senator Friesen voting yes. Senator Flood voting no. Senator Erdman voting yes. Senator Dorn voting no. Senator DeBoer voting no. Senator Day voting no. Senator Clements voting yes. Senator Machaela Cavanaugh voting no. Senator John Cavanaugh voting no. Senator Briese voting yes. Senator Brewer voting yes. Senator Brandt voting no. Senator Bostelman voting yes. Senator Bostar voting no. Senator Blood voting no. Senator Arch voting yes. Senator Albrecht voting yes. Senator Aguilar voting no. Vote is 16 ayes, 27 nays, Mr. President, on the motion to bracket.

FOLEY: The bracket motion is not successful. I raise the call. Mr. Clerk.

ASSISTANT CLERK: Mr. President, I have a priority motion. Senator Slama would move to reconsider the vote just taken.

FOLEY: Senator Slama, you're recognized to open on your reconsideration motion.

SLAMA: Thank you, Mr. President, and good afternoon, colleagues. I know it's been a little while, but I again do appreciate the debate that we've had on LB474 thus far. I-- I just want to hop right back into this Attorney General's Opinion, and then I will end up yielding the remainder of my time to Senator Lowe because I think he has raised some outstanding issues regarding Second Amendment rights and the consequences that LB474 may have for those. So returning to the Attorney General's Opinion, we're in the last two paragraphs, so bear with me. To quote the Attorney General's Opinion from August 1, 2019, with regards to then LB110, which is substantially similar to LB474, second paragraph. This is particularly so given the CSA's provision at 21 U.S.C Section 903 that a state law is preempted when a positive conflict exists, such that if CSA provision and the state law in question cannot consistently stand together, such a positive conflict clearly exists between the CSA and the MCA. Conclusion: In sum, we conclude that the MCA, by creating a state regulatory scheme that would affirmatively facilitate the cultivation, processing, wholesale distribution, and retail sale of federal contraband on an industrial scale would frustrate and conflict with the purpose and intent of the CSA. Accordingly, we conclude that the MCA would be preempted by the CSA and would be therefore unconstitutional. I agree with Attorney General Doug Peterson about this type of bill's constitutionality.

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That's the main reason behind my opposition to LB474. And with that, I'd like to yield the remainder of my time to Senator Lowe.

FOLEY: Thank you, Senator Slama. Senator Lowe, 8:00.

LOWE: Thank you, Mr. President, and thank you, Senator Slama. I want to go back to talking about firearm laws and medical marijuana. Let us be very clear. You fail a gun background check if you truthfully admit that you use medical marijuana. I passed out the Form 4473 from the ATF, the form you fill out when you buy a gun of any kind. I appreciate that Senator Wishart included protections for the gun owners when it comes to state law, but background checks are done on a federal level and, unfortunately, no matter what protections are added to this bill on a state level, an individual will fail a federal background check if they are a medical marijuana user. This is a fact that has played out in other states. This is a fact that has been held up in our court systems and not just state courts. The Ninth U.S. Circuit Court of Appeals has heard a case when it comes to simply having a medical marijuana card and attempting to purchase a firearm. The court ruled the federal government was within its rights to prevent the sale of a firearm to the person who had a medical marijuana card. So it has been proven in court. This is an issue that has found its way into the halls of Congress. There have been now four bills introduced in Congress because congressmen and U.S. senator know that the federal government is preventing people from buying guns in states that have passed bills similar to this. Unfortunately, none of those bills have gone anywhere. From the article I was reading earlier, "Guns versus weed: How background checks conflict with state cannabis laws": A Philly doctor sues to have both medical weed and a gun. One of the most inter-- interesting recent cases involves the Philadelphia doctor and a medical cannabis holder who last year filed suit against the federal government for his right to purchase a gun while also admitting to cannabis use. That doctor, a 34-year-old Matthew Roman, tried to purchase a five-shot Smith and Wesson 638 revolver. But when the gun dealer asked Roman if he was a marijuana-- if he used marijuana, Roman told the truth. He said yes, and the dealer turned him down. Roman then decided to sue the federal government, making his-- this case the most direct challenge so far to the underlying federal law, the Gun Control Act of 1968, which prohibits cannabis users from owning guns. Another case in Nevada went all the way to the Ninth U.S. Circuit Court of Appeals in 2016. In this case, a woman, S. Rowan Wilson, was blocked from purch-- purchasing a firearm by a gun dealer who knew she had a medical marijuana card. Wilson argued that while she possessed the card, she did not actually use marijuana. The appeals court agreed with the

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lower court decision to throw out Wilson's lawsuit. The court, while acknowledging that Wilson's rights may have been infringed, asserted that the federal government was justified in preventing drug users, including marijuana users, from owning guns because they are likely to experience altered or impaired mental states that affect their judgment and that can lead to irrational or unpredictable behavior. This ruling, however, was blasted by legal cannabis advocates. There is no credible justification for medical-- or for marijuana exception to the US Constitution, said Paul Armentano, deputy director for the National Organization for Reform in Marijuana Laws, NORML, in response. Responsible adults who use cannabis in a manner that is compliant with the laws of their states ought to receive the same legal rights and protections as do other citizens. It is incumbent that the members of Congress act swift-- swiftly to amend the cannabis criminal status in a way that comports with the public and scientific option [SIC] as well as rapidly changing legal status under state laws, Armentano told WhoWhatWhy that, while cannabis advocates were quite vocal about this issue, gun right groups were notably absent. Ironically, gun rights advocacy groups like the NRA have never seemed to go on record commenting about this particular topic, he said. The future of gun ownership for legal cannabis user-- users: As long as cannabis remains illegal at the federal level, state legal cannabis users who desire to buy guns will tread shaky legal ground. Legal cannabis advocates, while continuing to press for federal legalization, also seek stopgap measures until the day arrives. Karen O'Keefe, director of the state policies for Marijuana Policy Project, MPPP [SIC], told whoever-- WhoWhatWhereWhy [SIC] that such a measure would include amending federal law such that marijuana use would no longer preclude a person from owning a gun and, furthermore, that all mention of marijuana on Form 4473 be eliminated. Marijuana use should, of course, be legal at the state level, at the federal level for adults, she said, so that a person would not be unlawful user, but in the interim, certainly I think that a person shouldn't have to give up their gun rights because they use cannabis instead of alcohol or the most-- more dangerous prescription drugs. Some state and federal legislation has been discussed and advanced, but so far no specific law has been passed at either level that addresses this issue. The most recent attempt comes from U.S. Representative-- Representative Alex Mooney, Republican, of West Virginia, who recently introduced a bill in the House that would create an exception for the federal gun law for legal medi-- medical cannabis-- cannabis users-- users. Another Republican congressman, Thomas Massie of Kentucky, suggested a similar bill last year, but has not been-- but it has not yet been put forward. His proposal, though, would go further than Mooney's bill and cover state legal recreational use--

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FOLEY: One minute.

LOWE: Thank you, Lieutenant Governor-- while also eliminating the entire question regarding drug use on Form 4473. One other attempt at federal level went nowhere. In 2016, Lisa Murkowski, Republican, of Alaska, made a fuss about the subject and she sent a letter to then-Attorney General Loretta Lynch citing her concerns. Lynch, however, took no action. And neither has Jeff Sessions, nor Matthew Whitaker, nor William Barr, who succeeded her as Attorney General. The cause has also been taken up at state level in Maryland, where State Senator Michael Hough introduced a bill in 2018 that would prohibit state police from denying gun permits solely on the basis that the person authorized the use of medical cannabis. That bill, however, has gone nowhere. So the conversation that we have put laws into this bill that will protect--

FOLEY: That's time.

LOWE: Thank you.

FOLEY: Thank you, Senator Lowe. Continuing discussion, Senator McDonnell.

McDONNELL: Thank you, Mr. President. I'll yield my time to Senator Wishart.

FOLEY: Senator Wishart, 5:00.

WISHART: Thank you, Mr. President. Thank you, Senator McDonnell. And, colleagues, thank you so much for keeping this bill alive. I know that there are some senators who are giving me the grace of addressing some of their concerns and potentially coming with some amendments. And I'm hopeful that this body will be open-minded enough to entertain that. When I look at LB474, is this what I would want to do as a senator? No. Senator Lathrop, Chairman Lathrop, spoke about the type of bill that I brought my first year, which would-- allowed for home growing, many more facilities to grow and-- and dispense cannabis. But when I think about the patients who are in the Rotunda right now and the people who are listening, who are Tweeting at me and texting me and emailing me, I put what I wanted aside and focused on them, because in reality, to me, if you're somebody right now who wants to use cannabis recreationally, people are doing it. We have a system already, 100 percent black-market use now in Nebraska with people using cannabis recreationally. So instead, the people that we're harming are individuals who have such significant medical conditions or want to follow the law that they can't participate, the very people who would

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benefit from the medical use of this. If this bill fails today, there will be no legislative action next year that will stop a ballot initiative. I don't-- I've heard some people say, well, maybe next year, maybe we'll work on it next year. No. The reason I brought this bill back this year was to give our Legislature one more chance and to finally get a vote and some closure to the families who care about this issue. But we're going to the ballot because, frankly, I had to pull a lot of the advocates who care about this issue with me to get them to not rail on me for whittling down LB474 to the way it is. You all think that you're having to come a long way for this? Try telling a lot of people who got left out of this cannabis system when I agreed to put a list of medical conditions. So we'd all prefer a constitutional right. And frankly, with the way that a lot of people in power act around here, this almost has to go into the constitution to truly protect somebody's right to have access to a plant that's been around for 10,000 years and you cannot fatally die from and has a very low toxicity for overdose. And yet I don't see a single senator here willing to make opiates illegal, the number-one cause of death in the country for people. Thousands of people die a year from overdosing on opiates, and we have an opportunity to give doctors a tool that not one person in the history of the world and cannabis has died from it. In Minnesota, when they legalized cannabis medically, they saw 63 percent reduction of people who were on opioids and got off of it to use medical cannabis instead. Those are lives saved because of legalizing cannabis, lives saved. I don't see a lot of people listening anymore. That's how we kind of get when we're going marathon on this. If you have issues with this particular bill and things that you would like to see me address, I'm willing to address them. There are very few hard lines on this issue for me as long as it provides relief to Colten and Will.

FOLEY: That's time, Senator. Thank you, Senator Wishart. Senator Briese.

BRIESE: Thank you, Mr. President. I would yield my time to Senator Geist.

FOLEY: Senator Geist, 5:00.

GEIST: Thank you. Thank you, Mr. President. And I'm going to read an editorial that just came out April 4, 2-- 2021. This was published in the Denver Gazette. And it says: An insider-- oops, it just disappeared. Let's go back. Sorry about that, folks. Well, while I'm trying to find that, I'll switch over here to something else. Shoot. Anyway, one of the things that we talked about earlier was high THC levels, and I think I was probably not very clear about what my

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objection to those are, and because Senator Day was mentioning something about Marinol. So I looked up the potency of Marinol and what is the concentration of THC in the dosing of Marinol? And it's 2.5, 5 percent, and 10 percent, and 10 percent is considered a dose, and anything that's 18 percent or higher is what's considered high potency. So Marinol wouldn't be included in the objection-- in the objection that I'm-- that I'm raising with the high-potency THC that I was referring to earlier. And I am still looking for this silly thing that disappeared on my phone. This is one of the terrible things about-- one of the bad things about technology is when it doesn't work. Anyway, well, then I will give you my next position statement that was given by the American Psychiatric Association about what is their stance on cannabis as medicine. And it says their position is there is no current scientific evidence that cannabis is in any-- oh, and, by the way, I want to say that this was published in 2019, so not back in the '90s. This is current. There's no current scientific evidence that cannabis is in any way beneficial for the treatment of any psychiatric disorder. In contrast, current evidence supports, at minimum, a strong association of cannabis use with onset of psychiatric disorders. Adolescents are particularly vulnerable to harm given the effects of cannabis on neurological development. It goes on with several other statements. It says policy and practice surrounding cannabis-derived substances should not be altered until sufficient clinical evidence supports such changes. Regarding state initiatives to authorize the use of canna-- cannabis for medical purposes, medical treatment should be evidence-based and determined by professional standards of care. It should not be authorized by ballot initiatives. No medication approved by the FDA-- well, that's-- we're going to skip over that because that doesn't specifically apply to this bill. Nonsmoked means of consumption, such as edible forms of cannabis, tinctures and ointments, have variable absorption, bioavailability, and range of-- of-- phytocannabinoids and other biologically active compounds which are not measured or controlled for in production, which means it's not every case, every application or every--

FOLEY: One minute.

GEIST: --pill is not pharmaceutical grade, which means the active ingredients change or the inactive ingredients change. Physicians who recommend use of cannabis for medical purposes should be fully aware of the risks and liabilities inherent in doing so. The APA does not endorse cannabis as medicine. The AMA, the Medic-- American Medical Association, policy believes that scientifically valid and well-controlled clinical trials should be conducted under federal and investigational new drug applications for cannabis, believes that

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cannabis for medical use should not be legalized through the state legislative, ballot initiative, or referendum process. Thank you, Mr. President.

FOLEY: Thank you, Senator Geist. Senator Gay-- excuse me, Senator Day.

DAY: Thank you, Mr. President. And thank you to Senator Geist for clarifying what she was talking about earlier with high-potency THC. And in her explanation, she referenced Marinol, which I wanted to talk about again. We're hearing a lot of discussion about how there's no validated medical uses for cannabis, but we know that we have two portions of the whole cannabis plant that have already been technically legalized in terms of we have a synthetic form of THC in Marinol that is FDA approved for use and we also have legalized CBD. So we've got two portions of the whole plant that we have for legal therapeutic use, but we don't-- we can't find the political will to legalize the plant in its entire form, which we know is a more effective use or would be more effective in its use than pulling the plant apart into two-- into multiple different pieces for therapeutic use. When we talk about Marinol, studies show that Marinol is more psychoactive than natural cannabis, up to four to five times more psychoactive than the natural cannabis that is found in the whole plant. Additionally, Marinol is 100 percent THC, and because it is synthetic, it-- it doesn't contain the other therapeutic compounds available in natural cannabis known as cannabinoids, terpenoids, and flavonoids. This is what I was referencing earlier when we talk about the plant as a whole and its ability to provide medical therapeutic effects and the protective effects of the other portions of the plant that you cannot find in the legal synthetic version of Marinol, which is synthetic THC, essentially. Clinical data indicates that the synergism of these compounds is likely more efficacious than the administration of THC alone. Again, so we're talking about Marinol, which is a federally approved drug that is synthetic THC that is prescribed for nausea, eating disorders, any nausea that results from chemotherapy, those types of things, which would be the exact conditions that the whole plant would be used for. So when we're talking about being afraid of THC and the effects or driving and the effects on THC, we already have that legalized. It's federally approved already in synthetic form. Additionally, CBD is also legally approved. So again, we've got two portions of the plant already legal, but we can't, again, find the political will to legalize the plant as a whole, which we know is more effective medically. Right? And the other-- the other point that I wanted to mention was I had a really great conversation with Senator Hilkemann the other day. Being a freshman Senator, I'm getting used to, you know, some of the norms in

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the body, and-- and we were specifically talking about cloture votes. And when it comes to certain bills that, you know, we know we're going to go eight hours and they're going to need a cloture vote on it to get it to the next round of debate, he-- he said to me, you know, there may be some bills that you may not feel really strongly about, maybe you don't even support, but you may be willing to give them a cloture vote because you'd like to see it move to the next round so we can--

FOLEY: One minute.

DAY: --continue with discussion and maybe get the bill to a better place. And so that's my recommendation to you guys today. If there's any of you in here that are on the fence about this issue, I think Senator Wishart has proven that she is willing to work with everyone in this body to get to a place where we can come to some kind of a compromise on this bill. So if you would be willing to give us a cloture vote on this, I think that that would be a great compromise so we can move it from General just to Select so we can continue to have this discussion and work on this. Thank you, Mr. President.

FOLEY: Thank you, Senator Day. Senator Geist.

GEIST: Yes, thank you, Mr. President. I have old-fashioned paper now so I can read this article for you. It was published April 4, 2021, and it's called "An insider denounces Big Marijuana." As one of the architects of legalized marijuana in Colorado, Rob Corry was-- has profound regrets. That's clear from his extensive commentary published in today's Sunday Perspective section. It is a recounting of dashed hopes, a confession of his own naïveté, an exposé by an insider, and a denunciation of the cynical industry that dominates today's marijuana market. Corry's change of heart is noteworthy because he has played a predominant role in Colorado's legalization movement. The Stanford-trained lawyer helped draft groundbreaking Amendment 64, adopted by voters on the statewide ballot in 2012. The complicated measure's many moving parts created the framework for the legal use, production, sales and taxation of marijuana statewide. Corry designed and implemented the dispensary framework for patients and caregivers under Amendment 20, enacted by the state's vote-- the state's vote-- 2000 to allow medical use of marijuana. He has extensive experience representing clients accused of the marijuana-related offenses and has been involved in litigation and administrative actions concerning the implementation of Amendment 64. Nearly a decade after Colorado voters bought into legalization, Corry now says he is deeply dismayed by the results. While he continues to support legalization in itself, he acknowledges the reality is not all that he envisioned and has left

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him with wide-ranging misgivings. His original vision as one of the framers of legalization strikes us in hindsight as having been doomed from the start. He writes in today's commentary that he had sought to protect individual rights to grow and distribute on a personal level and to focus limited police resources against real crime with actual victims. He had wanted to create a free pri-- free enterprise system, taxed and regulated similar to alcohol for commercial sales, and allow for true competition and innovation by upstanding business people. Once the genie was out of the bottle, those like Corry, who had let it loose, had little hope of reining it in. It wound up answering to a much more formidable master, notably, a big industry Corry now sees as an oligo-- oligo-- ol-- oligopoly of crony capitalism that he likens to a criminal cabal. Corry's jaundiced view of pot's latter-day purveyors is in fact one of the le-- least three important takeaways from his eye-opening commentary. Big-- big marijuana is reckless, greedy, and ruthless, he observes. No true free enterprise exists in this regulated industry, but rather in small oligopoly-- ol-- whatever that word is-- of crony capitalism who are given privileged government licenses. Licenses are capped and new-- new entry is nearly impossible. Extreme regulations are created and supported by the big players, be these big-- and the big players over smaller competitors. The regulators themselves daily pass through an unrestrained revolving door between government and the industry they support. True competition is lacking. Industry exploits its centrally planned--

FOLEY: One minute.

GEIST: --regulatory system to fix inflated prices and government chips in extreme taxes at levels imposed on no other product. Regressive pricing disproportionately harms the poor, and the quality of this overpriced, commercialized product is awful and actually harmful to both adults and children alike. And with that, there is more. It's also-- but with the time I'm given, I will just pick it up when I come back in. Thank you, Mr. President.

FOLEY: Thank you, Senator Geist. Senator Moser.

MOSER: Thank you. I would like to ask Senator Hilkemann a few questions if he would answer some.

FOLEY: Senator Hilkemann, would you yield, please?

HILKEMANN: Yes, I will.

MOSER: We had a little discussion in between the debate today, and I just wanted to kind of go through that a little bit to kind of

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describe the situation. We were talking about using medicines for purposes for which they're not intended. What do they call that?

HILKEMANN: That's referred to as off-label use of a drug.

MOSER: So if-- if a medical professional prescribes a drug for a purpose that it's not intended for, or at least it was not tested on, for that matter, does the medical professional assume some liability?

HILKEMANN: Well, Senator, that's a good question. We do not in the sense that we are judged by what is the reasonable standard of care. What-- in-- in my profession as a podiatrist, I-- if I were the only podiatrist that did such and such and such, they might say, hmm, what's this-- what's this Dr. Hilkemann doing with it? But when you-- when you work with your colleagues and other people, you-- you learn that there's a therapy with it and you can say, yes, I used Neurontin, for example, which is an anxiety drug for neuropathy. Now that's well-established and-- and it is used frequently by podiatrists for treating a very painful condition of the feet called neuropathy.

MOSER: Do insurance companies typically cover medicine that's used for an off-label purpose?

HILKEMANN: In-- in-- in most cases they will. Sometimes I-- I would have a-- occasionally a pharmacist might call and say, why are you prescribing Neurontin for this, or something of that sort, and then you have to do an explanation to that particular pharmacist. But-- but I probably had that happen three or four times in my career.

MOSER: Why doesn't the medical profession come to us with a united front on how to address medical marijuana? Why do they leave it to the legislators to try to sort through the-- the facts and the-- the BS that-- that some of it may be? Why doesn't--

HILKEMANN: Senator, I--

MOSER: --the medical community help us out here?

HILKEMANN: Well, they would love to help you out. And I think-- I think Senator Hilgers-- Speaker Hilgers hit this. This is one of those situations where our national government has let us down big time on this one. And I-- I-- you know, it was not available to me. I've actually talked to some of my colleagues about this, whether they would like to see this medical marijuana bill passed. And most of them at this point are not, you know, are not big fans of having it pass because of-- of a lot of the other things that happen with-- with

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the-- with the-- with the marijuana. Unfortunately, the drug itself has a bad name. So I'm-- I think the way this bill is structured, the medical marijuana bill, we are-- it is so well-defined. That's why I'm even considering this. If we were thinking of recreational marijuana like we have in Colorado, this would be an easy decision for me. It would be a flat no.

MOSER: Because I've-- I've talked to some MDs who support the Legislature allowing for medical marijuana and--

HILKEMANN: I think if you-- if we-- if you were able to talk to a lot of your physicians, there's a lot of physicians who would love to see this bill pass.

FOLEY: One minute.

MOSER: Well, I certainly think it would be better if we had better information to work with and-- and more of a consensus about where we're going and what we're allowing. You know, it's pretty difficult for us to sort through all this and-- and be confident that we're doing the right thing. Thank you, Senator--

HILKEMANN: Senator--

MOSER: --appreciate it.

HILKEMANN: Oh, thank you, Senator Moser.

MOSER: Go-- go ahead if you got a comment but--

HILKEMANN: Yeah. My comment would be is-- on that is, is that a lot of times, unfortunately, when it comes to healthcare issues, a lot of these issues, legislators are asked to-- to make decisions that, frankly, that's not their bailiwick, and yet we make the laws and that-- this is one of those where we have to just discern the best we can with the knowledge that you have and make that decision.

MOSER: OK, thank you very much.

FOLEY: Thank you, Senators Moser and Hilkemann. Senator Pahls, you're recognized.

PAHLS: Thank you, Mr. President. I want to thank Senator Day sort of to enlighten, hopefully, the public. We are talking an awful lot on this bill. There's a reason behind it. So sometimes you may hear some arguments or some reading material. That's what I call, a good part of the time, is filler, not all the time, but a good time is filler. In

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fact, I almost was feeling bad until today. A couple days ago, when I was reading of the 72 counties who did not have as much property tax as Douglas County and I was reading the list of counties and people were looking at me like something was strange. Well, that was sort of a filler. But there's another thing I'd like to thank Senator Day for, when she mentioned earlier in the day about off-label drugs. And I think we just talked about-- the two senators before me were talking about that. Off-label drugs reminded me of my youth. Excuse me. When-- when I was in first grade, which was a day or two ago, I captured something. They didn't know what it was. They thought it was Huntington's chorea, which if I was-- so I would be dead now, or St. Vitus' dance. I was in a room all by myself. The lights-- no lights. All my siblings were shipped off to someplace else because I needed total quiet, couldn't walk. I laid in a bed for several months. If I had to go to the bathroom, my mother carried me. But one thing I thought was very interesting. My doctor, who was way ahead of his time-- and I got to thinking maybe he was giving me some of this stuff we're talking about today. But I do know one of the items that-- because I had to drink a lot of water and one of them a little later on, I found out-- again, it had to be highly diluted-- they were feeding me strychnine. They were trying to find something that would basically give this cure to me. And I am sure he was giving me a lot of medicines that-- that typically they would not prescribe, but they were really questioning what I had. And apparently after I think about four months of-- of having a very restful time in bed and not seeing anybody in the-- in darkened rooms, I-- I did recover, at least some people would say I recovered. And also another interesting thing is the last time I was down in the-- this body, I contracted a virus which hit my lungs and my kidneys and almost put me away. But as I said, God spit me back for some reason. Maybe that is to be back here. I don't know. But the interesting thing, I found out that they were giving me some drugs and one had to do with people with cancer. I was taking cancer drugs. I did not have cancer. So I asked the doctor later on, why are-- why am I taking this? Because, I said, lots of things are happening, my skin is getting thinner and my hair is getting curly. And he said, that's because I-- I'm feeding you these drugs. I said, well, why? He said, we don't know why it works, but it works. And you know what I said? Good job, Doc, because-- I said that because-- I said, I'm just really surprised at all these cancer drugs I'm taking and not having cancer. He said, we do that on lots of things, so, and, again, I-- I got lucky on that deal. So I go back and forth on this. I'm assuming that some of these people who have conditions worse than I in the past-- and I happened to survive because I had some creative doctors working with me, doing the unusual to get rid of my pain or the symptoms that I had. And apparently it

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worked for at least as long as-- because I've been around a while, so some of these doctors that are thinking-- so that's why I'm-- also, today, some of the ways we're thinking about using this particular plant could be of value to us.

FOLEY: One minute.

PAHLS: Thank you. One way I look at it, there are a number of people who do not want this to go forth. I get that. You may win that battle, but I think you're going to lose the war because if the public gets hold of this, I think things will happen. And you say, oh, no, that ain't gonna happen. Look at your vote when you voted against gambling. Some of the same people who voted against gambling, guess what? We have gambling. And on the other side, those people who in thi-- this body did away with death penalty, probably on the other side, what happened? The public says, no, we want it. Same way, I think it was brought up earlier, about Medicaid. So if we can't get our act together, I think somebody will get it together for us. I do see merit because I think there are enough constraints on this particular bill that it is probably doable. Whether the votes are there--

FOLEY: That's time.

PAHLS: --I don't know. Thank you.

FOLEY: Thank you, Senator Pahls. Senator Brewer.

BREWER: Thank you, Mr. President. This has been an educational debate. I-- I guess I sometimes get upset when people say, well, you know, there's folks that don't want to be serious in the discussion. Unfortunately, the nature of the beast here is sometimes folks don't see the purpose of others' discussion on topics. Now a lot of folks have used the issue of-- of veterans to talk about why we should pass this bill. And I will tell you that I don't speak on issues that have to do with children, have to do with women, things like that, because I-- I don't know enough. And quite frankly, your time is more important than me getting up and jacking my jaws and telling you what I think, if I have anything intelligent to say about it. But I think on this issue I can talk it. Let's run down the checklist here. Am I a veteran? Yeah. Have I had major injuries? I think so. We're at 47 surgeries. Have I had traumatic brain injury? Yes. Have I had cancer? Yes. Have I had PTSD? Yes. So we're going to-- we're going to take a look at all that and see how that's all going to be affected by this bill. I think there's potential that the-- good things could-- could come of the right bill doing the right thing. My concern is that I spent two years after we retired working with wounded veterans in a

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very difficult environment in Montana, and we thought we had a way of helping veterans to deal with their issues. Of the 27 who we worked with, 9 are now dead from suicide, so we didn't have that figured out very well. And part of that was that the medications that they were being given not only let-- let them leave reality, but wouldn't let them deal with their problems. I-- I would like to think that if we had a system of self-dispensing pain medication, that it could be managed by those using it in a way that would be positive. It's not the experience that we've had with veterans. It's a constant problem we have. Suicide is a constant factor. Some people crawl into a bottle and some will crawl into a bottle of meds. The temptation's there. There's not a day I don't wake up and really hurt, but sometimes leaving reality is-- is the part that really causes you to lose track of life and its purpose. So I worry that the way we would use a-- a self-dispensing painkiller could have negative effects, not positive. I also struggle the fact that I represent-- well, I'd have to argue with-- with Senator Erdman, but one of the most conservative districts in the state and-- and our count now is 100-and-some opposed and only a handful in support, and that's because of the Colorado experience, I'm sure of it. Not that we're doing what Colorado is doing, but it scares them. You used to be able to go to Denver and enjoy yourself and go downtown and not-- not see what is there now. And I was just there last summer and it really was so much different than what I remembered. What that does is it spooks folks and-- and makes them think, that's not what I want to see Nebraska become. Now I think Senator Wishart has done an amazing job--

FOLEY: One minute.

BREWER: --of working this bill, and her and her staff ought to be commended because they've never not wanted to sit down and listen and work through issues. And I cannot think of anyone who I would trust more than her if-- if we're on Kilimanjaro and I need someone to, you know, watch my six and help me, it would be her that I would ask. So I guess I-- I want to say that I think she's done an amazing job of trying to work through possible solutions. But from the veteran's perspective, I think there's danger and that is what concerns me about the bill here today. Thank you, Mr. President.

FOLEY: Thank you, Senator Brewer. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Mr. President. I still stand in support of the bracket motion, the reconsideration. I want to read a column to you, an article. It's a guest column. It's a-- it's a dangerous gap in our medical marijuana laws. It's by Libby Stite-- Stuyt. It's from

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Colorado, says: When Coloradans in 2000 voted to legalize marijuana for medical use, the highest concentration of THC, marijuana's high-inducing chemical, was 5 percent and concentrated products did not exist. Over the past 20 years, the industry has dramatically increased the concentration of THC. The average-- the average in the plant is now 18.8 percent. The industry-- industry also created concentrates, including vape oil and resins known as wax and shatter, with average THC potency of 69.4 percent and up to 95 percent THC. While there's evidence that components of marijuana can be beneficial for some medical conditions, research supporting this used THC concentrations less than 10 percent in the smoked plant. There is no validated research on 18- to 95-percent THC products that indicate they are medically helpful or safe. After voters in 2012 legalized recreational marijuana in Colorado for adults 21 and over, medical marijuana applications for adults slowly declined, yet there has been a steady increase in medical marijuana cards for those 18 to 20 over the last three years. Parents can get medical marijuana cards for their children under 18. In November, parents of 271 children had done so. Those 18 to 20 are too young to buy recreational marijuana, but they can get their own medical marijuana cards. As of January 3-- as of January, 3,935 had cards, with the primary indication being severe pain. An 18-year-old, whose brain is not fully-- yet fully developed and cannot purchase tobacco or alcohol legally, can obtain a medical marijuana card without parental knowledge. The physician-- the physician is not required to write a prescription for a type of product, route of administration, amount, frequency, and period of use. There is no requirement for follow-up appointments to determine whether the recommendation has been helpful or if there's-- if there are side effects. Even if the physician recommends something low in THC, the patient can take the card to a dispensary and get anything. Bud tenders give out advice, but have no requirements for medical training. Patients can purchase twice as many from a medical dispensary, two ounces per day, versus recreational dispensary, and medical products are less expensive because of lower taxes. There is no trafficking-- tracking to see if someone is going from dispensary to dispensary and purchasing more product in a process known as looping. As a psychiatrist, I have been se-- I have seen several patients in this age group, referred for problems that-- mood swing anxiety, psychotic symptoms and suicidal ideation. They have a medical marijuana card but are usually unable to tell me the name of the doctor who gave it to them. I have looked at the cards and the recommending physician's name is not listed. These young people are getting the cards from complaints of headaches, sprained ankle, low back pain or anxiety. They are dabbing, using a blow torch to heat and inhale resin, or vaping 60-percent-plus THC multiple times a day.

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FOLEY: One minute.

BOSTELMAN: Invariably, they do not schedule a follow-up appointment with a recommending physician until they need to renew the card in the next year. Because the cannabis industry has been allowed to label these concentrated products medical, people believe they are safe. Kids are increasingly using concentrates. The 2019 Health [SIC] Kids Colorado survey reported 10.2 percent of high school students are dabbing. Of those who admit using marijuana, 52 percent report dabbing, a nearly 70 percent increase in only two years. Many of the teens with medical marijuana cards are still in high school and become the supplier of concentrates for even younger kids. I am aware of several 14-year-olds using concentrates obtained from an 18-year-old with medical marijuana card. A mother of a 14-year-old confiscated a vat of shatter that is clearly from a dispensary. The label indicates it is Scooby Doo Snacks or Scooby Snacks shatter, 75.7 percent THC.

FOLEY: That's time. That's time. Thank you, Senator Bostelman. Senator Lowe.

LOWE: Thank you, Lieutenant Governor. I want to revisit the conversation about guns and marijuana, seems to be reoccurring. There are tons of news articles and conversations that have to do with this issue. But I first want to thank Senator Wishart for making several additions to LB474 that makes it clear that local and state governments and police forces will not have the authority to take away gun rights if they get a medical marijuana prescription. Those are well-considered and necessary elements in this bill. Unfortunately, there is nothing Senator Wishart can do about the federal government's stance on medical marijuana and firearm possession. The last time I spoke, I talked about people in Maine who went to jail after lying on an ATF form. I also mentioned people who told the truth and were-- were not allowed to buy a firearm. The state of Michigan has legalized recreational marijuana. According to the 2020 Detroit Metro Times article, an individual in Michigan was in-- indicted on a federal by a federal grand jury on a felony count of unlawful use of a controlled substance and possession of a firearm. In discussing this example, the spokesperson for the U.S. Attorney's Office in Detroit had this to say: A one-time use of a controlled substance is not sufficient to be an unlawful user under the applicable statutes, he tells Metro Times. Rather, the defendant must have been engaged in regular use of a controlled substance, either close in time to or contemporaneously with the period of time he possessed the firearm. The further-- he further add-- added, the law does not require the

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defendant use the control-- controlled substance in the precise time he possessed the firearm, and an inference that the defendant was an unlawful user of a controlled substance may be drawn from evidence of a pattern of use or pattern of possession of a controlled substance that reasonably covers the time a firearm was possessed. Think about that for a second. Simply having a pattern of being in possession or under the influence of marijuana, being a firearm owner, puts an individual at risk of being investigated by the federal law enforcement. So if you have a marijuana card and you have used marijuana over a period of time, let's say a month, you were in federal violation by having guns. You cannot buy a gun. You cannot have a gun. From the same article, Steve Dulan, an attorney and chairman of the Michigan Coalition for Responsible Gun Owners legal foundation, tells Metro Times it's absurd that residents must choose between smoking pot and owning a gun. He worries about the prospect of a hardcore anti-drug prosecutor charging residents from exercising their Second Amendment rights to own a gun while using a substance that is legal on the state level. Whether or not prosecution is rare, the prosp-- prospect of getting charged is a very-- in very real terms and scaring and deterring people, says Dulan, who teaches gun law at Cooley Law College. Dulan, who does not use marijuana but supports people's right to use it, says the conflicting laws may pressure people to lie on the federal form to buy a gun. We are living in a world where people are encouraged to lie because of the system, and that is a really bad thing, he says. Now I want my fellow senators to support the Second Amendment, to think about this carefully. Do you trust the current administration in Washington, D.C., to not use these laws--

FOLEY: One minute.

LOWE: --as a way to prosecute gun owners? Thank you, Lieutenant Governor. I do not, and I urge you caution. Sadly, not even Senator Halloran and Governor Ricketts' efforts to make Nebraska a Second Amendment sanctu-- sanctuary state will help Nebraskans who run into this issue. Making Nebraska a Second Amendment sanctuary state will do nothing when firearm dealers turn down people who have a medical marijuana prescription because the background check is done by the federal government. It will not prevent the federal government from going after people who have a prescription for the medical marijuana and that have gone through the federal background check. Until the federal government either decriminalizes or legalizes marijuana, we are walking into a situation where the passing of this bill puts Nebraskans at risk. Ladies and gentlemen, our law will conflict with the federal government, this law. It is not a good bill.

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FOLEY: That's time.

LOWE: This is a terrible bill. Thank you.

FOLEY: Thank you, Senator Lowe. Senator Erdman, you're recognized.

ERDMAN: Thank you, Lieutenant Governor. Good afternoon. I listened to Senator Brewer's comments, very sobering comments, very serious comments he made, and I think we need to pay attention to that. One of the things that marijuana does for those veterans who suffer from all of those things that they did in the war and the pain they have from their injuries, it suppresses those feelings and, instead of them getting treatment, as they should for those feelings and those issues, it suppresses them. And you'd have heard Senator Brewer say out of the 27 wounded warriors he worked with, 9 of them took their lives. That's pretty serious. So marijuana won't treat their symptoms. It just covers them up, and that's not exactly where we want to go. So let me go through this one more time, because I think people have missed the issue of a prescription and a permission slip. I have heard, and Senator Hansen, Ben Hansen, had mentioned a prescription and Senator Wishart had commented back about a prescription. You, as a user of marijuana, will not get a prescription. They, a doctor, cannot write a prescription for a Class [SIC] I drug, which marijuana is. So you will never, never get a prescription for marijuana. You will get a permission slip. Now let me explain the difference. When you get a permi-- a prescription, it has the dosage of the medication you're to take. It names the drug. It also tells you how to take that drug, whether it's twice daily, once daily or for a week. It tells you whether to take that drug with food or without food. It lists all those things on the prescription. And if you buy a prescription from Walgreens or you have your prescription filled at CVS or your local pharmacy, every one of those prescriptions are filled with the same potency of drug at the same level every time. That's the way they are. You get a permission slip to buy marijuana. You go from one dispensary to the next and there's no guarantee that they're the same exact drug. And as Senator Albrecht had alluded to in her comments, you will have a dispenser, a person working there, tell you how much to take. The doctor will not write on that permission slip, take twice daily, do this or do that. That is not what you get. You get a permission slip. It is not a prescription. This is not a drug to treat ailments. This is a Class [SIC] I drug. Senator Lowe alluded to several times what happens to you if you're a firearm owner and you use medication that's called marijuana, or so-called medication. So we're putting people in a position to use something that may in turn cause them great harm when they go to buy a firearm or be involved in hunting because they

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have used medical marijuana. So we're dealing with a situation here that has ramifications that no one really understands and no one is going to explain it to them. And I heard what Senator Walz had said about Senator Wishart being compassionate and caring and honest, and I told Senator Wishart I did not have to have Senator Walz stand up and tell me that. I already knew that. I don't think this bill is about Senator Wishart--

FOLEY: One minute.

ERDMAN: --whether she is those things or not. This bill is about marijuana. And here's a rhetorical question for Senator Walz. I'm wondering if Senator Walz thinks that Senator Wishart is the only one in the room that has those qualities. And as I said, that's rhetorical. She don't need to answer that. But, Senator Wishart, just let it be known that I didn't have to have Senator Walz tell me those things, I already knew it. And this is not about Senator Wishart and I'm not opposed to this bill because it's Senator Wishart. That's not the case. I'm opposed to marijuana because of what it's going to do to the veterans and those gun owners and the rest of us. And Senator Brewer alluded to those people living in my district because they used to live in Colorado is a fact. People would rather live in Nebraska and pay high property taxes than live next-door to people who smoke pot, plain and simple. If you want to be like Colorado, then continue down this road.

FOLEY: That's time, Senator.

ERDMAN: Thank you.

FOLEY: Thank you, Senator Erdman. Senator McCollister-- oh, excuse me, Speaker Hilgers, I'm sorry.

HILGERS: Thank you, Mr. President. Good evening, colleagues. Just giving you a quick scheduling update for the rest of the evening. Cloture on this, on LB474, will be at 6:15. Cloture is at 6:15, so a little under-- a little over, I should say, two-and-a-half hours left to go. At-- after the cloture vote on that bill, what we will do is stand at ease for 30 minutes. We'll do 30 minutes. I know the other day we-- we cut that a little shorter, so enough-- give you enough time to go get something to eat. Thirty minutes, and then we're going to pick up right on the agenda right after that. As a re-- as a reminder that I've given I think every day this week, we will go late tonight. So we're going to get as much done-- we have a lot of work to do. We're going to get as much done today as we can. So 6:15 is

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cloture. We will take a 30-minute break and then we'll come right back to it. Thank you, Mr. President.

FOLEY: Thank you, Mr. Speaker. Now, Senator McCollister.

McCOLLISTER: Yeah, thank you, Mr. President. Good afternoon, colleagues. This is the third occasion by-- that I've dealt with the medical marijuana bill. And in each case, I've supported the bills that came up before the Legislature. It's-- what's important to me as I look at this issue is the number of states that the medicinal marijuana has been approved in. I see that 36 states have approved this, this thing. And what's strange to me is that we know so little about this drug, despite the fact that 36 states have approved it. I think that's a travesty that we haven't-- the F-- the Food and Drug Administration hasn't dealt with this issue in any kind of positive way. I see some real similarities between some of the other sin taxes that we're-- we're typ-- typically looking at. The 18th Amendment, which was adopted in 1919 and then finally repealed in 1933, dealt with the-- the sin of alcohol and for those limited number of years, it was illegal to make or sell alcohol. And obviously that all changed in 1933 because you need to deal with a drug like this. Same thing applies with tobacco and gambling. In each case, Nebraska has taken the positive steps to deal with the issue. And I think this is a very similar situation we have with this particular-- this bill, LB474. So I-- I think it's worthy of our attention and we need to do a better job of figuring out what this is. Would Senator Wishart answer a few questions?

FOLEY: Senator Wishart, would you yield, please?

WISHART: I'd be happy to.

McCOLLISTER: Senator Wishart, the-- why is it we know so little about cannabis for medical purposes? This drug has been around for at least 50 years, and-- and still we know so little about its application for medical purposes.

WISHART: Well, thank you for that question, Senator McCollis-- Senator McCollister. First of all, the idea that we don't have medical research on this or know very little is a falsehood that's been said today. We have plenty of clinical trials and research, thousands across this country and world, that show the medical efficacy of cannabis.

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McCOLLISTER: Why is it the FDA hasn't taken a firm stand on this and initiated tests to, you know, bring this-- this drug into-- into the marketplace?

WISHART: The FDA haven't-- hasn't taken a decision on this because the federal government has been extremely hostile towards cannabis. And one of the issues that we run into is, in order for a medicine to be FDA approved, you have to go through an application process. And every time-- for example, the University of Massachusetts went to apply for a clinical trial on cannabis and through the FDA and the DEA stopped them because it's a Schedule I. So it's just this Catch-22 that we have seen for years and years and years since the-- frankly, since the '60s, which is why states have moved forward.

McCOLLISTER: It's so strange to me that we could approve a vaccine, two or three versions of a vaccine in one year, but yet in 50 years we can't get an approval for medicinal marijuana. Do you see the irony in that?

WISHART: Yeah. And what I would answer to you, Senator McCollister, is follow the money--

FOLEY: One minute.

WISHART: --follow the money, because the issue of cannabis is one that is steeped in greed and propaganda and politics.

McCOLLISTER: Thank you, Senator Wishart. Lastly, there is significant fiscal impact on the state budget. If you look at the numbers, could-- perhaps \$40 million could come into the state simply with the wages that would come about for the workers in this profession. And so it was a significant impact to the state. We did a calculation on the financial impact of gambling, so I think this is a very similar exercise and I would hope you will approve this, this particular measure. And thank you, Senator Wishart, for your attention.

FOLEY: Thank you, Senators McCollister and Wishart. Senator Matt Hansen.

M. HANSEN: Thank you, Mr. President, and good afternoon, colleagues, I'll yield my time here in a minute. But one of the things as I've been here-- as I've been here listening to debate and listening to the arguments of opponents, several people have read articles of a number of people who have inf-- interacted with medical marijuana in other states. I would ask those opponents, when you read those articles, pay attention to yourself, because a lot of times the arguments are not

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against medical marijuana, medical cannabis or even mar-- marijuana generally, recreational. They're about the specific licensing structure that we have in a state. Several of the things that have been criticized in Colorado have been criticized in Colorado similarly for being overregulatory in a way that it favors big corporations and at the same time being nonspecific enough with the prescribing details. Those aren't arguments against Senator Wishart's bill. Senator Wishart's bill is different than that. If there's legitimate concerns on the policy and procedure of this bill, as has been very clear, there's been much of a mood to accept and work on that. And with that, Mr. President, I'd yield the balance of my time to Senator Wishart.

FOLEY: Thank you, Senator Matt Hansen. Senator Wishart, 3:45.

WISHART: Thank you, Mr. President. Colleagues, I want to take a little time now to dispel some of the rumors we've heard today. First of all, the idea that-- that if we legalize, if we pass LB474, all of a sudden we're going to be dealing with just this runaway THC situation, I just want to be really clear. Synthetic THC, which is currently FDA approved, the only active ingredient in Marinol which is-- which is currently FDA approved, is 100 percent THC. You would be hard-pressed to find any product in any state that-- where cannabis is legal for medical or recreational purposes-- that is 100 percent THC. So if people are worried about THC, that ship has passed and it's called Marinol and it's the synthetic version, and people's response to it is far more negative than having the whole plant option. In terms of the firearm issue, look, people are consuming cannabis right now and have firearms. And when you're going to fill out a firearm form, that's to purchase a new gun. And don't you think that people who are sick should have the right to decide whether they're going to stick with their current guns and get medical cannabis or buy a new gun and get medical cannabis or buy a new gun and don't get medical cannabis? That's up to a Nebraskan to decide. We're giving them a choice. We're not forcing every-- my bill does not say every person in Nebraska will need to consume medical cannabis and give their guns away. And I listened to gun owners right away, and the first work I did on my bill was to make us one of the strongest states in terms of language for gun owner protection. So here's the thing. We're-- if we pass this, we're one of the only states where we don't have a list for the federal government to look at of Nebraskans who qualify for cannabis that isn't HIPAA. We don't have a list like other states do where you just-- some DHHS person has just a list of people who are qualified for their cannabis system. We don't have that. We are protecting people's Second Amendment rights and their privacy.

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FOLEY: One minute.

WISHART: The last thing I'll say is I really hope that you will consider the work that is being done to try and address some of the issues that some senators who want to get there are working with me on, and I hope you'll consider giving me a cloture vote to get this to Select File so that we continue to work on this bill. Thank you.

FOLEY: Thank you, Senator Wishart. Senator Kolterman, you're recognized.

KOLTERMAN: Thank you, Mr. President. Good afternoon, colleagues. I wasn't going to talk on this bill. This is a very difficult discussion for me to listen to. But I'm going to talk about it and I'm going to talk from my heart. To my constituents, I hope you're listening. The only reason I'm not supporting this bill is because I've gotten letters and emails and phone calls from you 10:1 against it. Now I know some of that has to do with the fact that a letter went out or a postcard went out. But I've heard very little support from my constituents. And I know that my law enforcement officials are opposed to this bill. If it was personally me voting, I'd be voting yes on this bill. But I do listen to the second house, and they have overwhelmingly told me no. But I have some real concerns about what we're doing here. I think that it shouldn't go to a vote of the people. I don't-- it's going to pass, just like Senator Flood said. We're going to have legalized medical marijuana and we're probably going to have legalized recreational marijuana. We are the policymakers in this state; we're the people responsible for making the laws. And if the-- if the corner office and the Governor and the Attorney General don't like it, then they can veto it or they can find it unconstitutional. But we're supposed to be the policymakers and most of what we're hearing negative about this is coming from them. That bothers me because they're influencing my-- my constituents dramatically. Most of you know I'm a very compassionate person. I love being here and I love doing what I'm doing. But I'm also a very strong relationship-building person. Like Senator Flood talked about the compassion in this bill, let me talk about compassion. I sat across from a doctor and he said, your wife has 60 days to live, 60 days, unless you get a whole lot of chemotherapy. And then you go into this session of chemotherapy and you watch your loved one deteriorate to the point where they're not there anymore, they're skin and bones, they're not the same person that you lived with for 47 years. They take morphine, fentanyl, oxycodone, hydro-- hydrocodone, Tramadol, Percocet, Vicodin, Naproxen, and the list goes on and on. It's ugly, folks. It's ugly. I'm going to give Senator Wishart a cloture vote on

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this, and I wasn't going to do that and I told her that. She and I are very close friends. Her and her husband Joe are close friends of mine, and they were with me when my wife was dying, just like my classmates in this body were. They were there to support me, Senator Hilkemann, Senator Lin-- Lindstrom. And I-- I can only say so much about the other two apostles. But the reality is what I don't like about what's gone here today is, and I know we're following the rules, but the very first thing that comes up on this floor is a bracket motion. We can't even discuss the issue. We cannot discuss--

FOLEY: One minute.

KOLTERMAN: --the amendments that could be very good and helpful to this. And then, overwhelmingly, we beat down the bracket motion and right away we have a reconsider. Now I know that's all within our rules and we're following our rules and I'd be the last to criticize our rules, but this is important legislation for the state of Nebraska. Everybody around us has it. Everybody has it. My brother lives in Florida. He and his wife-- my wife-- my sister-in-law has chronic pain. Marijuana, medicinal marijuana, has helped her. My nephew lives up in Sioux Falls, South Dakota. It's going to be there for them. Now I get the fact that there's illegal drugs moving up and down the highways of this state, but the reality is there's ways to fix that. I don't think she's got the votes to get this across the finish line.

FOLEY: That's time, Senator.

KOLTERMAN: But she ought to at least have the opportunity to have the discussion. Was that time?

FOLEY: That's time.

KOLTERMAN: Thank you.

FOLEY: Thank you, Senator Kolterman. Senator Blood, you're recognized.

BLOOD: Thank you, Mr. President. Fellow senators, friends all, I stand very opposed to the reconsideration brought forward by Senator Slama on the bracket but in support of the amendment and the underlying bill as amended. It's really hard for me to sit here quietly all day long and listen to a debate where people use information that's either been found or given to them that is inaccurate. So much of what's being said, first of all, refers to recreational marijuana. That is not what Senator Wishart is-- is advocating for. She is advocating for medical marijuana, where you work with your physician and you find out what

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treatment is best for you. It's not for everybody, necessarily, but it might be best for you. So I think the fact that we are trying to confuse the issue by talking about recreational marijuana is inauthentic and unfair. I listen to Senator Geist talk about the APA, and it sounded familiar to me and I knew I had heard it before. And then I remembered that it was from our own Governor's blog post titled "Marijuana: A Clear and Present Danger," pretty scary title. And so I reread that blog while I was sitting here, because we're sitting here and listening to a debate and we don't have a whole lot to do except for research and listen to the debate. And when I read that blog and I listened to the stories and the claims that are not based on peer-- peer-reviewed documentation and frequently actually come from very biased informational sites, which is really hard for me to listen to, by the way, and in that blog where a lot of the information that we've heard today came from, or at least maybe perhaps from the same source, they referred to two unfortunate individuals who died in Colorado, which, by the way, was not from medical marijuana but from recreational marijuana, again, not we're ad-- what we're advocating for here in Nebraska. They referred to-- Sen-- our Governor referred to Levi Pongi, who plunged from a balcony after consuming a marijuana cookie. But what he doesn't say in his blog is that that individual, who chose to utilize recreational marijuana, which we are not talking about, ate six-and-a-half times the dosage that was indicated, six-and-a-half times the amount of recreational marijuana-- again, not what we're talking about, but you've been told that somebody took marijuana and became psychotic and jumped off a balcony, not really the full truth, right? So I don't understand this weird scare tactic thing that's going on in Nebraska. Well, I understand it. They're trying to scare you out of supporting medical marijuana. They also-- the Governor also referred to Marc Bullard, who committed suicide, who, as you heard Senator Bostelman talk about, he was dabbing, right? That's when you smoke it, but you're smoking a-- a highly concentrated form, right, of THC, wax shatter-- shatter, some people call it honey, but there are no limits on the concentration levels in a dab. So here we are talking about medical marijuana--

FOLEY: One minute.

BLOOD: --and our own Governor and people on this floor are telling you stories that are simply warped and untrue, and you should be embarrassed to be telling those stories, let alone putting them in print on blogs. Even his own parents said that there is no way to know if that was-- if it was the THC that caused his depression that had him commit suicide. He was suicidal before he ever started participating in dabbing. I hate when we create boogeymen only to

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create fear in voters and constituents and telling them untrue things that are not medically based. Let's talk about the truth. We're not talking about the truth today. We're not talking about medical marijuana. And like it or not, it's going to go on the ballot and you know what's going to happen when it goes on the ballot? I don't think it's going to stop at medical marijuana because we couldn't do our jobs in this body. I am so concerned at the lack of accurate information that is coming out on the airwaves today from this body.

FOLEY: That's time.

BLOOD: Thank you, Mr. President.

FOLEY: Thank you, Senator Blood. Senator Clements, you're recognized.

CLEMENTS: Thank you, Mr. President. I wanted to read from some research about the industry regarding Colorado's experience by Josh Shepherd, published April 18, 2021. The marijuana of today is not the marijuana older people remember. The difference can be having devastating effects, devastating effects the states legalizing recreational use don't seem to be taking seriously. We're not doing recreational use, but we are not limiting the THC content. That's one of the several takeaways from new research published in top medical journal JAMA Pediatrics. Researchers studied the prevalence of substance abuse disorders among young people, tracking outcomes over multiple years. When first use of marijuana occurs at 12 to 17 years old, the study showed an addiction rate of 10 percent. After three years, that figure doubled to 20 percent. Bloomberg reported that findings contradict widely held perceptions that cannabis isn't particularly addictive. Drug policy expert Kevin Sabet worked in the administrations of both George W. Bush and Barack Obama. In a phone interview, he said the new study really surprised him. It shows that for teens, marijuana is twice as addictive as cigarettes or alcohol. If you use it more than a year, it's double the addiction rate of various prescription opioids. This flies in the face of sources who say marijuana is not addictive. The legalization wave started with Colorado in 2012. Over eight years later, that state provides the most complete picture of effects on young people. What are those effects? They're negative enough that one Colorado Democrat is bucking her party and drafting a measure to limit canna-- cannabis. State Representative Yadira Caraveo, a longtime pediatrician, will soon introduce a ban on high-potency marijuana. In recent years, addiction to prescription opioids has captured national attention, but Mr. Sabet chronicles in his new book, Smoke Screen, quote, the average person abusing opiates, heroin or cocaine is in their mid-30s. What drug did they use in their teens? Marijuana. It doesn't mean that it's a

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gateway for everybody. Still, 99 percent of the time, they tried marijuana first, not an opioid. Current forms of marijuana are highly addictive, in part, because of the high THC potency. Jeff Hunt of Colorado Christian University is today a prominent opponent of marijuana commercialization. He admits to using pot in his teen years. In high school, my friends and I would smoke marijuana. It was like 5 percent THC. You get pretty stoned off that. But the marijuana we're seeing today is much more potent, some it up-- some of it up to 90 percent. As a result, the human costs of legalization have escalated in Colorado. These include increased traffic accidents, arrest rates, workplace absenteeism, and hospital admissions. Mr. Sabet says people have a psychotic break and have to go to the ER. He said we already have more than 600,000 of those admissions a year in our U.S. hospitals related to marijuana. Attorney Rob Corry--

FOLEY: One minute.

CLEMENTS: -- offered the-- thank you-- the 2012 legislation bill when he was in the Colorado State Legislature. For years, he has debated any critic of marijuana commercialization, yet in an April 2021 op-ed, titled The Founding Father of Legal Pot in Colorado Reveals Regrets, he wrote, I wish I could be proud of what we created, but I'm not. The outcome of Amendment 64 is shameful, hurts people in Colorado, is not safer. Admitting to being naive about the pot lobby and its goals, he recounts how natural hemp has been pushed out by big marijuana. They genetically engineer high THC levels to create a permanent addict customer base, resulting in higher profits. Thank you, Mr. President.

FOLEY: Thank you, Senator Clements. We'll pause for a moment for items. Mr. Clerk.

ASSISTANT CLERK: Thank you, Mr. President. Amendment to be printed for Senator McDonnell to LB566A. Your Committee on Enrollment and Review reports LB256, LB317, LB317A, LB479, LB628, all placed on Final Reading. New resolutions: LR142, by Senator Machaela Cavanaugh, calls for a study; LR143, by Senator Stinner, also calling for a study; LR144, by Senator Ben Hansen, provides for recognition of National Police Week, that will be laid over; LR145, by Senator Stinner, also calls for a study. And finally, a report from the Transportation and Telecommunications Committee on a gubernatorial appointment. That's all I have at this time.

FOLEY: Thank you, Mr. Clerk. Continuing discussion, Senator Albrecht.

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ALBRECHT: Thank you, President Foley. I'd like to read Laura Stack, on December 16, 2019, wrote about Johnny's Story. I think this is very pertinent to our conversation today, and I hope not to bore too many of you. Johnny Stack was born on February 7, 2000. He died by suicide on 2019-- November 20 of 2019 at the age of 19. He was an incredibly intelligent, funny and charming, handsome young man, which you can see by a video that I have if you'd like to take a look at it. We're a regular suburban family that did regular family things. He had a happy life, a 4.0 GPA with a scholarship to college, and a family who loved him very much. Unfortunately, we lived in Colorado, which was one of the first states to legalize marijuana in 2014, when Johnny was just 14. Three days before he passed, he came over for dinner. We lived in our condo a couple miles down the street, and we'd often-- he'd often pop in for a home-cooked meal a couple of miles away. I said, I need to tell you something. And he-- and the parents said, about what? Right about-- you were always right about marijuana, he told them; you told me that weed would hurt my brain and it has ruined my mind and my life. You were right all along and I'm sorry and I love you. He died by suicide three days later. Johnny used mari-- marijuana for years, starting at the age of 14 at a high school party. And then he started dabbing as an older teen. And I said dabbing just now. Did you think it was a typo for dabbling? Did you know what it meant when I said that he was dabbing? Not everyone does. Do you understand the difference between smoking cannabis flower and dabbing high THC concentrates, which as wax oil, shatter or butter, not a typo? Most of my friends looked at me blankly when I would say these words and they would say, I've never even heard about this or I've no idea about what you're talking about. That's what I feel like today. If you don't know what cannabis concentrates are and you have children, grandchildren, sisters, brothers, nieces and nephews between the ages of 14 and 24, you're in the right place. There are FDA-approved versions of the-- of marijuana used to treat debilitating illness-- illnesses such as seizures, eating disorders and cancer, so we aren't against that. I'm specifically talking about illegal recreational usage by adolescents under the age of 21, whose brains are still forming. Your brain is still forming until mid- to late 20s, actually, and marijuana can still use-- still cause harms to that. You may be thinking, come on, Laura, it's no big deal, it's just pot; pot's legal, so it must be safe; or did pot-- or I did pot when I was a kid, too, and, look, it didn't hurt me. Well, you have certainly studied today's pot. You have-- you've recently studied today's pot and you have personally seen the effects on your children alike. Why is it so different? First, the THC and the crystalline compound that is in the main ingredient which is active in cannabis gives the high, which is extracted out of cannabis so that it's nearly pure. THC is a principal

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psych-- psych-- psychoactive constituent of can-- cannabis and then the butane torch is used to heat the crystal, similar to beeswax or oil in a rig-- just Google it-- or a vaping device with a heating element called a dab pen can be used. Forget the grass or the papers that were rolled in the '70s and '80s. The pot that we grew up with had 10 percent or less of THC content, and it's hugely different than today's high-concentrated extracts--

FOLEY: One minute.

ALBRECHT: --often 80 percent of THC or higher. The brain is still developing through a person's 20s and the psychotic disorders typically developed in the late teen years. During the brain formation, heavy cannabis use has been shown to have a negative effect on the formation of the neural [SIC] pathways. It can also lead to a heavier drug use. While the vast majority of marijuana smokers never experience permanent mental illness, researchers have found that the earlier and the heavier someone starts dabbing, the more likely it is that they will dis-- develop the disorder at some point, often years later. The harm combination of the still-forming mind, high potency of THC products, and the high frequency of use equals cannabis-induced psychosis. Yes, that's the real diagnosis or the THC abuse severe. Repeated, the CIP ingredient can trigger schizophrenia and other mental illness and even when the cannabis is withdrawn, the psychosis doesn't go away. That is what happened--

FOLEY: That's time, Senator.

ALBRECHT: --to their beautiful boy. Thank you.

FOLEY: Thank you, Senator Albrecht. Senator Arch, you're recognized.

ARCH: Thank you, Mr.-- Mr. President. I want to talk a little bit about the FDA. I know we've had discussions about the FDA here this-- today and-- and the-- the status of research on cannabis. And I-- and I discovered a position paper from October 1 of 2020 that they published. And it's on the website, if any of you'd like to read it. I want to read you just a couple excerpts from that document. The FDA understands there is increasing interest in the potential utility of cannabis for a variety of medical conditions, as well as research on the potential adverse health effects from use of cannabis. To date, the FDA has not approved a marketing application for cannabis for the treatment of any disease or condition. The agency has, however, approved one cannabis-derived drug product, Epidiolex, and three synthetic cannabis-related drug products: Marinol, Syndros, and Cesamet. These approved drug products are only available with a

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prescription from a licensed healthcare provider. Importantly, the FDA has not approved any other cannabis, cannabis-derived, or cannabidiol products currently available on the market. FDA is aware that unapproved cannabis and/or unapproved cannabis-derived products are being used to treat a number of medical conditions, including AIDS wasting, epilepsy, neuropathic pain, spasticity associated with multiple sclerosis, and cancer and chemotherapy-induced nausea. Caregivers and patients can be confident that FDA-approved drugs have been carefully evaluated for safety, efficacy, and quality, and are monitored by the FDA once they are on the market. However, the use of unapproved cannabis and cannabis-derived products can have unpredictable and unintended consequences, including serious safety risks. Also, there has been no FDA review of data from rigorous clinical trials to support that these unapproved products are safe and efficacious for the various therapeutic uses for which they are being used. I continue with that article. Please note that certain cultivars and parts of the Cannabis Sativa L plant are controlled under the Controlled Substances Act since 1970, under the drug class "Marijuana," commonly referred to as "Marijuana," with a "j." "Marihuana" is listed in Schedule I of the CSA due to its high potential for abuse, which is attributable in large part to the psychoactive intoxicating effects of THC and the absence of a currently accepted medical use in the United States. From 1970 until December of 2018, the definition of marijuana included all types of Cannabis Sativa L, regardless of THC content. And here's something significant: In December 2018, the Agriculture Improvement Act of 2018, also known as the Farm Bill, removed hemp, a type of cannabis that is very low in THC, cannabis or cannabis derivatives containing no more than 0.3 percent THC on a dry weight basis from controls under the CSA. This change in the law may result in a more streamlined process for researchers to study cannabis and its derivatives, including CBD, that fall under the definition of hemp, a result which could speed the development of new drugs containing hemp. I think if we had a bill this morning that would support accelerating the research of the FDA regarding marijuana, it would probably pass 49-0. I think we all understand that the anecdotal evidence that we see supports the belief that there are something-- there are-- there is something within cannabis that appears to be effective for the treatment of some-- of some of these issues. When I went back and took a look at-- at the FDA website, they identify Cannabis Sativa L, the plant that contains over 80 different naturally occurring compounds called can-- canna-- cannabinoids. There does appear to be anecdotal evidence. I don't think we can deny that there's-- that something may be benefiting, but which of those compounds are therapeutic. And ev-- probably even more importantly, which of those compounds cause harm?

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We don't-- we don't know. But we're-- we're about to act as though-- perhaps we're about to act as though maybe we do know.

FOLEY: One minute.

ARCH: As I consider my vote on whether or not to support LB474, I must consider whether this Legislature is the appropriate authority to declare to the citizens of Nebraska that the use of cannabis is both safe and effective. We're doing that, in effect, by providing for its use and distribution. Would we do that for any of the other drugs listed on Schedule I? Would we make an exception when the FDA themselves have not done so? And I can't answer that question. I can't answer it. I-- I do not have the scientific background to make the decision, in essence, that cannabis, a Schedule I drug, is safe and effective for use by making it available to our citizens. And for that reason, I will be voting no on this bill. Thank you.

FOLEY: Thank you, Senator Arch. Senator Hilkemann, you're recognized.

HILKEMANN: Thank you, Mr. Lieutenant Governor. Last time I got cut off earlier than I thought I was-- the-- the-- one minute, and so one of the Red Coats came up and said, he said, well, I didn't see that one minute either. And then he said, how are-- how do you stand on this bill? Well, I said, that's exactly what part of my whole speech was-- was, is that this is not an easy, cut-and-dried case, by any means. And so I was going to finish up by saying the following things about it. My son lived in Colorado for 11 years. And he said to me one time, he said, Dad, whatever you do, make sure marijuana is not legal in Nebraska, it's a real mess out here. And, you know, if this bill were the Colorado bill, this would be a really easy decision for me and I'd have been voting yes, let's throw this thing out as quickly as we can. But this is not the Colorado bill. This is medical marijuana. I attended an NCSL conference in Las Vegas several years ago after this first-- we first dealt with this and it was on this whole topic. I took a tour of the-- of the growing, the processing, the distribution of the marijuana, which is recreational in Las Vegas. If this is what we were talking about, this should be an easy vote. I could say, no, we do not want this in the state of Nebraska. If you're a rule-of-law person, this is an easy vote. You vote no. But what if you're a person of some compassion? What if you're a person who's listened to some of the people who've come to you and said, I would just like to give my son a chance, he has epilepsy, he has so many seizures a day and this would be of benefit to him? Or what about the person who has the chronic pain or the cancer that comes up that-- that this may be of some benefit? Several weeks ago, when I had my LB496, when-- when the testifier came in from New Mexico, my wife and I went-- my-- she and

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my wife went out for lunch and she shared with Julie that she was dealing-- she had dealt with cancer and she was telling how the medical marijuana that she could take in New Mexico had been such a help to her when all the other pain medications had failed. Julie said, how are you feeling about the medical marijuana? And I said, boy, it's really a tough, tough issue. So what I'm saying is, is that it's unfortunate that all the "boogeypeople" that have come up here with things that are wrong with this are talking about recreational marijuana. Let's bring this over-- I'd like to know what has happened in states that have medical marijuana. What's been happening in those states? And I would ask that we would-- that we would focus on-- on that medical marijuana. And so I come back to this question. So Nebr-- every Nebraskan out there, and I talk to you as-- as-- as Nebraskans now, you've all got opinion of this, either this is the worst thing that we could ever do or why haven't you done it a long time ago. That's how each one of us as senators has to deal with this today. And so I say, if 47 other states haven't gone to heck because they've established medical marijuana--

FOLEY: One minute.

HILKEMANN: --I'm not-- I'm not saying that--

FOLEY: Senator, one minute.

HILKEMANN: --about recreational-- thank you, Mr. Speaker. Why can't maybe Nebraska deal with-- this is, from my understanding, the most restrictive bill for medical marijuana in America. So that's why I'm going to be giving Senator Wishart a cloture vote. I want to have further discussion. And unfortunately, as was said earlier, with these bracket motions on there, there have been a-- there are amendments pending that we haven't even been able to talk about that may make this bill better. So that's why we're probably going to need to have another round with this particular subject. And thank you, Mr. President.

FOLEY: Thank you, Senator Hilkemann. Senator Hunt, you're recognized.

HUNT: Thank you, Mr. Lieutenant Governor. Nebraskans, as you watch this debate, one thing you may notice is that opponents to this bill, who are filibustering the bill, who are not allowing amendments to be discussed, they aren't even speaking extemporaneously against the bill. They aren't making valid, reasoned arguments against the bill. They're just reading things. And I can tell that's filibuster 101. When you don't have anything of substance to say, you can just read something and put things into the record and take as much time as you

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want doing that. And it's because the people who are opposing this bill and filibustering by reading things do not have the skill or the rhetorical intelligence to speak against the bill in a way that actually applies to what the bill even does. They're talking about things that LB474 doesn't apply to: gummies, overdoses, smoke, all-- you know, all of this reefer madness hysteria that Senator Wishart and Chairman Lathrop and the-- the healthcare lobby and all of these interested parties and stakeholders have been working on for years. So you can say you don't like the bill. Just say that you support the use of alcohol and you support the use of tobacco and you support the use of opioids and you support all of those things being legal, but not cannabis, and leave it at that, because it's really not deeper than that. There's just not a good reason. Another thing to note is that, all of a sudden, opponents to LB474 are really, really worried about what the FDA thinks, including the 31 senators who signed onto Senator Groene's LR107, which condemns the overreach of federal government in the states. Our state has the right to legalize and regulate cannabis, as so many other states have done. So all of a sudden, all of these people who hate federal government overreach think the federal government might be on the right track with the overreach as long as we're talking about weed or pot or ganja or spliff or whatever other words Senator Lowe was teaching us earlier. Senator Ricketts-- or Governor Ricketts, in his-- maybe soon "Senator Ricketts." We'll see. Governor Ricketts said in his press conference, if you legalize marijuana, you're going to kill your kids. Do you all remember when he said that? And I think sometimes people make these statements just to-- it's like a little catnip for their opposition, you know, something that they know they're going to cling to and it's going to be tweeted about a whole lot and it's going to make a headline and it's going to get people talking about it, and I think that was one of those things for Governor Ricketts. If you legalize marijuana, you're going to kill your kids. That is such an-- a ridiculous statement to make, because this is the man who said marijuana is going to kill your kids as he spent \$56,000 of Nebraska taxpayer money on illegal death penalty drugs that couldn't even be delivered to our state because they were held up by the federal government, and then he personally funded an initiative to reinstate the death penalty after it--after it was abolished by the Legislature, a coequal branch of government. And on the use of off-label drugs, is this not basically the same Legislature who in 2009 passed LB209, which was Senator Albrecht's bill to say that if someone's terminating a pregnancy, you have to give them information about "abortion reversal"?

FOLEY: One minute.

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HUNT: And what is abortion reversal? It's a concept made up by a quack doctor named George Delgado. And he said he's going to sue me for slander if I keep calling him a quack, and I'd like to see him try it because I'm ready for that fight too. He's a quack doctor who's saying if you shoot up a woman with a whole bunch of progesterone, it will stop her pregnancy from terminating or it will bring the pregnancy back when there is no evidence for that and there's no FDA approval for that. But this body lined up in order to legalize that right away and to mandate it. If cannabis helps someone with their seizures, let them use it. It affects you zero percent, like many issues in Nebraska that young people and young professionals care about but the people in this body, the politicians, don't. The vast majority of Nebraskans, over 70 percent, support medical cannabis, but of course we don't. That's typical and that's a shame. Thank you, Mr. President.

FOLEY: Thank you, Senator Hunt. Senator Vargas, you're recognized. Is Senator Vargas on the floor? We'll move on. Senator Morfeld, you're recognized.

MORFELD: Thank you, Mr. President, colleagues. Just want to note several different things here. So first off, there's a lot of stories of children and adolescents using marijuana. That's not what this bill does, number one. And number two, nobody is advocating for the recreational use of marijuana for underage adults, nobody. I'm certainly not. I haven't heard anybody get up on the floor and say that today, and that's certainly not what this bill does. So you can continue to read your horror stories and all of these other things that, quite frankly, have no relevance when it comes to the bill at hand and before you. It either indicates that you don't care about what's in the bill or you haven't read the bill. I'm not quite sure which one, but either way it's not on point and it's not on topic, and nobody here is advocating for recreational use of marijuana for children, no one. And if you have concerns about the safety of certain types of marijuana, high-concentrate THC or otherwise, then work with Senator Wishart to make sure that that's not allowed under the legislation. Senator Wishart has proven herself to be more than accommodating in terms of amendments and making sure we tighten and narrow the scope despite maybe some personal reservations. So, colleagues, let's stay on point here. Also, you would think that people are just fleeing the state of Colorado, that it's just in shambles, when, in fact, Colorado, quite frankly, has one of the biggest economic booms in our country. In fact, it's unfortunate that many of my friends have fled to Colorado and not the other way around. And that's concerning for me, and it's not just because of marijuana. It's because we're Neanderthals when it comes to things like LGBT

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protections, we are behind the times when it comes to things like renewable energy and supporting it, and we're definitely behind the times when it comes to legalization of medical marijuana. We are one of two states in the country without any legalization of marijuana, and then we wonder why we don't have people moving to the state, we wonder why we can't retain people. Pretty soon, not even the old people will want to live here because increasingly it is older Nebraskans and older Americans that are the largest growing population of people that use marijuana. So it rings hollow when I hear people running around saying, we need to grow Nebraska, we need to grow Nebraska, particularly the Governor-- I think that's his-- his slogan-- and yet we're not doing anything to keep younger Nebraskans here and we're definitely not doing anything increasingly, apparently, to keep older Nebraskans here either. Instead, what we want to do is we want to get up on the floor and talk about all these horror stories that aren't relevant to the legislation at hand, aren't things that any of us are supporting, like, for instance, young people using high-concentrate marijuana, and do nothing to advance the substantive debate and issue at hand. If you have concerns about high-concentrate--

HILGERS: One minute.

MORFELD: --marijuana, then go talk to Senator Wishart and make sure that it-- it's excluded in the bill, which I'm pretty sure it already is. Let's get to work, colleagues. Let's work on actual solutions, because constantly saying no on this issue is not going to lead to better outcomes, it's not going to lead to good policy, and it diminishes the legitimacy of this body. Thank you, Mr. President.

HILGERS: Thank you, Senator Morfeld. Senator Wishart, you're recognized.

WISHART: Thank you, Mr. President. Well, colleagues, we are getting closer to the cloture vote, and I really want to thank those of you who have gotten up on the mike today and those of you who are working behind the scenes with amendments to come and address some of your concerns, who are supportive of allowing me to get this bill to the next round of debate. I genuinely appreciate that. I recognize that getting to Select File doesn't mean we'll inevitably have a victory, but it gives me another chance to continue to work with you. There's a real potential, from some of the suggestions that have come from senators who were on the fence about this and are now leaning in support but they need a few extra safety precautions in place, including setting us up similar to the way we do the PDMP. I think there's a real potential to make this an even better bill, and I'm

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appreciative of all of those who have weighed in on this. I'm hoping that more of you will look at and through the bill and decide what is it that you have issues with. Is it the list of medical conditions? I've already told a senator who came to me I'm willing to work on that. Is it how many facilities we have legalized in the state? I'm willing to work on that. Is it adding extra-- even extra language to support the Second Amendment? Yes, we can do that. When I go to CSG and go to other legislative conferences, it's always great to hear and talk to other senators because they've been through lived experiences that are different than what we go through in Nebraska. And I remember one of my colleagues sat in on a session where it was a group of senators, a panel of those who were adamantly opposed to cannabis and those who were fully in support, and the one thing that they all agreed on is that this should be done in the Legislature. It should be legalized in the Legislature, that it is better policy and leadership and risk management for us to do this here so that in future years we can tweak it, we have more flexibility. That's what LB474 allows, with the committee amendment and with other amendments that will make some of you more comfortable with this being a safe and secure system. I'm actually excited about the potential, if I get to Select File and we put an amendment on-- on that puts this into the PDMP, which for those of you who are new to that, it's basically the system that Senator Lindstrom and Senator-- and Senator Howard and other senators worked on to help us alleviate the opioid crisis. Well, we would have a similar system for medical cannabis. I'm excited about the senator that brought me that idea. We would be one of the first in the country to have that unique safety system to make sure that cannabis is not being abused. And I appreciate them coming to me with that.

HILGERS: One minute.

WISHART: I'm asking for your cloture vote and your underlying vote for this bill to take it on to the next round. I really am thankful to a lot of senators who showed up today in opposition and have come to me, willing to give me a cloture vote. I didn't think I would be where I am today, and I'm so grateful of that. I hope, if this does move to Select File, we're able to put some amendments on to at least make the bill better for when we ultimately have a vote and see if this makes it past the-- the challenges that are ahead. Thank you.

HILGERS: Thank you, Senator Wishart. Senator Slama, you're recognized.

SLAMA: Thank you, Mr. President. And good afternoon, colleagues. I-- I just wanted to echo a little bit of what Senator Morfeld said about staying on point and on topic, which I appreciate, because after a generally respectful and substantive six-and-a-half hours, I think

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it's getting a little bit later in the day and we're starting to wander off the trail of LB474 and the committee amendment. And I just wanted to briefly just refocus debate here and just know the situation we're at on LB474, because a few have claimed over the last couple of turns on the mike that my motions, the procedural motions that are currently up on the board, are keeping us from getting to substantive amendments. I-- I-- I respect my colleagues, but that assertion isn't true. The only amendment that hasn't been considered yet is Senator Flood's, which he-- he said very early on that both opponents and proponents of LB40-- LB474 did not like. So on that, I firmly believe that LB474 is unconstitutional, which is why I will not be supporting cloture on that. I will yield the remainder of my time to Senator Geist.

HILGERS: Senator Geist, 3:45.

GEIST: Thank you, Senator Slama. And just in response, I mean, people have said so-- that we're just reading and so we're not listing what our actual objections are, so time to get real. My actual objections to this bill: One, the Legislature approving a drug, I just have a fundamental disagreement with that. Many of you know that in my career I was in pharmaceutical sales, so I'm very well acquainted with-- with what it takes to get a drug through the FDA process. And it goes through the FDA process for a reason and one of-- one of those reasons is so you can answer questions that are really important, like what are the other drugs that this may have an interaction with, what is the dosing regimen given the weight or the age of the individual. It goes to the clinical trials and the outliers and all of the things that happened during a clinical trial. It is so important to know those things. It's important to know how long a drug stays in your body. Does it accumulate more and more the more you use it? Where is it stored in the body? We know some of those things with marijuana. We also know when a drug is approved, and especially one that's made into attractive edibles, which this could be for medical use, a gummy, which is very attractive to children, of course we're not indicating this or passing this for children, but what you're asking me to do is be OK if a child takes it, because you know that's going to happen. And I'm not OK with that. I'm not OK with pregnant women taking medical marijuana. You're asking me to be OK with that and I'm not, and that's my fundamental disagreement. We are citizen legislators. We are not scientists. We do not have the capacity to make a wise scientific decision--

HILGERS: One minute.

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GEIST: --in this arena. That is my disagreement. That's my objection, but I have more. I have personal experience in my family with an addict who started the pathway to horrible addiction through marijuana use, regular adolescent, cheap, ineffective, low-grade marijuana use. That's not what we're talking about here. But with this bill, that use is possible. So you're asking me to be OK with that happening to another family and I'm not. So those are my objections, I actually have more and I'll-- I think I'm next in the queue.

HILGERS: You are next. You're-- you're now on your time.

GEIST: So I actually have more. I object to what we're doing to the pharmacy part of this bill. We are actually expanding the scope of what a pharmacist can do. Currently, pharmacists do not have the ability to write or change prescript-- they cannot write a prescription. They cannot change a dose. Giving a pharmacist the ability to change dosages would expand their scope of practice. When we do scope-of-practice expansion, they're supposed to go to-- through the 407 process. That's a review process through DHHS. We have gone through this on the floor time after time after time. When we go through appointing or approving appointments for the medical board, we've talked ad nauseum about the 407 process. I would question if that would be a process that we would go through with these pharmacists. What does the AMA say about that? Some legitimate questions, and I've already talked about my issue with the high levels of THC, which are not capped in this bill. And again, I would ask that there be no higher than 10 percent in this bill. However, because of my other objections, I am not voting for this bill anyway. So I have utmost respect for Senator Wishart. I just fundamentally disagree. I come from a different place in my life, I come from a different perspective, and I think we have no business doing this. And I am unwilling personally to take the responsibility of what this does in a family, what it can do in our state. It is a responsibility I'm unwilling to take and, therefore, I am a no and I will continue to be a no. Thank you, Mr. President.

HILGERS: Thank you, Senator Geist. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Speaker Hilgers. I want to finish what I was reading before, and this is to the point and to Sen-- Senator Hilkemann before. This is from Colorado and this is March 1, 2021, article that was written. So this is specific to the point. I'll go back in the article a bit, says, because the cannabis industry has been allowed to label these concentrated products medical, people believe they are safe. Kids are increasing-- increasingly using

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concentrates. The 2019 Health [SIC] Kids Colorado survey reported 10.2 percent of high school students are dabbing. Of those who admit to using marijuana, 52 percent report dabbing, a nearly 70 percent increase in only two years. Many of the teens with medical marijuana cards-- many of the teens with medical marijuana cards-- to the point, what we're talking about, medical marijuana and their cards-- are still in high school and become the supplier of concentrates to even younger kids. I'm aware of several 14-year-olds using concentrates obtained from an 18-year-old with a medical marijuana card. A mother of a 14-year-old confiscated a bag of shatter that is clearly from a dispensary. The label indicates it is Scooby Snacks shatter, 75.7 percent THC. The list of ingredients inc-- includes butane and propane, and there is a disclaimer in the industry's own words: This product was produced without regulatory oversight for health, safety, or efficacy. If there is no regulatory oversight for health, safety, or efficacy, how can this be medical? While there is no research indicating these high-potency THC products are safe or effective for any me-- any medical condition, we have multiple studies from around the world showing serious problems resulting from high-potency THC, including addiction, psychosis, depression, anxiety, sleep problems, suicide, and violence. Dutch researchers state anything higher than 15 percent THC should be considered a hard drug comparable to cocaine and ecstasy. And the Netherlands capped potency at 15 percent THC. Colorado needs to close regulatory gaps that are endangering young people. Again, this is by Libby Stuyt-- Stuyt, medical doctor, is a Colorado addiction psychiatrist. I think this is to the point specifically. I also want to speak on the bill. If you look on page 8, Section 29, it talks about schools. This is allowed in schools. I thought drug-- schools are drug-free zones, but schools and-- and-- (c) Cannabis may be consumed only in a place specified by the school, so it allows cannabis to be used in schools. Also, when we talked about pharmacists, it gives the impression that the pharmacist is actively involved in the process of determining dose and distribution, and they can't. They're not. They won't. They're not licensed to do that. They cannot practice that. They're not allowed to do that. Two-point-six grams, thousands of doses that you can get by going to this doctor and that doctor and the other doctor, thousands of doses for each time, and there's no limit on those. So there are issues with the bill that I take up. There are issues that are going to be significant to overcome as far as I'm concerned. The 407 credentialing that Senator Geist talked about is another one.

HILGERS: One minute.

BOSTELMAN: With that, I yield the rest of my time to Senator Erdman.

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HILGERS: Senator Erdman, 0:55.

ERDMAN: Thank you. Thank you, Senator Bostelman. Senator Wishart, I'd like you to listen to what I have to say here. This is kind of important. Last week, I had a bill that I just wanted to get from General to Select to have more conversation, because he had Art Laffer coming in to answer questions the next day. You chose not to give me that vote. Senator Friesen had a bill, LB454, that needed two more votes to advance to continue the conversation. You didn't give him that vote there. I understand it's not for everybody. It's only for those who are in the discussion today. And I am not voting against your bill because you didn't vote to advance mine. That's not the reason. But I want to bring it to your attention that perhaps that's not for everybody, advancing to Select, and, Senator Friesen and I understand that. We have stayed on task today talking about the issues, talking about what it is.

HILGERS: That's time, Senator.

ERDMAN: Thank you.

HILGERS: Thank you, Senator Erdman and Senator Bostelman. Senator Lowe, you're recognized.

LOWE: Thank you, Mr. Speaker. I would like to continue, especially since Senator Wishart made a comment that this would be for just new guns. In Hawaii, a call for the confiscation is rescinded. In November of 2017, just three months after the opening of the state's first medical cannabis dispensary in Maui, medical canna-- cannabis cardholders in Honolulu began-- began receiving letters from the Honolulu Police Department demanding that they turn over their fire-- firearms for confiscation within 30 days. Let me read that again. Just three months after opening the state's first medical cannabis dispensary in Maui, medical cannabis cardholders in Honolulu began receiving letters from the police department demanding that they turn over their firearms for confiscation within 30 days. The letters explained that medical cannabis use disquali-- disqualifies you from ownership of firearms and ammunition, and for the legal justification pointed to the state statute, which forbids those who-- prohibit those from owning guns under the federal law from possessing guns in Hawaii. So, yes, they may be coming for your guns. Thank you, Mr. Speaker, for this time. I find page 31, lines 3 through 7, of this bill to be quite interesting. No state or local official, including an employee or agent of the department, may disclose to federal authorities, including the Bureau of Alcohol, Tobacco and Firearms and Explosives of the United States Department of Justice, any identifying

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information regarding participation in the registry program or the Medical Cannabis Act. This is interesting to me for a few different reasons. First, I have to wonder if we are going to prevent the sharing of this kind of information with the ATF or other kind of information we cannot share with the ATF. Can we tell you that I have a lot of constituents who would be very interested in not sharing any information about firearms with the ATF or other federal agencies? I know for a fact that there are many Nebraskans who would like to remove the federal government from the background check altogether. Do we not disclose to other federal agencies what we have or the information? This is completely wrong. But this conversation has been an interesting one today, and honestly, conversations about marijuana are always interesting. I came across an interesting article when it comes to the challenges created by legalization of marijuana. Now this deals with challenges presented by both medical and recreational marijuana. the following from December 27, 2020, Politico article, author Mona Zhang. It is entitled: How states' marijuana legalization has become a boon for corruption. Jasiel Correia's star is rising. The son of Cape Verdean immigrants in the working-class Massachusetts port city of Fall River, famed as the home of Lizzie Borden, Correia was a homegrown prodigy. At 23, he was elected mayor, fielding congratulatory calls from Senator Elizabeth Warren and Representative Joe Kennedy. That was in 2015. Four years later, just a week before his reelection race, federal agents ignominiously led him away from his home in handcuffs and charged him with attempting to exhort [SIC] cannabis companies from \$600,000 in exchange for granting them lucrative licenses to sell weed in-- in his impoverished city, Mayor Correia has engaged in outrageous campaign of corruption, which turned his job into a personal ATM, declared the U.S. Attorney, Andrew Lelling during a press conference--

HILGERS: One minute.

LOWE: --announcing the charges. Thank you, Mr. Speaker. The downfall of Fall River's mayor wasn't just a tragedy for thousands of people who invested their hopes in him. It was an emblematic rash of cannabis-related corruption across the nation, from Massachusetts to California to Arkansas and beyond. In the past decade, 15 states have legalized regulatory marijuana market for adults over 21 and another for 17 have gone legalizing marijuana-- or medical marijuana. But in their rush to limit the numbers of licensed vendors and give local municipalities control where to locate the mark-- dispensaries, they created something else: a market for local corruption. And almost all states that legalized pot either require approval of local officials, as Massachusetts, or impose a statewide limit on the number of

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licenses. This creates corruption because when you have a limited number of dispensaries, the money is there.

HILGERS: That's time, Senator.

LOWE: Thank you.

HILGERS: Thank you, Senator Lowe. Senator Pansing Brooks, you're recognized.

PANSING BROOKS: Thank you, Mr. Speaker. Well, I just want to set a couple things straight. And again, I-- I spoke before about the heartrending, just terrible hearings we had where people were asking for our help, begging for our help for their children. And I just want to add that nothing in the bill allows pregnant women to take the medical marijuana. There are no edibles allowed, no gummy bears allowed. So all that misinformation that my colleagues have been speaking about, it's just not true. And it's frustrating because it's-- it-- some people may hear a portion of that conversation and think, oh, I don't want edibles either. That's not what is part of this bill. It's not the plan. And, you know, there was a discussion about, well, we don't want-- you know, we don't want this available for kids. Well, of course not kids, unless it's prescribed to kids. I don't want painkillers available to kids unless they're prescribed to kids and the kids need them. I don't want opioids. I don't want all sorts of different medications and chemicals prescribed to kids unless, of course, they need them. And that is the problem, my friends. Who are we to decide whether somebody needs it or not? It's up to a medical provider. And for us to say, oh-- we've just heard year after year after year, oh, wait for the FDA, wait for all the people to decide this. There have been studies. I'm going to go into some of the facts on this because it's just-- the studies that have occurred show that we are not worried about-- this is a drug that has been around for thousands of years, thousands of years. To pretend that the study is the big necessary thing that we need to find out about? This is baloney and we all know it. In 2015, a policy paper from a researcher at the Brook-- Brookings Institute outlined the federal government's, quote unquote, war on medical marijuana research. While federal co-- obstruction has made it very difficult to conduct research into cannabis effects-- effect-- efficacy, gold-standard clinical trials, double-blind, placebo-controlled studies have been conducted and have been shown and-- shown its safety and efficacy, including for pain, multiple sclerosis, spasticity, and nausea. For example, the Journal of Pain from the Office of the Journal of the American Pain Society in 2013 said, quote, A double blind, placebo-controlled study on 30 human subjects found that even

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low doses of vaporized marijuana-- marijuana were effective at alleviating treatment-resistant neuropathic pain. Psychoactive effects were minimal and well-tolerated, and neuropsychological effects were of limited duration and readily reversible within one to two hours, one to two hours. Come on. We know about the effects of marijuana. We know that this is not a drug like opioids that's going to addict people and take their lives. From other information, there are-- there are many fiscal positive facts about the drug. As of--

HILGERS: One minute.

PANSING BROOKS: As of December 2018, there were 5,449 licensed medical cannabis employees in Arizona, and that would mean 1,438 jobs directly in the cannabis industry. Total sales for marijuana in 2018 for other states are off the charts. Connecticut, population 3.6 million: \$84.6 million. Florida, population 21 million, the-- the money that came in was \$626.4 million. In Michigan, with a population of 10 million: \$957.6 million. So to talk about this is a-- you know, we're back in the reefer madness stage. How ridiculous. Move on, people. Let it be a tool in a doctor's tool chest, in his medical kit, and move on and allow these children to be able to--

HILGERS: That's time, Senator.

PANSING BROOKS: --thrive and heal. Thank you, Mr. Speaker.

HILGERS: Thank you, Senator Pansing Brooks. Senator Day, you're recognized.

DAY: Thank you, Mr. President. And good evening, colleagues. It's officially evening, 5:00 p.m. I wanted to mention-- Senator Geist had mentioned earlier the 407 process and her concerns about scope of practice with pharmacists. And as a member of the Health and Human Services Committee, I just wanted to clarify and correct a couple of things that she had mentioned. This bill does not change anyone's scope of practice in terms of-- of pharmacists. They already have the ability to titrate medication and modify the dose if it's appropriate in cer-- certain circumstances. So this bill would not allow them to do anything that they cannot already do. Additionally, doctors already have an unlimited scope of practice, so this does not change anything for them. And then the third thing was the 407 process does not apply to prescription drugs. It only applies to scope of practice as it relates to clinicians and professionals. So this drug would not go through the 407 process because the process does not apply to prescription drugs. So we're not circumventing the typical process here. It just wouldn't apply in this case. So I just wanted to clarify

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that for the record. And then additionally, I think this is the last time I'm going to be on the mike before we get to cloture. I just want to give my last-ditch effort for a-- for a cloture vote on this. Many of the stories, the horror stories that we're hearing on the floor tonight, are related to the use of recreational marijuana. And I would hope that those of you that are listening would see those stories as a caution against not passing this bill. Right? Those horror stories are why we should pass this bill, because if we don't pass this bill in its very restrictive form, we are going to have a ballot initiative that will be much more liberal than what we've got in front of us today. It will include recreational marijuana. The medical marijuana ballot initiative should have been on the ballot with, I believe, 200,000 signatures, and we're going to have a whole new batch of people to sign that ballot initiative because we're going to be adding recreational to it. So when we tell the horror stories about the issues with recreational marijuana, which are very valid concerns-- I don't disagree with you. Those are very valid concerns, but those should be seen as a caution against voting this bill down. So if you have any concerns about what could potentially happen in the state of Nebraska with marijuana, I would hope that you would, at the very least, vote for cloture tonight so that we can move this bill to the second round of debate and address any concerns that anyone has and we can get this to the people that need it. This isn't about recreational marijuana. This isn't about kids who want to get high in high school or teachers who want to smoke in the middle of the day. This is about getting medical care to children and Nebraskans that desperately need it. So, please, if you're on the fence with this, even if you don't support the bill, please, give Senator Wishart the courtesy of a cloture vote for all of the work that she has done and all of the work that she is willing to do between now and Select so that we can move this forward and get people the help that they need in a safe manner. Thank you.

HUGHES: Thank you, Senator. Day. Senator Matt Hansen, you're recognized.

M. HANSEN: Thank you, Mr. President. I rise in continued support of LB474 and Senator Wishart's efforts. I do want to rise and talk about this notion of giving somebody kind of a vote to get to Select File and a vote for leap of faith. And Senator Erdman was very critical of that notion because it didn't benefit him and his priority bill. And I understand that. I would like to remind everybody that my priority bill died two days ago, late at night, with-- pretty painfully. And so I get the understanding to be skeptical or to be bitter or to be hostile to that notion. But there have been other bills this session

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that I had some fundamental opposition to, some of the Revenue Committee bills, LB432, that after talking with the introducer, after hearing where we wanted to go, I was willing to give that vote. We got it to Select file and on Select File we had an amendment that it seems the body agreed to and we're going to get that across the finish line. I did the same thing with Senator Friesen's LB454, which was mentioned. I gave a vote because I knew we needed a school financing bill this year and that seemed to be the one bill that was prioritized. We needed to keep it alive more than just one morning. Sure, there have been other bills that I couldn't get there, and I appreciate if people can't get there on medical marijuana-- medical cannabis. But if you can at all, if you want the system at all, this seems like a perfect bill to try that thought on, to try that help, a hand, help a Senator, help someone on an issue you know has the support among many Nebraskans. You know this is a lot of families' top issue, and you can help move it forward today with no obligation to help later and with an incredible amount of leverage, as Senator Flood likes to point out, incredible amount of leverage to then ask for something on Select File and shape it the way you want. Or you could be a hard no and be ultimately cut around the proc-- cut out of the process. And we see how that has worked. You know, sometimes you win, sometimes you lose on each of those strategies. The good news is with that strategy on General File is you've got two more opportunities, potentially, I suppose, three with a veto, to-- to change your mind or ask for more [INAUDIBLE]. So I bring this all up in the sense of, you know, this is something that a number of people have asked for on a number of bills, and I think there are a handful of us in the body who've proven we're willing to do that, we're willing to do that on General File, to keep that notion, to keep discussion, to keep collegiality, to keep the priorities of Nebraskans alive and moving forward, sometimes successfully, sometimes not. But it has to kind of go in-- it has to be a common thing. If we're going to make this a new norm or reestablish it as a norm-- it's something that I think existed more my first two years and I think existed more before me-- I would fully support that. I'm committed to that. But we also need to see it happen on more-- more bills. We need to have it happen on more than just tax policy. It needs to happen on, you know, medical policy; it needs to happen in education policy; it needs to happen elsewhere too. And that is why I would encourage my colleagues to, regardless of their initial hesitation, if your hesitation is-- whether or not it's-- it-- your hesitation, as based on some of these articles that have been read, you know, the articles are about how strictly are we going to prevent people from double-dipping or prevent children from getting it. Those are all things that are on the table. Those are all things that are negotiable. Those are all things that I think are

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actually pretty well-addressed with the Judiciary Committee amendments and certainly could be addressed further. If someone has a fundamental opposition and can't get there, I understand it. But if you have an inkling at all that you would like to shape this policy, that you would like to make sure some minimum safeguards is there, all you have to do is let Senator Wishart know that you're willing to do that and let her know your-- what you're looking for on Select File, and I have no doubt that it'll be treated with the seriousness and-- and care that it needs.

HUGHES: One minute.

M. HANSEN: So with that, I rise in continued support of LB474. I cannot overstate how many constituents, both from literally my district and from Nebraska as a whole, have contacted me in support of this bill and how impactful this will be to so many families. And I would hope others can take that kind of leap of faith with me on General File tonight and make sure we have an opportunity to move it forward. Thank you, Mr. President.

HUGHES: Thank you, Senator Hansen. Senator Blood, you're recognized.

BLOOD: Thank you, Mr. President. Fellow senators, friends all, it's been a long day of debate, but it's been really interesting. I just want to point out before I start speaking that I am in opposition of the reconsideration and in full support of both the amendment and the underlying bill as it will hopefully soon be amended. And I also put in the plea that we move this on to-- to Select and let's give people the opportunity to cooperate and see what we can do with this bill. We've certainly had many years to try and get this right. I also want to point out that we've had yet another paper read on the mike today that was actually not by a physician but by a philosopher, so definitely had the word "Doctor" in his name, but not a doctor of medicine. And-- and maybe that doesn't matter, but to me facts are facts, so not real impressed when a philosopher comes to tell me about medical-- or, excuse me, about marijuana in general, but we're talking about medical marijuana. And I want to build on what Senator Pansing Brooks had to say about the economic benefits of medical marijuana. So we know that only a small percentage of Nebraskans are going to become patients. So we're basing this on other states that have a strict cannabis program, is what Senator Wish-- Wishart is promoting. So only about 0.2 to 1 percent of our population, 0.2 to 1 percent of almost 2 million people, so Senator Briese probably has his calculator out right now because he's always really good at those types of things, are going to take advantage of this program. We're making it sound like you're going to be walking down the street and everybody you know

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is going to be high, which is pretty ridiculous, by the way. But here's what's really interesting. And at the very beginning of this debate, for those of us that were still awake and alert, Senator Wishart talked about that: 7.89 percent of Nebraska adults already admit on federal surveys that they have used cannabis in the last 30 days. So Pew Research found that 12 percent of Americans use cannabis and 53 percent of those individuals use cannabis wholly or partly for medical use. In other words, about 6 percent of all Americans are already using cannabis medically. They're just not under a doctor's supervision. And I want to address what Senator Brewer said on the mike. And I respect the fact that Senator Brewer is a veteran and I respect Senator Brewer, so I am not picking on him, but maybe he was not here earlier when I quoted what the rules were at the VA. And the VA clearly says to their veterans that if you need to discuss the potential use of medical cannabis as part of your treatment plan, we will discuss it with you. They have certain restrictions because they are a federal organization, but they know, when it comes to PTSD and pain, that they have to be able to-- to have that information available as part of the treatment process. And it has been known to be effective for people with PTSD. And I have to tell you that the vast majority of people, and it's because of my district and-- and the large population of veterans that I have in my district, but the vast majority of people who have reached out to me about this bill are veterans. So I speak for the veterans in my district, not from my own personal experience and I can't compare my experience at all to Senator Brewer's, so I say that very respectfully. So I'm going to end this with a happy story, because I've heard so many-- so much incorrect information today and if people are getting tired, then maybe this will just entertain people.

HUGHES: One minute.

BLOOD: So I found a great article on "California's 'weed nuns' on a mission to heal with cannabis." I want you to know that there is an order of nuns in California who actually illegally grow cannabis because they feel it is so important to help people heal and deal with their pain and they don't care what happens to them. They grow it, they sell it, and they help those that are in need because they feel is the right and righteous thing to do based on their religious beliefs. So I wanted to end my time at the mike on an up beat. I encourage you to read more about California's weed nuns and the good deeds that they've done to help others. Thank you, Mr. President.

HUGHES: Thank you, Senator Blood. Senator Clements, you're recognized.

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CLEMENTS: Thank you, Mr. President. I do want to say that I have read the bill and, in reading the bill, the reason I also consulted and-- and read from other documents was what's happened in other states is much like what I believe will happen with this bill. It's somewhat restricted, but not enough for my comfort level. And with that, I'd-- I'd yield the rest of my time to Senator Geist.

HUGHES: Senator Geist, 4:20.

GEIST: Thank you, Mr. President. Well, my testimony right now is not a happy story, and it is to refute some of the-- of the myth that no one's ever died from marijuana. That's claimed a lot and I think has even been claimed today. And I have right here some peer-reviewed studies. There are links that you can look this up, so come and ask me. I can give you the link if you want to see that it's actually legit stuff. Neonate death due to marijuana toxi-- toxicity to the liver and adrenals, it is a case number which I won't read, a case report. We report the death of an 11-day-old white female neonate due to acute marijuana toxicity. She died of extensive necrosis-- necrosis and hemorrhage of the liver and adrenals due to maternal use of marijuana. Conclusions: This case is unique in that other possible cases-- cases of death can be eliminated. With growing use of marijuana by pregnant woman-- women and increases in newborn drug screening of umbilical cord homogenate, more cases of neonate death due to acute marijuana toxicity could be discovered. The second one: pediatric death due to myocarditis-- myocarditis after exposure to cannabis. And this is-- also has a link. It is in a peer-reviewed study: Clinical Practice and Cases in Emergency Medicine, 2017. Abstract: Since marijuana legalization, pediatric exposures to cannabis have increased. To date, pediatric deaths from cannabis exposure have not been reported. The authors report an 11-month-old male who, following cannabis exposure, presented with central nervous system depression after seizure and progressed to cardiac arrest and died. Myocarditis was diagnosed postmortem and cannabis exposure was confirmed. Given the temporal relationship of these two rare occurrence cannabis exposure and sudden death secondary to my-- myocarditis, it-- in an 11-month-old, as well as histological consistency with drug-induced myocar-- car-- myocarditis without confirmed alternative causes in prior reported cases of cannabis-associated myocarditis, a possible relationship exists between cannabis exposure in this child and myocarditis leading to death. In areas where marijuana is commercially available or decriminalized, the authors urge clinicians to preventively counsel parents and to include cannabis exposure and the differential

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diagnosis of patients presenting with myocarditis. Moving on, acute cannabis toxicity--

HUGHES: One minute.

GEIST: --this is in the Pediatric Emergency Care, 2019, in November. It also has a link. The change in legal status of cannabis in the United States has had a significant impact on pediatric drug exposures. In states with decriminalization of recreational and medicinal use of cannabis, emergency department visits and poison control centers' call for unintentional pediatric cannabis intoxication are on the rise in the last few decades. Exploratory or unintentional ingestions of cannabis-containing products-- and it goes on to list what those are and I'm short on time, but are not the focus of this article-- can lead to significant pediatric toxicity, including encephalopathy-- encephalopathy, coma and respiratory depression. With the increasing magnitude of public health implications of widespread cannabis use, clinicians who care for pediatric patients routinely--

HUGHES: Time, Senator.

GEIST: --must be adept in recognizing this exposure. Thank you, Mr. President.

HUGHES: Thank you, Senator Geist. Senator Albrecht, you're recognized.

ALBRECHT: Thank you, President. I'm very sorry I don't have anything to read right now, but I just wanted to let you all know that those things that I do read about, I like to talk about because if you're going to sit here and kid yourself and think that children are not going to have access to somebody who has a card that they can give to a child, you're kidding yourself. And if you think for one minute I'm not going to stand up here and read about things, I'm sorry that you-- I must bore you or you think that I'm not-- I'm not sending the message that you want to send. The votes on this floor come from all of us researching what we need to know so that we can make an educated decision about what's right for the state of Nebraska. I don't think this bill is right for the state of Nebraska. I don't think it's right for our families. I don't think it's right for our communities. And when I don't hear a resounding opinion from-- from the-- from the-- the very doctors that take care of us, that don't want to see this happen, if they wanted to, we would know and they would decide how they're going to take care of this for us. But to think that a pharmacy would just jump in and say, hey, let-- let me take care of that for you, folks, I'll let you know how much you need, I'll let you

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know based on what you're telling me is wrong with you how much I'll prescribe, are you kidding me? I don't understand why we would even consider something like this, knowing what it's done to other states. I mean, they're going before us. They're letting us know the problems they're having. You go to Colorado today, you can say that people aren't leaving. You can't even drive around Colorado because of the accidents that they are having. I mean, there are all types of articles that you can read about. Medical cannabis, believe me, people are already getting it. It is illegal. But if I had a loved one and they felt like that's what they had to have, we're getting in the car and we're going to go take care of business. But it's not for us to decide as legislators that we need to do this for medical cannabis. I-- I'm just-- I don't ever want to feel responsible that I've made the wrong decision, that I'm going to hurt someone, that I'm going to give them too much of something that's going to have an ill effect on them. This is not-- this should not be on the floor of the Legislature to decide. This is not something that we should have to have the burden of deciding upon. And even if it went to the vote of the people, I know where you're going with this. You want to legalize it all. That's why I was reading my articles. That's why I want you to understand what it does to a young mind, to a-- to a child or a-- a college student that takes it on for the very first time. They've never been exposed to anything like it until they left home, and that's what we're going to have to deal with, them coming home and us trying to take care of them because they don't know all of the ill effects of-- of cannabis. THC is poison in my eyes. There is no way that we can keep our children from getting involved in this when all of their friends want to do it. This isn't just about families who come to my office. The ladies came to my office. They told me about it. They cried with me, but I prayed with them. And I said, I will not decide what your child needs to make them comfortable, that is your decision as-- as their parent and as their doctor, that is not for me as a state legislator to decide how to take care of your child. This is truly not something that will-- that I'll ever be able to support, and there are many of us on the floor that feel this way. But you bet I can stand up here without reading something, but sometimes facts mean a lot more than all of us just boviating [SIC] on the mike to get through something.

HUGHES: One minute.

ALBRECHT: If that's what it takes to get 33 votes and this is what we have to do, we have to find things to talk about. Senator Hunt, I got to talk for ten-and-a-half hours on my pro-life bill, and you bet I kept saying the same thing because there was nothing more to talk

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about. We could talk about recipes. We could talk about stories. But, no, on this particular issue, you're going to hear what's on my heart and what's on my heart as a grandparent and as a parent and as a state senator that-- that is looking out for the best interest of the state of Nebraska. Thank you.

HUGHES: Thank you, Senator Albrecht. Senator John Cavanaugh, you're recognized.

J. CAVANAUGH: Thank you, Mr. President. Well, so I rise in support of the underlying bill, LB474, and AM824. And I just want to quickly say that this was the first issue anybody talked to me about when I was going door to door in my election and about how important it was to folks in my community for the exact reasons that Senator Wishart brought this bill. And I think she's done a lot of work on this bill to make it a very narrow construction, and I believe that that's the right course and this deserves consideration. I would talk more, but I would like to yield the remainder of my time to Senator Ben Hansen.

HUGHES: Senator Ben Hansen, 4:20.

B. HANSEN: Thank you, Mr. President. I'm hoping just for a second I can garner my colleagues' attention about an amendment that I am dropping that I have been working with Senator Wishart on and others extensively. And I kind of want to go over a couple of the points about this amendment, which is actually a committee amendment to AM824. Number one, we will be reducing the amount of dispensaries per congressional district from-- congressional district from ten down to three, so only three dispensaries per congressional district. We will be removing the vaping portion of this bill and replacing it more with an inhaler, similar to what asthmatics use, which actually is more appropriate for dosage, so we're getting rid of the vaping portion. The-- the interesting part of this, which was a concern among some of my colleagues, was we are now be reporting to the PDMP. And if people are unfamiliar with what the PDMP is, it stands for the prescription drug monitoring program used extensively for opioids when we-- when a prescribing physician prescribes opioids to a patient. We will be doing the same thing with medicinal cannabis. So a pre-- "a prescribing," I use that in quotes for Senator Erdman, so a prescribing physician, if they happen to recommend medicinal marijuana to a patient, they will have to first actually check the PDMP, which we don't do for any other medication, but to check the PDMP. And if they decide to recommend it to the patient, they have to report it to the PDMP. The patient then goes to the dispensary. They go to the-- the person dispensing it. The person has to check the PDMP first before they dispense it. They report it to the PDMP to make sure that

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they're not going to a different dispensar-- dispense-- dispensaries. And so that is a little unique now, so we have an ability now to monitor and track who is getting what and where and from what physician, so a physician isn't worried about them doctor shopping or looping; the dispensary isn't worried about them going to another dispensary nearby and getting another one. So they have this all housed in a-- a medicinal marijuana portion of the PDMP. The person dispensing the medical cannabis only has access to the medicinal cannabis portion of it. They can't look and see what anybody else is getting dispensed, so that kind of limits that as well. Also, finally, we will be removing the PTSD portion of ailments that they are allowed to prescribe medicinal cannabis for, so we are removing that part. With these amendments, as well, the Nebraska Medical Association, the NMA, now will come out neutral instead of opposed. I want to thank Senator Wishart and others for working with me on this, trying to make this bill more specific for Nebraska, making it more responsible, making it more physician-centered. And so I encourage everybody to look through the amendment when it gets-- when it gets on the board, and hopefully we can get to it. So I'll-- we-- I'll be off to the side, too, for any questions if anybody has any questions for me about this specific amendment. So, again, removing the dispensaries from ten down to three, removing the vaping portion, removing the PT-- PTSD portion of the bill, and now incorporating the PDMP to prescribing physicians and dispensaries to track and monitor who is getting what and where and when.

HUGHES: One minute.

B. HANSEN: So again, with that, I'll be off to the side for any questions. Look through it. Tell me what you think. And with that, I'll yield the rest of my time. Thank you.

HUGHES: Thank you, Senators Cavanaugh and Hansen. Senator Hilkemann, you're recognized. Not seeing Senator Hilkemann, Senator Vargas, you're recognized.

VARGAS: Yes, I am up. Thank you very much, Senator. You know, first of all, I want-- I want to thank Senator Hansen and a couple others. It is very reminiscent of even my bill I was working on, the meatpacking plant bill. Bills in the past where people are talking about how to make a bill better and try to actually work on it. I think that's why we're at the place we are right now with Senator Wishart's bill. People were trying to talk on working on it and making it better and trying to figure out a way to find a pathway forward. I think it's a worthwhile endeavor. I applaud Senator Wishart and others that have been doing this. And we're at the point where, first, everybody's

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checked in, which is a really-- it's a beautiful thing, which means everybody's here or is in their room or is in the back watching us on TV. Hello, people in the back. You know, we're-- we're at a very interesting inflection point. I say this-- I've said this on the mike before. It's-- people are watching us and when we're doing something that is we're an outlier in the country on something, the first question people ask is, why? Is it because of the policy or is it because of politics? And I think that there are people in here that are because of the policy, that they believe it's not the right policy, which is OK. I-- I-- I fundamentally think it's OK to have that view. But then the question is, is there a way to make the policy better or easier to move it forward? And if that question is even a little bit yes, then we should be trying to do-- working on that, which is what I think we're seeing here today. For those that are just vehemently against it, that's also fine. But if there's that twinge of maybe I am OK with it and I do see some merit and then-- and it then-- I recon-- I ask you to reconsider whether or not that you would support this to-- to continue to moving on, because I-- I think people are watching us and are wanting to see us demonstrate a level of goodwill with one another, and that goodwill is-- is not always something that can be a tit-for-tat on whether or not you do this for me, I scratch your back, you scratch mine. Sometimes it comes down to that, but sometimes it's also the goodwill that comes from doing something without seeking something in return. And I'm not say-- and maybe that-- that sounds naive to some extent, but I do think I've seen that here in this body and I would like to see more of it, because that level could have saved us some more headaches on a lot of bills that have not gone through different stages. It's not a reason to then not move forward on something like this. Again, I know not everybody is black and white on this. Some people may be, but for those that are not, I ask you to consider, if you're put in the same scenario where your bill is continuing to change, modify, continue to be more-- you're-- you're negotiating it yourself, but it's becoming better and you're doing it for public policy, then shouldn't we be trying to reward that type of legislation, that type of process? It is admirable. It is worthwhile. And instead, if we don't move forward or don't find a way, then in some instances, it then becomes a little bit of learned helplessness, which for people that don't know, learned helplessness is this psychological phenomenon that even though you continue to try to do more or make efforts, because the outcome isn't any different, you start to believe that it's not worthwhile to even try. It is a human behavior that happens as a result of multiple times realizing that you're not going to be able to move forward. And I don't want that to happen to us in this body. It sometimes feels that way. And when it feels that way, it's really disheartening. But

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instead, we do have an opportunity to look beyond that. We have an opportunity to try to-- to some way self-diagnose and do better on our own--

HUGHES: One minute.

VARGAS: --and be better individuals and better legislators. I-- and I-- I'm very frankly saying that because there are a small number of individuals that can really make the tide here turn to then move it to the next stage. And we've been here in different paths and different bills. And I know not all bills have gone through, some have, but the issue is not whether or not mine has or has not as much for everybody. Some people are still looking at the policy and for those some people, I am talking to you. If there is a way to support this in a version, either with Senator Ben Hansen's amendment right now, which is, I think, a worthwhile amendment that Senator Wishart supports, I say let's do it because I also believe our country is watching. And when our country sees a Legislature our-- like ours work better, not work perfect or not work at all, I think it sends the right message to the-- to the country and to the state that systems of government like ours are still better than the other systems of government--

HUGHES: Time, Senator.

VARGAS: --we're seeing in other statehouses. Thank you.

HUGHES: Thank you, Senator Vargas. Senator Morfeld, you're recognized.

MORFELD: Thank you, Mr. President. Colleagues, I want to talk about some of the things that have been said on the floor and-- and provide some counterpoints. First, I think one senator brought up they were concerned about pregnant women getting this. Well, it's explicitly stated in the bill that doctors shall not recommend this to pregnant women. So it's explicitly in the bill that that is not allowed under the proposed law. Second, I'm getting confirmation, but I think the case that Senator Lowe keeps bringing up has actually been overturned. And so once I have that confirmed, I'll be sure to talk a little bit more about that. But I also want to talk about the Attorney General's Opinion and provide some counterpoint to the Attorney General's Opinion. In fact, a well-known professor, Professor Robert Mikos, is an expert in federalism and wrote an entire memo refuting and providing counterpoint to the Attorney General's Opinion that came out two years ago. So I want to read a little bit of that to get that in the record, because I think it's important to have a counterpoint to that. So first, the Attorney General's Opinion misrepresents what the MCA, which was the-- the name of the Medical-- Medical Cannabis Act

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that Senator Wishart introduced a few years ago, first, it misrepresents what the MCA and similar medical marijuana legislation actually does. The Opinion begins with a reasonable description of the MCA. It notes that the legislation would, quote, authorize the cultivation, processing, wholesale distribution and retail sale of cannabis-- remember, this is the one from two years ago-- and cannabis products for medical uses under Nebraska law. It goes on talking about what the actual bill does. It then goes on to describe some of the regulatory provisions, so the Attorney General's Opinion, goes on to describe the regulatory provisions of the MCA in a little bit more detail, including the hefty fees that the state would charge license medical marijuana suppliers, up to \$25,000 ann-- annually for dispensaries. Following this description, however, the Attorney General then inexplicably proceeds to claim that the MCA would, quote, create a state regulatory scheme that would affirmatively facilitate the cultivation, processing, wholesale distribution and retail sale of federal contraband on an industrial scale, which would frustrate and conflict with the purpose of the intent of the CSA, so the federal Controlled Substance Act, end quote. The AG's Opinion clearly mischaracterizes the effect of the MCA's regulatory scheme and those of similar state marijuana reforms. Indeed, it's hard to see how the myriad regulations imposed by the MCA would affirmatively-- "affirmatively facilitate" the production and sale of marijuana. Consider the substantial fees that the state proposes to levy on licensed medical marijuana industry and which are repeatedly noted by the Attorney General. When was the last time that you met a business person who claimed state taxes of up to \$25,000 per year, quote, affirmatively facilitated his or her business? As I've explained repeatedly before, the regulations states now impose on medical and recreational marijuana industry is to help limit, not expand, marijuana sales. That's the point of them. And again, I'm reading from this professor's memo: Perhaps the Attorney General had forgotten, but Nebraska already imposes taxes on illicit suppliers of marijuana, heroin, cocaine, etcetera. Indeed, the state has collected more than \$500,000 in taxes from purveyors of illegal drugs since 1992. That's a fun fact. If the Attorney General is right, however, he's given those state taxpayers a very strong legal argument to demand a refund. Ironically, he's also given ammunition to marijuana consumers waging constitutional challenges to Colorado's--

HUGHES: One minute.

MORFELD: --steep marijuana taxes. If those taxes fall, it's hard to see how it would help Nebraska. Second, it omits any mention of the anticommandeering, the key constitutional principle enabling state

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marijuana reforms. To be sure, state regulations like those embodied in the MCA fall short of criminal prohibitions. After all, they're designed to limit the marijuana industry, not kill it. But states have no obligation to criminalize marijuana just because the federal government does so. That's the clear impli-- implica-- impli-- implication of a constitutional principle known as the anticommandeering rule. In a nutshell, the anticommandeering says that Congress can't force the states to ban marijuana or to help the federal government enforce its own ban. Recently, the Supreme Court found that this principle empowered states to authorize conduct Congress had forbidden. So it should be pretty apparent by now--

HUGHES: Time, Senator.

MORFELD: --that Congress has no power--

HUGHES: Time, Senator.

MORFELD: Thank you, Mr. President.

HUGHES: Thank you, Senator Morfeld. Senator Hunt, you're recognized.

HUNT: Thank you. I yield my time to Senator Morfeld.

HUGHES: Senator Morfeld, 4:55.

MORFELD: Thank you, Mr. President. Thank you, Senator Hunt. I'll continue on with the professor's memo. So it should be pretty apparent now that Congress has no power to preempt states from legalizing authorizing marijuana possession and supply under state law. Simply put, the anticommandeering rule enables states to legalize and authorize marijuana possession and sales. It also explains why Congress has no desire to stop states from replacing prohibition with sensible regulations. After all, it would gladly take whatever help it can get from--in pursuing federal objectives, and a world with state taxes on marijuana looks more appealing than one without those taxes, yet the Attorney General's Opinion does not even mention the anticommandeering rule or *Murphy v. NCAA*, not even once. This is a glaring omission from the state actor charged with providing informed legal advice to guide state lawmakers. Number three, it distracts from this omission by focusing on the content of federal law. The Attorney General devotes roughly half of his Opinion to explaining that federal law bans marijuana outright, even if it isn't enforcing that ban against state law-compliant behavior. This-- but this lengthy discussion of federal law is a red herring. No one disagrees with the opinion that federal law now bans marijuana outright. But the fact

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that Congress bans marijuana does not suggest that it necessarily wants to do the same. True, the state can't block enforcement of the federal ban by federal officials, if it ever came to that, but no one is claiming that a state could do so. No state has claimed that it can block federal enforcement of the marijuana ban. So spending four pages of an eight-page Opinion explaining that Nebraskans who comply with the MCA might still be prosecuted by the federal government is more distracting than it is illuminating. That's not just because the likelihood of federal enforcement at this point is virtually zero. And just as a side note, it's virtually zero because Congress has stated its intent for the federal government not to enforce those laws unless it happens under very specific circumstances. It's also because, back to the Opinion here-- or, excuse me, the memo, it's also because even a nonnegligible prospect of federal enforcement doesn't bar the state from charting its own course on marijuana policy, as the 34 states that have legalized medical marijuana, not to mention 11 of them have legalized recreational marijuana, have concluded. So the AG reaches the wrong conclusion about the enforceability of state medical marijuana legislation. I'm not saying that Nebraska necessarily should adopt the MCA-- this is the professor again-- but the people should make the choice based on sound advice, policy and legal, not ill-considered Opinions. Colleague, [SIC] in summary, the state can legalize marijuana. The state cannot prevent federal authorities from enforcing federal law, but the state can legalize marijuana. And the federal can-- federal government can still enforce their laws how they see fit. This does not conflict with the federal law. The federal-- the federal authorities can still enforce if they want, but it's important to note that Congress several times now has said that the Department of Justice should not enforce marijuana possession in states that have legalized it, in-- with the exception being organized crime and other types of very serious criminal activity, such as money laundering and things like that. So the intent of Congress has been fairly clear; and if that wasn't clear, you wouldn't see 48 other states--

HUGHES: One minute.

MORFELD: --that have legalized marijuana in some way doing that. So, colleagues, simply because we have this federal law on the books and simply because it's a Schedule I drug, does not mean that states cannot exercise their rights to legalize. And in a country where Congress has said that they are not going to enforce simple marijuana possession in states that have legalized it, with the exception of very serious crimes such as organized crime or money laundering, then that should not be a barrier to us passing this because it hasn't been

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a barrier in 48 other states and the sky has not fallen in 48 other states. If you want to go after a dangerous drug, go after alcohol. That's killed way more people and, in fact, we still can't point to somebody that marijuana has directly killed.

HUGHES: Time, Senator.

MORFELD: Thank you, Mr. President.

HUGHES: Thank you, Senator Morfeld. Senator Erdman, you're recognized.

ERDMAN: Thank you, Mr. President. Good evening. I was intending to ask Senator Pansing Brooks some questions, so if she'd move to the microphone, I have some questions for her. But while she's moving there, let me ask you a question. Perhaps it's rhetorical. You think about it, if you would. If I have in one hand a bag of medical marijuana and the other hand I just have a bag of regular old weed, marijuana, can you tell the difference? If I ask you to identify which one's medical marijuana, which was just good-old smoking weed, would you be able to know? Could you tell? The answer is no. So it was great messaging when they put out the thing, called it medical marijuana. It is marijuana. That's the end and that's it. It's marijuana. So I was wondering if Senator Pansing Brooks would yield to a question.

HUGHES: Senator Pansing Brooks, will you yield?

PANSING BROOKS: I'd be happy to.

ERDMAN: Thank you, Senator. So, Senator, did you hear what Senator Bostelman read about schoolchildren getting medical marijuana at school?

PANSING BROOKS: I me-- I heard part of it, but I'm not sure exactly the [INAUDIBLE]

ERDMAN: OK, so, all right, so here-- here's my question. Can you walk me through how a young person would go to a doctor and then get prescribed medical marijuana? How would that work?

PANSING BROOKS: Well, they have to go through their parents, just like you do, as any child would go to a doctor for anything else that they have. If they have mono and need to be tested for mononucleosis or-- you would go to the doctor and then be tested and-- and the doctor would determine whether you need antibiotics, whether you're in pain.

ERDMAN: OK. OK. So then once, if they made a determination that they need-- they needed marijuana to solve their issue, then they would get

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a prescription to go get it from the pharmacy or how would they get that?

PANSING BROOKS: It's-- it's my understanding it's from the pharmacy or the medical provider that--

ERDMAN: Oh, OK.

PANSING BROOKS: So-- and that's the whole point of Senator Wishart's amendment is to have it more regulated, rather than just saying a free-for-all on medical marijuana.

ERDMAN: OK.

PANSING BROOKS: That's why I'm really in favor of this.

ERDMAN: OK. So do you know the difference between a prescription and a permission slip?

PANSING BROOKS: A prescription and a-- pardon me?

ERDMAN: A permission slip.

PANSING BROOKS: A permission slip at school or--

ERDMAN: A permission slip to buy marijuana?

PANSING BROOKS: Yeah. I would know.

ERDMAN: OK.

PANSING BROOKS: I presume one is from a doctor and the other is-- I don't know what a permission slip is--

ERDMAN: All right. Let me-- let me explain it again. I've said this four or five times, gonna do it one more time. Thank you for answering those questions. Let me say this as clear as I possibly can, and I'll speak slow so you can get it, all right? There is-- there is no prescription for marijuana. Let me say it again. There is no prescription for marijuana. There is a permission slip. OK? So when you stand up and say marijuana is going to be prescribed, medical marijuana is going to be prescribed, that is not the case. It is marijuana and there is no prescription. It's a Class [SIC] I drug. No prescription can be written for marijuana. It is a permission slip. So once and for all, for the record, or however we say that here, it is not a prescription. It is a permission slip to go buy weed, to go buy marijuana. But they did a great job of identifying it differently from

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regular-old marijuana and they call it medical marijuana. And we're leading people down the path that you can get a prescription for it because prescriptions have a--

HUGHES: One minute.

ERDMAN: --specific-- have a specific drug you're going to buy and the-- the ingredients are the same in every pharmacy. All right? Tells you how many to take, when to take it, take it with food, not with food, once a day, twice a day, it tells you all that stuff. With marijuana, you get a permission slip and the guy or the lady at the dispensary tells you how much you should use. There is no prescription for marijuana, none. It is a permission to buy marijuana. Now that's the fourth or fifth time I've said that and maybe-- maybe it'll get to somebody that understands prescription is not part of the process. It's a presc-- it is a-- it is a-- it's a permission. I can't believe it. But that's what it is. That's why I haven't changed my opinion about this. You can't identify the difference between regular-old weed you smoke and miracle-- mar-- medical marijuana.

HUGHES: Time, Senator. Thank you, Senators Erdman and Pansing Brooks. Senator Machaela Cavanaugh, you're recognized.

M. CAVANAUGH: Thank you, Mr. President. I am going to vote for this. I'm going to vote for cloture for this. But I just wanted it stated for the record that I don't actually support this bill. It's extremely restrictive, and I think the ballot initiative is the way to go in Nebraska. But because Senator Wishart has worked so hard on this bill, I'm going to be voting for it and I'm definitely going to be giving her a cloture vote on this. But if this fails, I look forward to it on the ballot. And I'll yield the remainder of my time to the Chair.

HUGHES: Thank you, Senator Cavanaugh. Senator Geist, you're recognized.

GEIST: Yes, thank you, Mr. President. And I will yield my time to Senator-- Speaker Hilgers.

HUGHES: Speaker Hilgers, 4:50.

HILGERS: Thank you, Mr. President. Thank you, Senator Geist. I rise again in opposition to the underlying bill. And I will say I wasn't thinking that I would speak again tonight, although I thought it might be helpful to recap some of the conversation this morning as why-- as to why I do not think this is something that is permissible under both fed-- federal law, the CSA, as-- as applied under the U.S.

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Constitution, under the supremacy clause and the doctrine of preemption, and-- but I-- I decided I would speak again on that. But I think my-- the timing is very-- it's very timely, because of Senator Morfeld's comments from the professor that I tried to read, I tried to write down as many of those arguments as I could, and I think it's a helpful rebuttal because I don't think the points that were made, at least the ones that I was able to write down, I think, are-- are persuasive as it relates to the Attorney General's Opinion. That Opinion is based on a pretty simple-- pretty simple, straightforward logic, logic that is based on what I think are not just our founding documents, but are the core documents that we should look at. Prosecutorial discretion, the intent of Congress, things that-- professors' statements, things that we-- that-- that we could point to as maybe persuasive, really have no bearing as to whether what is or is not constitutional and what is the legal framework that we're operating under. This-- the Attorney General's Opinion is not persuasive because it's the Attorney General saying it; it's persuasive because the logic that it's-- that it lays out is-- is-- is, I think, incredibly persuasive and, in my view, unassailable. It-- the logic is very simple. Supremacy Clause says federal law trumps, federal law trumps when there's preemption. The Supreme Court in the Gonzales case found that the CSA, as it relates to marijuana, a Schedule I drug, preempts state regulation in a medicinal context. The question then really is only, is this, the regulatory scheme in LB474, in any way meaningfully different from the California system? The answer is can-- I can see no way that the answer could be anything other than, yes, it is-- it is not-- I'm sorry, no, it is not meaningfully different. There's over-- over-- it's a 60-page bill, 50 sections, lots of regulatory pieces to this puzzle. There's really no way you could say, no, no, no, the California system, which is-- which was found to be preempted, is-- is-- is now-- the Nebraska system is somehow different such that it's not preemptive. It's just-- you can't do it. But if you're going to make the argument, that's what you have to do. Now the two arguments that I heard, so the-- there's really three arguments I heard. The first one, as far as I could tell, is some suggestion that the Attorney General used sleight of hand and-- and-- and mischaracterized the then bill, LB110. I don't see how anyone could argue that LB474 is somehow materially different, materially different from the scheme that was in the California case or the California scheme that underlies the Gonzales decision. I just don't see it. And I was writing it down fast, too fast, and I don't know if I caught all the arguments, so if I missed something, Senator Morfeld will correct me. The second one is this anticommandeering argument, and it's conflating two things, colleagues. Preemption, which applies here, and commandeering, which doesn't, are two

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different things. They're two different things. The Murphy NCAA decision, in fact, Justice Alito said, two different things. OK? They're two different things. Commandeering says you cannot, federal government, tell the states what they can or cannot do. Preemption says, when the federal government has preempted a field, states, you can't do something that will then allow a private actor to conflict with that federal preemptive regulatory system, and that's what Gonzales was. Gonzales was not a commandeering case. There was no suggestion that the federal government was telling California to do or not to do something. What it was, was preemption. Preemption is federal government in this-- in this case has said you can't sell Schedule I drugs for any reason, not--

HUGHES: One minute.

HILGERS: Thank you, Mr. President-- not the state, you, state, can't sell as a state actor, which might arguably some sort of commandeering. It is private actors can't go out there and sell. You can't then, state, go allow people to sell when the federal government has said you can't-- very clear on Gonzales. You have to attack Gonzales if you want to win this-- this legal fight, in my opinion. The sec-- the last argument is that the reason why is this congressional intent argument and, colleagues, congressional intent, the only congressional intent that matters is in statute, bills that go to the President and are signed, just like the only thing that matters here-- I mean, we can make a record for-- for the things that we intend to do, we'd like to do. The only thing that matters are what gets passed into law. Congressional intent is not why the federal government is not enforcing their law. It's weakness in D.C.. They're political decisions to not enforce it, and they sh-- are the ones who should not-- solve the problem, not us. In my opinion, we do not have the authority to do this and that's why I'm going to vote no. Thank you, Mr. President.

HUGHES: Thank you. Speaker Hilgers. Senator Bostelman, you're recognized and this is your third opportunity.

BOSTELMAN: Thank you, Mr. President. I want to talk a little bit about the cannabis policy, public health and safety issues and recommendations. This is a report by the United States Senate Caucus on International Narcotics Control in March 2021. And really, there's-- there's just highlight of the-- of the sub-- of the paragraphs of the study in there what talks about-- talks about the THC potency has increased dramatically over the decades and is potentially more accessible. I talked about that in the article from Colorado, from the doctor there. As THC potency increases, the

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research indicates that the risk of physical dependence and adverse reaction may increase as well. That was in the article. Potent THC may be associated with higher emergency room visits, which is costly to states. I believe there's another senator spoke on that. Marijuana is the most consumed drug by pregnant women, which is concerning since research shows adverse effects on the child. There is an increase in accidental ingestion of marijuana by children. Youth dependent on cannabis show short-term memory deficits and delayed recall of information. A longitudinal study found that early persistent cannabis use by teens can result in a drop of up to eight IQ points later in life. Adolescent marijuana use is linked to lower educational performance and a higher likelihood of dropping out of school. In a study of long-term cannabis users, participants reported lower salaries, lower educational attainment, and less financial stability, even when controlling for other factors, and heavy cannabis use can exacerbate psychosis and schizophrenia symptoms and can accelerate their onset in those who are predisposed to these conditions. And I think several-- or a couple senators spoke specifically to this. In youth, there are correlations of marijuana use with symptoms similar to schizophrenia and psychosis. Research demonstrates cannabis use impacts judgment, coordination, two functions are critical to driving. An increasing number of states are finding that cannabis is the most commonly detected drug in impaired drivers. And that's the-- the main points, I guess you'd say, and this comes March-- again, March 2021, United States Senate Caucus on International Narcotics. I understand that talks about recreational, as well as-- as medical, but that's-- that's what we're talking about here is the expanded use of marijuana in medical. And-- and the article that I read from Colorado, it talked about the-- the significant increase, especially in our youth, psychosis, other issues for our young, development of the brain for our young, is what we're talking about. The effect of cannabis-- another article here, the effect of cannabis use on people with chronic noncancer pain prescribed opioids, findings from a four-year perspective cohort, a study, in the findings it says: We found no evidence of a temporal relationship between cannabis use and the pain severity of a pain interference and no evidence that cannabis use reduced prescribed opioid use or increased rates of opioid discontinuation-- continuation-- the interpretation was that continuation use of common-- was common in people with chronic noncancer pain who had been prescribed opioids but were found nonevidence that cannabis use improve patient outcomes. People who use cannabis had greater pain and lower self-efficacy in managing pain, and there was no evidence that cannabis use reduced pain severity or interference or exceeded an opioid-sparing effect. As cannabis use for medical purposes increase

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globally, it is important that large, well-designed clinical trials, which include people with complex comor--

HUGHES: One minute.

BOSTELMAN: --comorbidities are conducted and determined the efficacy of cannabis for chronic noncancer pain. And that's, I guess, one of the-- the points within the bill that we have is, how do we know that-- that this is going to provide the relief that's needed? And what's-- what I have found is that AMA and the American Medical Association, American Psychiatric Association, says they're in studies now from 2015, currently working on it, and they're working to find what works best and what those doses are, because one question I have that I don't have an answer to is, what's the proper dose? I don't know if anyone here or any doctor can tell me what the proper dose is for any specific case, illness, whatever it might be. That's troubling to me. And when we don't have proper dosage measured, like you have on other narcotics, whether they're appropriate or not--

HUGHES: Time, Senator.

BOSTELMAN: --if you think--

HUGHES: Time.

BOSTELMAN: That's troubling to me, and I think there's problems with the bill--

HUGHES: Time, Senator. Time.

BOSTELMAN: Thank you.

HUGHES: Thank you, Senator Bostelman. Senator Wishart, you're recognized.

WISHART: Thank you, Mr. President. I will yield my time to Senator Groene.

HUGHES: Senator Groene, 4:50.

GROENE: Thank you. And in return, I'll yield my time that I think would give her cloture, the last statement. I'll be blunt. I've told my friends I-- I am going to give cloture to LB474 and I'm going to support it. Since I first came here and this issue has come up, this is the best-defined medical bill I have seen. I travel a lot. You folks know that. I have for a living. I know a lot of people. And the personal testimony I've had from people with bad arthritis who can now

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use their hands, had a personal friend get brain cancer, terminal, medical profession drugged him up so bad that he couldn't even talk to his family. His son, very, very conservative family, drove out to Colorado in desperation, brought back cannabis treatment. Last three months of his life, he was coherent, functional, and he could spend his last time with his family. I could go on and on and on. It works. I also, politicallywise, do not want recreational marijuana, and I'll tell you what's going to happen. That family I told you about, very conservative family with the brain cancer, he might have at least 150 lo-- aunts, uncles, brothers and sisters, nephews, nieces. They will all sign a petition for medical marijuana and they don't care what's attached to it. They will also vote for it. And medical and recreational marijuana will pass. If we, politically, who do not want recreational marijuana, don't realize that if we take that subset of voters out of it, out of it because they don't want recreational marijuana, too, but they're desperate, if we take that subset out of it by-- by accepting this bill, we have a chance to defeat recreational marijuana. We have no chance at all if those people-- and I could go on and on about examples of people I know and their families, the extended families and friends. Have to accept recreational marijuana to-- to be legal? And don't kid ourselves, folks. This stuff is everywhere. There are people using it in every community across the state for pain relief because, see, they don't all have the money for the expensive treatments. They don't even have good insurance. And they don't want to take opiates and they're in pain, just pain of old-- getting old, bad backs, you name it, they are using it, and I'm not afraid of it harming, killing people. I've seen-- I know more personal experience of people dying of alcohol than I ever heard of it with-- I know a few friends in my life marijuana has ruined their lives, but they're still alive; living under a bridge somewhere, but they're still alive. So if we're going to stop recreational marijuana, if we are going to get to the point where the-- the people, good, solid citizens are using this for pain relief, and to get them out of the shadows of illegality, we need to accept this. I was deadly against it. I figured here comes Senator Wishart again with one of the bills she brought six years ago. But she has cleaned this thing up. She has refined it to the point where it's controllable.

HILGERS: One minute.

GROENE: And then my good friend Senator-- Senator Ben Hansen is involved. He's a holistic type of medic-- doctor. He understands and he's involved in an amendment. Two years from now, you guys will-- just like on gambling, my conservative friends will be voting on a

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bill to legalize medical-- recreational marijuana, just like you did on gambling. You voted and I voted for legalizing gambling, something we are distinctly against, and we voted on it this year. Two years from now, you will be doing the same things and then you will look for a little victory because you took keno back out of the bill or you took something out of the bill, but you will lose and your record will say you voted for-- for recrea-- recreational man-- marijuana because the constitution will say you have to do it. That's where I stand. Deductive reasoning, Senator Blood, that's how I come up to my decisions. Thank you.

HILGERS: Thank you, Senator Groene. Senator Lowe, you're recognized.

LOWE: Thank you, Mr. Speaker. Senator Groene, that is going to be on the ballot, whether we want it there or not, whether we pass this or not. Marijuana is going to be on the ballot because that is how they get people out to vote. It will be there. It will be full-fledged marijuana. I will continue reading from the Politico magazine. Almost all the states that have legalized pot either require approval of local gov-- officials, as in Massachusetts, or impose a statewide limit on the number of licenses chosen by a politically appointed oversight board or both. These practices effectively put million-dollar citi-- decisions in the hands of relatively small-time political figures: the mayors and the councilors of small towns and cities, along with the friends and supporters of politi-- politicians who appoint them to the board. And these strictures have given rise to exact type of corruption that got Correia in trouble with federal prosecutors. I want to pause from that for just a second. What is described in this article so far is something that the state of Nebraska is stepping into. According to page 22, line 1, the state of Nebraska will cap each congressional district at ten medical marijuana dispensaries. What I just read should hopefully give you pause, because this Legislature is looking at stepping into a situation that other states have shown cause for public corruption. Former Maryland State Delegate Cheryl Glenn was sentenced to two years in prison in July for taking bribes in exchange for introducing and voting on legislation to benefit medical marijuana companies. Missouri Governor Mike Parson's administration is the target of law enforcement in his legislative probes into the rollout of medical marijuana program. The state has given full control in an industry where there is so much competition, where everyone realizes how valuable these licenses are, said CEO of Northstar Financial Consulting, which works with cannabis businesses. Colonel John Bolduc, superintendent of Ne-- Nebraska State Patrol, testified before the Legislature that marijuana legislation would make narcotics law enforcement more difficult. For example,

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Nebraska's drug-detection canines are all trained to detect marijuana. Can they tell the difference between medical marijuana and illegal marijuana? Were Nebraskans to legalize medical marijuana, many or all of Nebraska's canine units would have to be replaced at a significant cost of law enforcement agencies. Let me reread that again. Colonel John-- John Bolduc, superintendent of Nebraska State Patrol, testified before the Nebraska Legislature that-- that marijuana legalization would make narcotics law enforcement more difficult. Is that really what we want to do, folks? Is that really what we want to do, is to tax our law enforcement by passing this? We have a problem now. We want to increase that problem? This is bad legislation. States that legalize marijuana have struggled to prevent illegal drug diversion. In 2016--

HILGERS: One minute.

LOWE: --Oregon study-- thank you-- estimated that 70 percent of the state's 2017 marijuana crop would be illegally diverted and sold on the black market. Legalizing marijuana for medical use likely means increased black market and drug cartel activity in Nebraska. Really, folks, that's what we want to do? We want to bring the drug cartel to a larger effect in Nebraska? Really? Canadian National Cannabis Survey: This report comes on the heels of another study finding that the black market in Canada is absolutely thriving, with over 79 percent of the marijuana sales in the last quarter of 2018 occurred outside the legal market. This is what we get with legalizing marijuana. Really, we want this? You gotta be kidding me.

HILGERS: It's time, Senator.

LOWE: Thank you.

HILGERS: Thank you, Senator Lowe. Senator Groene, you're recognized.

GROENE: I yield my time to Senator Wishart so she can close on her bill.

HILGERS: Senator Wishart, 4:55.

WISHART: Thank you, Mr. President. Thank you, Senator Groene. Colleagues, I'd like a call of the house, first of all.

HILGERS: There's been a request to place the house under call. The question is, shall the house go under call? All those in favor vote aye; all those oppo-- opposed vote nay. Please, record, Mr. Clerk.

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ASSISTANT CLERK: 22 ayes, 3 nays to go under call, Mr. President.

HILGERS: The house is under call. All unexcused senators please return to the floor. All unauthorized personnel please leave the floor. The house is under call. Please continue, Senator Wishart. Your time is going.

WISHART: Thank you. Well, we have arrived, colleagues, and I want to send a real special thank you to Senator Ben Hansen for his work on an amendment that makes my bill so much better. Unfortunately, we are not able to amend on General File. But all of you know my word is my honor and I commit to you that I will work just as tirelessly as I have on LB474 and the Judiciary Committee amendment to make sure Senator Ben Hansen's amendment get on-- gets on there, because I think it's going to change the playing field with the PDMP work that we're going to do on medical cannabis and make this one of the safest systems in the country, and I'm forever grateful for him for doing that. And I also want to thank Senator Groene because you gave, in my mind, the most compelling speech I've heard, even more than any one I could give on this issue. Colleagues, I'd like everyone just to take a deep breath and consider voting on this issue. I recognize that this is a tough issue for some of you to vote on. But I've been to your districts and I know-- I know the faces of the people who will benefit from this. Countless people will benefit from this. I really hope you think about them when you vote on this today. We have it in ourselves to do something pretty amazing today. And with that, I would encourage your green vote on LB474. Thank you.

HILGERS: Thank you, Senator Wishart and Senator Groene. Mr. Clerk, for a motion.

ASSISTANT CLERK: Mr. President, Senator Wishart would move to invoke cloture pursuant to Rule 7, Section 10.

HILGERS: It's the ruling of the Chair that there has been a full and fair debate afforded to LB474. Senator Wishart, we're still waiting on-- we are under call and we're still waiting on Senator Wayne. And you-- you requested a roll call in reverse order, is that right? OK, we'll-- we will wait. All unexcused senators are now present. The question before the-- the body is the-- the adopt-- motion to adopt cloture. A roll call vote in reverse order has been requested. Mr. Clerk, please call the roll.

ASSISTANT CLERK: Senator Wishart voting yes. Senator Williams voting no. Senator Wayne voting yes. Senator Walz voting yes. Senator Vargas voting yes. Senator Stinner voting yes. Senator Slama voting no.

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Senator Sanders voting no. Senator Pansing Brooks voting yes. Senator Pahls voting yes. Senator Murman voting no. Senator Moser voting no. Senator Morfeld voting yes. Senator McKinney voting yes. Senator McDonnell voting yes. Senator McCollister voting yes. Senator Lowe voting no. Senator Linehan voting no. Senator Lindstrom voting yes. Senator Lathrop voting yes. Senator Kolterman voting yes. Senator Hunt voting yes. Senator Hughes voting no. Senator Hilkemann voting yes. Senator Hilgers voting no. Senator Matt Hansen voting yes. Senator Ben Hansen voting yes. Senator Halloran voting yes. Senator Groene voting yes. Senator Gragert voting yes. Senator Geist voting no. Senator Friesen voting no. Senator Flood voting no. Senator Erdman voting no. Senator Dorn voting yes. Senator DeBoer voting yes. Senator Day voting yes. Senator Clements voting no. Senator Machaela Cavanaugh voting yes. Senator John Cavanaugh voting yes. Senator Briese voting no. Senator Brewer voting yes. Senator Brandt voting yes. Senator Bostelman voting no. Senator Bostar voting yes. Senator Blood voting yes. Senator Arch voting no. Senator Albrecht voting no. Senator Aguilar voting yes. Vote is 31 ayes, 18 nays, Mr. President.

HILGERS: Motion to invoke cloture is not adopted. I raise the call. Mr. Clerk, for items.

ASSISTANT CLERK: I do, Mr. President: amendments to be presented to LB474 from Senator Flood, Senator Ben Hansen, and Senator Lowe. New resolutions: LR146, by Senator Geist, extending congratulations to the Interscholastic Equestrian Association National competition, that'll be laid over; LR147, by Senator John Cavanaugh, which calls for a study by the-- regarding the various political subdivisions. That's all I have at this time.

HILGERS: Thank you, Mr. Clerk. Colleagues, we're going to stand at ease for 30 minutes and we'll come back at 6:47. We will start on LB579, so please make sure that you're back in time so we can start on that bill and because we will be voting and starting on LB579. Thank you.

[EASE]

HILGERS: Members, it's 6:47. We will come back to order. Mr. Clerk, the next item on the agenda.

ASSISTANT CLERK: Mr. President, the next bill is LB579, offered by Senator Moser. It's a bill for an act relating to highways and roads: to restate intent; to require a requirement-- to provide requirements for a report and presentation by the Department of Transportation; to state intent regarding funding; and repeal the original sections. The

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bill was introduced on January 19, referred to the Appropriations Committee, placed on General File with no committee amendments.

HILGERS: Senator Moser, you are recognized to open on LB579.

MOSER: Thank you, Mr. Speaker. I am glad to be here this evening to introduce LB579, My priority bill. In 1988, the Legislature created the Nebraska Expressway System with the goal of connecting cities with 15,000 or more in population to the interstate system with four-lane expressways. The reasoning behind it was to make travel safer, more convenient, and to expedite commercial truck traffic, which would enhance economic development across the state. These projects were slated to be completed by 2003. Here we are in 2021, and the system is still not complete. LB579 is a step in the right direction, I believe, to help the Nebraska Department of Transportation to be able to finish the expressway. I brought the Columbus Chamber of Commerce's Expressway file. They gave it to me when I brought my bill forward, and it's a collection of 125 pages of communications between the city, and-- and the Chamber of Commerce, and the Department of Transportation, and elected officials, and the department--, and well, elected officials covers that pretty well. And I took a-- we made a spreadsheet of it to give the information a little bit more clarity and so that not everybody would have to read that 125 pages. I'm sure you wouldn't read it anyway. But the spreadsheet showed that of all the communication, 12 of them mentioned funding, 4 of them talked about flooding delays over the years, and then 5 of them talked about environmental delays, permitting delays. So in bringing forward my LB579, I included a loan of-- or the opportunity for the Department of Roads to use \$70 million in funds to cover the reimbursement from the federal government for some of the flooding damages that have not been yet reimbursed, because the last two times I talked to the acting director and public affairs chief at the Department of Roads, they mentioned that funding was a factor. So then, when we got to the hearing, the Department of Roads came to the hearing and they opposed my bill and said that, well, it wasn't really funding. It's more permitting and being able to find willing contractors, and they had other reasons. But if you look through that spreadsheet of all the communications between Chamber of Commerce officials, former mayors of Columbus, Nebraska, and myself included-- there are a couple others here-- it's pretty hard to see a consistent story. The-- the activities and progress was two steps forward, one step back, sometimes one step forward and two steps back. No reasonable person could conclude-- could conclude that this data is consistent. One of the main causes of information-- disinformation are the turnover of elected and appointed officials. During the last 30 years, we've had 5

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different governors, 5 different senators representing my district, and 9 Department of Transportation directors, include-- including the one that we have yet to approve the nomination of, but that'll be number 9. Term limits dictate the change of an elected officials, and we can't do anything about that. But LB579 addresses the inconsistent message received from the Department of Transportation. The most significant part of the bill requires that the annual report from the Department of Transportation to the Transportation and Telecommunications Committee have a specific format that makes it easier to track progress on the expressway. In its current form, it also makes \$70 million available to the Department of Transportation to cover damages that were repaired but not yet reimbursed by the federal government. However, with AM1377, I'm removing this portion of the bill, which we'll talk about later. So all that will be left is just the reporting part. The benefits of completing the Nebraska Expressway System are: safety and convenience to all citizens in Nebraska; economic development, since cities with four-lane access grow faster. There was an article in the World-Herald probably seven or eight years ago that talked about growth in counties in Nebraska, and which counties showed growth and which didn't. And the ones who were green and showed growth were on the interstate system, plus just a few other counties-- and Madison County and Platte County were showing some growth, so they were green, even though they were not yet on four-lane access. The benefit of LB579 is a consistent report to the Transportation and Telecommunications Committee so that we and future elected officials can track our progress toward the completion of the Nebraska Expressway System. We want to attempt to expedite the completion of the expressway, and you can't fix what you can't measure. So I'm asking you to vote today to advance LB579 so we can work together to finish the Nebraska Expressway System.

HILGERS: Thank you, Senator--

MOSER: How much more time do I have?

HILGERS: You have 3:40.

MOSER: Well, we might as well give a few more people time to get here. I'll continue on with a little bit more information. This handout I gave you, the one with now state-- U.S. Senator Deb Fischer on the cover, it's a great picture of her, for one thing, but it was taken at a ribbon cutting for one of the first construction sections of Highway 30 east of Schuyler, and this sign was up along the highway, indicating that this addition to the highway was made possible by the Build Nebraska Act. And Senator Fischer, then a state senator, was instrumental in getting that LB84 moved forward. There's just a cover

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sheet from the LB84. And you'll see that our current Senator Pahls was a cosponsor of that bill. So we want to offer our thanks to Senator Fischer and Senator Pahls, who is here with us today. OK, then when you look in the handout-- I'll just go through some of this-- the first-- next three, four or five pages are the spreadsheet that explains the communication, just so you can get an idea of what kind of interaction we were having with the Department of Transportation. Page 8 shows you the five governors: Kay Orr, Ben Nelson, Mike Johanns, Dave Heineman, Pete Ricketts-- Governor Ricketts is currently Governor. The senators were: Lee Rupp, Jennie Robak, Arnie Stuthman, Paul Schumacher, and then myself, currently. The Department of Transportation directors are even more numerous: Gerold Strobel, Walt Teten, Allan Abbott, John Craig, Monty Fredrickson, Randall Peters, Kyle Schneweis, Moe Jamshidi is the interim director, and soon John Selmer will be the new director. Then there's communications, so you can get an idea of the kind of information that I was getting from the Department of Transportation while we talked about it. And if you look back at the reports that the department-- that the Transportation Committee got from DOT, it's tough to plot out progress and whether the-- the previous estimates are being followed or whether we're getting farther behind or we're getting ahead. And so this bill would ask that the--

HILGERS: One minute.

MOSER: Department of Transportation come up with a grid that shows pretty explicitly where we're at and how we're doing. So with that, I'll conclude my remarks, and then I'd be glad to answer any questions, if you have any. And then I've got an amendment or two.

HILGERS: Thank you, Senator Moser. Mr. Clerk for an amendment.

ASSISTANT CLERK: Excuse me [INAUDIBLE]. Senator Moser, you had AM862 and AM124, with notes to withdraw those?

MOSER: AM862, I would like to withdraw.

ASSISTANT CLERK: And also AM124?

MOSER: AM124, I'd like to withdraw.

ASSISTANT CLERK: Yes. And then you would offer AM1377.

HILGERS: Senator Moser, you are recognized to open on AM1377.

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MOSER: OK. The amendment, AM1377, takes out the funding portion of my bill so there's no question of what it's going to cost. It's not going to cost the state any General Fund dollars. There may be just a little extra work on the part of the Department of Transportation to give us the report that I'm asking for. And there was a mistake in the drafting of the bill, not by the drafters, but myself. I inadvertently called the Nebraska Expressway the Heartland Expressway, and it turns out the Heartland Expressway is in western Nebraska, and it's only a small part of the total road system in Nebraska. And I should have used the Nebraska Expressway System. So this amendment changes that misnomer, and it removes the funding part of it.

HILGERS: Thank you, Senator Moser. Debate is now open on AM1377. Senator Flood, you are recognized.

FLOOD: Thank you, Mr. President. Members, good evening. Forty years ago, in a galaxy far away, a former Governor named Kay Orr, a visionary in her own right, brought forward a plan to connect cities of 15,000 or greater by four-lane highway. That plan at the time-- you might find this interesting-- the director of the Nebraska Department of Roads was Jerry Strobel. You might recognize that last name, because that is Senator Deb Fischer's father. He and Governor Orr and the Legislature made a commitment to towns with 15,000 or more people to build these two-lane divided highways. And construction began between Grand Island and Hastings-- I should say four-lane divided highways-- from Highway 81 at York down to the Kansas border, through Senator Brandt's district, a road built long ago and probably taken for granted now by most of the residents of Senator Brandt's district, but it was done under the 1988 expressway plan. People in Nebraska City couldn't even dream of that because they didn't have 15,000 people at the time, and today safety warrants it. In 1955, Norfolk had an airplane flying into it every day. We had a railroad that would, with its steam engine, run up the Chicago North Western line, start in Fremont and go all the way to Chadron, and we had a two-lane road. Today, I'm embarrassed to tell you that we don't have the airplane, and they tore up the rail lines so that we could have the longest trail in North America without a single tree. And so what we've got now is a simple two-lane highway, a killing field, a place where accidents happen. We're running trucks on there. We might be making steel and powering America with Nucor Steel. But we're running all those on these two-lane roads. And Kay Orr saw that, and she said: As Governor, I-- I want that to change. And so we started to dream of the day when we'd be connected to our cities, like Omaha, Lincoln, with four-lane divided highways. And here we sit today, 2021. But I will tell you, something's happening that's good. This effort from Senator

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Moser-- and I got to give Senator Moser a lot of credit, he has really done his homework. And as you can see here, we've made notes of every single meeting we've had with Roads officials since 1988. And he's got most of those meetings chronicled in his short summary that's about, what, nine pages. Senator Moser knows, as a representative of the people of Columbus, that they, like Norfolk, wait for the day that they're connected, like so many of us here in this room take for granted every day. Going from Columbus to York shouldn't be that big of a deal, but it's a jagged two-led-- two-lane road from Columbus to York. By the way, the four-lane from Columbus to Norfolk was completed in 2000. And you know what was supposed to happen? The gas tax was supposed to gradually increase in the first part of the century, 21 years ago. And they said to us, in 2002: Don't worry, we'll get this done in just a couple of years. The Legislature--

HILGERS: One minute.

FLOOD: --lost its way in 2002, lost its way in 2005. I came down here in 2005, I worked on this for eight years. I helped pass the Build Nebraska Act. The bottom line is, I feel like, under this administration, since I've been paying attention again as a state senator, we are making progress. Senator Moser has an amendment that takes the money out, requires more reporting requirements, and we'll talk about other options coming up. But I feel like we're going somewhere. I support Senator Moser's bill. I support the amendment. And I want to really thank him and the people of Columbus for partnering with Fremont, and Norfolk, and everybody in our area of the state. This is something we care about, and we appreciate it. Thank you, Mr. President.

HILGERS: Thank you, Senator Flood. Senator Walz, you are recognized.

WALZ: Thank you, Mr. President. Good evening, colleagues. I wanted to stand in support of this bill, and thank Senator Moser for introducing it. I also want to thank him for his dedication to his district and to his constituents, to ensure safe and reliable highways. Requiring the Department of Transportation to be transparent and up front about their progress in updating our infrastructure is very important to me, and it should be very important to you. Easy-to-understand reports give us and constituents the ability to track the progress of the expressway system, and allows us to have faith in the Department of Transportation, and faith that these projects are moving steadily towards completion. As you know, my priority bill this-- this-- my priority-- my priority bill this year also deals with the ongoing construction, funding, and planning of the Nebraska Expressway System. It is important that the Department of Transportation be transparent,

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because our constituents and mayors want to know what is happening. Our mayors and our community leaders understand the correlation of economic development and reliable infrastructure, and how it is so vital to our communities' growth. Our constituents drive these unfinished highways every day, risking their lives on two-lane roads that the state has been promising to improve since 1988, when the expressway was started. And when I say risking their lives, I mean, they're risking their lives. I know too many families that have lost loved ones in my district on Highway 30 alone. Senator Moser's bill is a great step towards better government transparency and dependability. Communicating with constituents is a huge part of this job. And this report would be a simple-- a simple way for the Nebraska Department of Transportation to communicate with those who depend on them and who depend on their work. I know my constituents will value this open line of communication, and I imagine many constituents in your districts will think the same. Thank you, Senator Moser, for this bill. I encourage you to vote green. Thank you,

HILGERS: Thank you, Senator Walz. Senator Erdman, you are recognized.

ERDMAN: Thank you, Mr. Speaker. Good evening. I'm voting green on Senator Moser's amendment and his bill. I appreciate what he's done there, and his diligence-- due diligence to get it done right and figure it out. But this evening, I want to bring your attention to something that happened yesterday that I think is a miracle. The Department of Transportation actually lowered a speed limit, and I've been trying to get that done for years. And I sent them an email, explaining what needed to be done. And I also said: Surprise me that you make a correct decision. So let me give you a little background. It's in Falls City, and I got this email from a gentleman that lives there, and he said the speed limit there is 65 miles an hour. He's been asking them for years to lower the speed limit because it is actually inside their city limits. And their response was: The study shows that no reduction should be made in the speed limit; it's perfectly fine. They've had numerous accidents there, and just recently they had one because the speed limit is 65. A lady and her son pulled out in front of a truck. And I'm not sure yet what happened, if they died or not, but they were very seriously injured. And so yesterday I got an email from Mr. Moe Jamshidi, and I appreciated it. They are going to lower the speed limit to 50. So give credit where credit is due. I never dreamt that I would live long enough to see them make an adjustment, so I want to give them kudos on that. I appreciate it. And so I want to reach out to the people in Oshkosh that we've been trying to lower the speed limit, because it is in the city limits, and the 45 mile-an-hour speed limit starts one

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block before they turn to go to the school. It's a dangerous, dangerous road. It's 45, it needs to be lower than 45. We asked them to go to 40. They said no. So once they lowered it in Falls City, maybe we have some leverage to get them to lower it in Oshkosh; I hope that to be the case. So those who are listening that live in Oshkosh, take heart. We may have some good news. I'm not sure yet, but I will continue to press them to make the same decision for you as they did for Falls City. So I'm glad that the people of Falls City have an opportunity to drive safely in that community. And I do appreciate the Road Department making that correct decision. Thank you.

HILGERS: Thank you, Senator Erdman. Senator Kolterman, you are recognized.

KOLTERMAN: Thank you, Mr. President. Good afternoon-- good evening, colleagues. I rise in support of LB579 and AM1377. And I'd like to thank Senator Moser, and I know Senator Walz and Senator Flood have all worked hard on this. You know, Senator Flood gave you a little bit of the history. Highway 81 runs through my district. It also runs through Senator Brandt's, and it goes all the way to the Kansas border. Highway 81 is part of that expressway, and it was supposed to be completed years ago. Well, from north of York to south of Columbus, there's 41 miles that goes through Stromsburg and Osceola. And-- and those roads are terrible roads. It's-- but that's 42 miles that should have been completed many years ago as part of this highway Expressway System. So I think we're doing the right thing. I know Senator Walz has a bill coming up right after this one. I'd like to encourage you to vote green on-- on both of these bills, and let's get our roads fixed. It's a safety issue, it's an economic development issue, and we deserve good quality roads throughout our-- connecting our communities, whether they're rural, whether they're urban, they need-- it needs to happen. So thanks, Senator Moser, for bringing the bill.

HILGERS: Thank you, Senator Kolterman. Senator Friesen, you are recognized.

FRIESEN: Thank you, Mr. President. So I've been listening a little bit to everybody. We all have projects that have been delayed lately. We're all looking for things in each other's districts. I have Central City waiting for an overpass that they've been waiting 20 years for. But again, every time we've had our roads director come in and give us a report, we've always been told, over and over, that we have demand for-- we will always have more demand on projects than we have money. And-- and I was here in my freshman year, and I was a part of raising the gas tax. And I didn't realize what a big deal that was in the day, being an innocent freshman, so to speak. I was willing to take on

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anything. But again, our cost of our roads has been steadily going up-- inflation, wages, equipment costs-- and yet their mileage rates have been dropping. And so our gas tax collections are-- they're a cash-funded agency that's dependent on gas tax revenue, some vehicle titling revenues, some sales tax money that comes in, and federal dollars. And when you see the-- over the years, the number of regulations and the, you know, environmental impact statements, and the things they have to do sometimes, you-- you can see why the costs have gone up. And could we do better? I think we can. I think-- you know, Kyle Schneeweis was there for a few years, and I think he was setting a new direction for the Department of Transportation. He was innovative in what he did. And did we always do the right thing? No, but he got things done, and he did listen. And he was trying to change the culture of the department. I still think we have a lot of work to do. You're going to see a confirmation report for the next director of the DOT coming up. I hope you all get a chance to meet him. In my visits with him, I think he is looking forward to it. He is originally from Nebraska, and he'd like to come in here and continue on, and I think change the culture of the DOT to what Kyle was doing. And so I appreciate that fact. But again, we have to remember, if we, looking forward, don't-- don't provide the revenue to get these roads done-- and you got to look at the flooding that happened and how we got through that, and what it took to get that done in that short amount of time. And now, I mean, we do have people thinking that we can suddenly build a road in six months, and that is not reality. But they have a long-term, set-out plan, where they do the engineering, the right-of-way acquisition, the environmental impact studies. And when things don't always go right, they have to redo some of those studies. So timing is important, and we're trying to work through those. And I know they do a lot of long-range planning, based upon what they project the revenues will be. But recently they saw like a 20 percent increase over their estimate on their bids for projects, and that really throws things back quite a bit. So I do think there's room for improvement. I do like the idea of Senator Moser in asking for some different style reports that you don't have to have three or four reports land in front of you to see the continuity in their projects, and how they are moving forward, and what they've gotten done, and what they have yet to do. And I know some projects this year-- in this last year really did jump ahead of schedule because of some federal grants. Usually we did not-- we're not the recipients of those grants. And so it-- it did move some projects to the front, which required some state investment, and that also set some projects back.

HILGERS: One minute.

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FRIESEN: So we have to take advantage of those when we can take them. And they do a lot of exchanging of federal dollars with state dollars and cities. The Department of Transportation typically takes the money that cities and counties have, and they-- I think they pay them 90 cents on the dollar, if I'm correct, to take those funds, because they come with a lot more federal regulations than state money. So cities and counties are able to build their roads cheaper than what the state roads are built at. But we have the capability of doing those federal-- meeting those federal standards. Thank you, Mr. President.

HILGERS: Thank you, Senator Friesen. Senator Aguilar, you are recognized.

AGUILAR: Thank you, Mr. President and members. I also want to thank Senator Moser for his efforts on this, and I'd like to ask him a question or two if he'd yield.

HILGERS: Senator Moser, would you yield?

MOSER: Yes, I will.

AGUILAR: Senator Moser, I was wondering-- thank you-- I was wondering if you're aware whether or not, there's a four-lane project on Highway 30, going into Grand Island. It was started and just never finished. Is this part of the overall project you're referring to in this report?

MOSER: Well, to be truthful, I don't know if that's part of the Expressway System, but that would be part of the report that I'm asking for, is what projects are on the bulletin board at the Department of Transportation so that we, as senators, can know as much as what's going on as they do. I think there are a lot of state agencies that kind of take the initiative to do what they think they should be doing. And sometimes they don't communicate with us-- sometimes. Well, in fact, the Department of Transportation appeared at the hearing in opposition to my bill because they don't want anybody telling them what to do. And I--

AGUILAR: Thank you. I've heard about that opposition, as well. I really do appreciate what you're doing, because I-- I've had constituents come to me, even before I come down here at the first of the year, and bring that up and say: When you get down there, see what you can find out. What's going on with the Highway 30 project? Seems to be going nowhere. We need-- colleagues, we need to get this train back on the track. You can see it's affected a very large part of Nebraska, and nobody's getting the same information. Hopefully what

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Senator Moser has to offer can at least help that. And I'd yield the rest of my time to Senator Moser, if he chooses.

WILLIAMS: Senator Moser, you're yielded 3:00.

MOSEER: I think, at this moment. I may waive that, and let some others speak. I think you've heard quite a bit of what my opinion is. I'd like to hear what some of the other senators have to say. Thank you.

WILLIAMS: Thank you, Senator Aguilar and Senator Moser. Senator Moser, you are next in the queue. You could waive that opportunity. He waives his opportunity. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Mr. President. I'd like to draw your attention to page 2 in the handout Senator Moser gave out. December-- at the very top, December 2000, Transportation Committee minutes. Senator Bromm notes-- Senator Bromm is from my-- is-- was a senator from my district-- says: Interstate system is on schedule, but Highway 81 and Highway 30 expressways have fallen behind schedule-- December 2000. Now let's go to page 10, December 3, 2020, 20 years later. My comments is: So we've got a road going to nowhere, because that's what I call Highway 30, where it ends right now; it's a road to nowhere. And what I'm hearing from Schuyler, from the economic development-- development folks and the chamber and that, is that there's no funding, and the rest of the road is not going to be built. They don't know when. And can you give me an update on that? And that was to the deputy director of Transportation-- Moe at the time. And his response kind of comes back to-- on the page 11, you can see it says: We're going to have to do a little bit of sharpening our pencil and see what we can do-- and it goes through there, and he says: Hopefully, we'll get that done this February and hope, depending on how well we can get that \$70 million to \$80 million in reimbursements that we have coming from the feds-- coming to us from the feds. And that's what Senator Friesen was talking about a little bit ago. But 20 years-- 22 years-- 22 years this project's been on the books. And I think that's pretty unacceptable. And I appreciate what Senator Moser is doing. And I do support his AM and his LB. I have one point I want to make. I have another bill in Transportation and Telecommunications Committee that's not coming out right now or others: LB339. And what LB339 deals with this is marking of utilities precontract. And my point is with this-- with that bill-- is project management. And we had-- we have a number of project management examples from a number of states that show you can do this already. But what I heard from the hearing that we had was: Oh, we can't do that, it's too expensive. We won't do that, it's too expensive. Maybe our problem is-- is project management. We really don't manage our-- our projects properly or accurately the way we need

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to. It seems like other states can, but we don't-- 22 years. And-- and like what others have said-- Senator Walz or others have said-- on Highway 30, people are dying. There are horrific crashes on that highway. When I talk to the volunteer fire department in Schuyler, they tell me of the horrible crashes that have happened there. From North Bend to Fremont now is two-lane. My son drives that road in to Omaha when he goes to work every day. I drive that road. I've been on that road. The amount of traffic is significant. I will say they have started dirt-- doing dirt work this year already in April, and they are looking to let the rest of the contract before long. I hope they stay on that. They need to stay on that. That road needs to get done. We're losing far too many lives-- far too many people on that road. It needs to happen. I urge your green vote on the AM and LB579. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Bostelman. Senator Stinner, you're recognized.

STINNER: Thank you, Mr. President. Members of the Legislature, I promise to do this really quickly. I do support the bill, the underlying bill, along with the amendment. We need some more reporting. We've got to stay on top of these expressways. And this is a way, a mechanism to do precisely that. My number one priority when I came to the Legislature was to see that the Heartland Expressway, which goes through Scottsbluff-- certainly Senator Erdman's and Senator Brewer's district, as well-- to Chadron. It's a north-south roadway. It's part of that expressway complex. There's about four or five different expressways that take-- this Heartland Expressway goes from Canada all the way down to a port in Mexico. And if you can understand that this could be a major-- a major thoroughfare, a major economic development piece of western Nebraska. But I want to talk a little bit about the Infrastructure Bank that we set up. And it's part of the Transportation Innovation Act that we passed in 2006. It had a gas tax attached to it that-- that gradually went up to 6 cents-- 2 cents would go into the Infrastructure Bank. We did start the Infrastructure Bank with about \$50 million. That \$50 million has stayed predominantly in place and is now starting to be employed in the expressway project. So I'm hoping that more and more dollars will come out of the Infrastructure Bank, going into the Infrastructure Bank, and help this process along. So I would urge, again, a green vote on both the underlying bill and the amendment. And thank you.

WILLIAMS: Thank you, Senator Stinner. Senator Clements, you're recognized.

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CLEMENTS: Thank you, Mr. President. I just wanted to rise and say that on the committee statement, I was no on the committee vote, but AM1377 removes my objections. The \$70 million funding part of it was my-- what I objected to. So I support AM1377 and LB579. Please vote green. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Clements. Senator Matt Hansen, you're recognized.

M. HANSEN: Thank you, Mr. President. And good evening, colleagues. I rise in support of this bill. I won't belabor the point, but Senator Bostelman noted-- mentioned where my in-laws live, off of Highway 30 between North Bend and Fremont. And this is the one bill they've actively-- or the one issue they've actively lobbied me on, getting that widened and safe. So I would have to rise and make sure that-- sure they're watching and listening, and let them know I've heard them and I'll be supporting this bill. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Matt Hansen. Seeing no one in the queue, Senator Moser, you're recognized to close on AM1377.

MOSER: Thank you, Mr. President. Well, I ask your support for AM1377. It removes the mention of the \$70 million loan. It turns out, in the four months or so since we started to talk about this, that the reimbursement for about half of that has come in. So the amount would be around \$35 million, somewhere in that vicinity. And the Department of Roads has said that they didn't think that was significant to help move things along. And you can take a horse to water, but you can't make them drink, so to speak. And so in order to expedite the move of the bill along, I'm just going to take out the mention of the loan. And I appreciate your support on AM1377. Thank you.

WILLIAMS: Thank you. Senator Moser. Members, the question is: Shall the amendment to LB579 be adopted? All those in favor vote aye; those opposed vote nay. Have all voted that wish to? Record, Mr. Clerk.

ASSISTANT CLERK: 43 ayes, 0 nays on the adoption of the amendment.

WILLIAMS: The amendment is adopted. Returning debate-- to debate on LB579. See no one in the queue, Senator Moser, you're recognized to close on your bill.

MOSER: Thank you, Mr. President. On page 14 of the handout, you see a Google Earth map. That shows the city of North Bend, and the four-lane that's currently being built stops right now in a field just north of North Bend. They have a current contract to do dirt work from there

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toward the east. And then they're hoping to follow-- the Department of Transportation is hoping to follow that with a paving contract this summer or early fall. This road, as it is, was built many years ago. It has some real tight radiuses, and it's very narrow. There are not sufficient not-- there's not sufficient paving along the edge. You can't drive off the road very easily without winding up in a muddy mess. And just one quick story on safety. We've had people seriously injured on this stretch of Highway 30, and I'm talking about this, but I'm-- I'm-- the bill covers the whole system. I'm just talking about the most painful part of it for people in my district, and Senator Bostelman's district and Senator Walz's district. But we've had people from all walks of life get hurt, injured, killed. We had a father and son that stopped somewhere along the road for some minor mechanical problem. And somebody plowed into him and one or the other or both were killed. We had one of the most successful industrialists in my district that was involved in the invention and management of Lindsay Manufacturing, where they make center pivot sprinklers. And these innovators, entrepreneurs that started the company, were selling it to a bigger company to get better financing. And they-- one of the key principles, one of the brothers in the family that were involved, had gone to sign the paperwork and collect the check for I don't know how many million. And so I'm sure he was just at the height of his excitement about the success of his business and how it was going to move forward. And then on the way back from Omaha on this stretch of the road, he was killed. So I think safety is a factor, convenience is a factor, economic development is a factor. I'm hoping that senators will support this, and so that we can help keep track of where we're going as we go forward on the Expressway System. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Moser. Members, the question is the advancement of LB579 to E&R Initial. All those in favor vote aye; those opposed vote nay. Have all voted that wish? Record, Mr. Clerk.

ASSISTANT CLERK: 44 ayes, 0 nays on the motion to advance the bill.

WILLIAMS: The bill advances. Mr. Clerk for items.

ASSISTANT CLERK: Thank you, Mr. President. Amendments to be printed: Senator Linehan to LB64. In addition, your Committee on Enrollment and Review reports LB147A, LB432A, and LB529A all to Select File. That's all I have at this time.

WILLIAMS: Thank you, Mr. Clerk. Returning to Senator priority bills, General File, LB542.

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ASSISTANT CLERK: LB542, introduced by Senator Walz. It's a bill for an act relating to highways: to authorize issuance of highway bonds under the Nebraska Highway Bond Act; change provisions of the Build Nebraska Act; harmonize provisions; repeal the original sections; declare an emergency. The bill was introduced on January 19, referred to the Revenue Committee. That committee placed the bill on General File with committee amendments.

WILLIAMS: Thank you, Mr. Clerk, Senator Walz, you're recognized to open on LB542.

WALZ: Thank you, Mr. President, and good evening, colleagues. I am excited today to introduce LB542, my priority bill this session that would authorize the issuance of highway construction bonds. I'd like to thank Senator Flood and Senator Moser for their hard work and their collaboration on this bill. This bill would allow the state to expedite expressway construction by giving the Department of Transportation the option-- and I'm going to repeat-- the option to use bonds in order to bring Nebraska's infrastructure into this century, and ensure the safety, accessibility, and efficiency of our highways for all citizens. With this amendment-- with the amendment, these bonds would not exceed \$450 million over the next six years. They would be paid back by 2040, with conservative debt limit-- service limits and fixed interest rates not to exceed 5 percent. The bonds would be repaid out of the State Highway Capital Improvement Fund, which consists of the state's share of the quarter cent of sales tax that was established through LB84, the Build Nebraska Act. In accordance with the state Constitution, LB542, requires a three-fifths vote of the Legislature, and the money has to be a state revenue fund, closely related to the use of highways and completely separate from the General Fund. With LB542, bonding would be an option for the Department of Transportation to potentially be used for specific projects already identified under the Build Nebraska Act. One of these projects is the long overdue Expressway System. With the amendment, 75 percent of these funds would be committed specifically to finishing these expressways. I don't have to remind you of all the highway projects that are waiting for completion, but I think the timeline of the Expressway System needs to be considered. The plan for the Expressway System was approved by the Legislature in 1988, as Senator Moser said. It consisted of 16 corridors connecting major cities to rural populations, with over 600 miles of road. Thirty years later-- thirty years later, one-third of that project is still unfinished-- 45 years. The initial projected cost of the Expressway System was about \$200 million. Now just to complete-- just to complete the remaining 161 miles, it will cost an upward of \$1 billion dollars, according--

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that was according to the 2020 State Highway Needs Assessment done by the Department of Transportation. Two-lane highways in my district, Senator Flood's district, Senator Moser's district, and so many others remain unfinished, unsafe, and unfit for a drive through a state like ours. The irresponsible-- irresponsibility of the state over the last 30 years is twofold when it comes to leaving this project unfinished. Fiscally, we let the project's costs increase exponentially because of rising inflation and construction prices. We lose taxpayer money this way, and we'll continue to do so if we do not have the ability to implement alternative financing. Safetywise, the accident rates on these stretches of roads are staggering, and a huge concern for me and my district. I do not think anyone would disagree that the expressway needs to be finished. From where I stand, it seems incredibly financially irresponsible to wait any longer on this 3-year-- 30-year old plan, because, at the end of the day, this is about how much our taxpayers are going to have to pay for services not only promised, but required by the government. I know that historically we have been a pay-as-you-go state, but let this project be an example as to why this approach is no longer able to serve the state, our constituents, and their needs. Bonding is not a new concept. We bond on the local level, on a regular basis, to complete projects that otherwise would remain unobtainable and unfinished. By bonding, we are able to leverage historically low interest rates, and stop the buck, in terms of compounding cost. Our future economic growth and revenue depend on what we are willing to invest in our infrastructure now, and ultimately what our constituents deserve, which is safe roads. Passing LB542 would mean accelerated projects, less time with orange cones on the road, and a full stop on the accumulation of inflated construction costs that are already burning a hole in our pockets. Additionally, the revenue promised to these bonds would ensure that the General Fund remains untouched, and the 15 percent of the Build Nebraska Act that goes to cities and counties would also not be affected by this bill. We all know that the future of our state depends on infrastructure. We have been very proud to pay for these projects with a pay-as-you-go mindset, but that is no longer working. The 2019 State Highway Needs Assessment, compiled-- the Department of Roads has quantified our next 20 years needs to be at \$12 billion. To have good infrastructure, we need to fund it. To be on track and not further --fall further behind than we already are, other options need to be considered. And again, bonding is not a new concept. Again, we bond at the local levels on a regular basis. Over 40 states across our nation use bonding for roads. LB542, will allow us to wisely invest in our infrastructure and strengthen our future. This bill was supported by several mayors and Nebraska stakeholders, who have the pleasure-- who we had the pleasure of speaking to throughout this process. We also met the Department of

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Transportation and the Governor about other funding options, going forward, and the future of our Nebraska infrastructure. Those conversations have sparked an agreement between us and the Governor, and we have a commitment from him that he will come to our communities and districts, and explain the project's timeline and cost, allowing our communities, and our constituents, and our leaders to have a better understanding of the progress that is being made. Senators Flood, Moser, and I look forward to continuing our work with the Department of Transportation and the Governor's office to make this bill the best it can be for our constituents. Thank you to Speaker Hilgers for agreeing to put this on the agenda next year so that we can iron out any disagreements over the interim. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Walz. As the Clerk stated, there are amendments from the Revenue Committee. Senator Linehan, as Chair of the committee, you are recognized to open on the committee amendments.

LINEHAN: Thank you, Mr. President. Senator Walz has provided the overview of LB542. AM401 is the committee amendment. AM401 was amended into LB542 by an 8-0 vote. The committee amendment becomes the bill. LB542 was amended-- as amended, was advanced to General File on a 7-0 vote. AM401 will increase the amount of bonds that may be issued from \$400 million in principal to \$450 million in principal. Proceeds from the issuance of the bonds shall be deposited in the State Highway Capital Improvement Fund rather than the Highway Cash Fund. The amendment clarifies that the money credited to the State Highway Capital Improvement Fund is to be first used for repayment of bonds. If money remains in the State Highway Capital Improvement Fund, then it is to be used according to current law. 75 percent of the proceeds from the sale of bonds that are credited to the State Highway Capital Improvement Fund are to be used first for the Expressway System and federally-designated high priority corridors. The remaining proceeds are to be used for surface transportation projects, as determined by the Department of Transportation. AM401 continues to have an emergency clause. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Linehan. Debate is now open. Senator Flood, you're recognized.

FLOOD: Thank you, Mr. President. Members, I think it's important to note that Senator Moser's priority bill introduced and dealt with roads and, specifically, expressway systems. Senator Wills-- Walz's priority bill deals with bonding as it relates to the Expressway System. We have been, and continue to be, about seeing this promise finished. And one of the things that's most frustrating about being a

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state senator is that, under the separation of powers, we don't get to pick the roads per se. We don't get to decide who the contractors are, and we certainly don't get to order the priority; that is an executive branch function. I suppose we could do something with a bill somehow, but we've avoided that. What I think is important for you to know is that we look down the road, and we see the looming inflation. We see more and more projects that require the state's attention, projects that have a higher traffic count than us, in cities that are populated more than us. And choices are made every single day. And one of the reasons that we have brought this forward and Senator Walz has been steadfast in her support for bonding, is that it addresses that inflation issue by tapping down, taking advantage of the prices as we have them now and then spreading that cost over so many years. But one of the things that we have learned in the last 90 days is that the executive branch is taking steps to actively finish this contract. Last Friday, members, the Nebraska Department of Transportation accepted a bid from a Kansas company to complete the Scribner to West Point stretch of Highway 275, four-lane divided highway from south or east of Scribner, all the way, well, to West Point, and then four-lane divided from West Point, five miles west. That's the most progress we have seen on this stretch of highway in ten years. And for that, we have to ask ourselves: Do we want to be right or do we want to be successful? And Senator Walz, Senator Moser, and myself, and Senator Kolterman, who has tried to be part of our club-- and we have resisted it almost at every corner-- he wants the York to Columbus leg done, which we do, too. And we want York to be a part of this. We feel like we have something here that's started. We feel like we have-- we have a contract right now that the Department of Transportation has issued for, I think, some of the grading and the gravel on Highway 30, as it proceeds from Schuyler to Fremont. We are going to place this, with Senator Walz's consent and the Speaker's consent, on General File next fall or next winter and take this up. But members, this is something that we're telling you as three individual senators, 2 of the 49 priority bills, deal directly with the Expressway System. Senator Moser was steadfast; he hasn't blinked. Senator Walz knew it was the right thing. And we have to really thank Senator Walz because, at the end of the day, she is connected to Omaha. We want to be connected to Fremont. And she's chosen this. Obviously, it helps in northern Dodge County. It helps in Cuming County, it helps in Stanton County, it helps in Madison County. I'd love to be able to walk away from session next year and say: I see progress, York to Columbus, Fremont to Omaha-- well it's Fremont to Columbus-- and Omaha to Norfolk. If we could do that, there are so many other places in this state that need the next generation of the 1988 expressway plan. And I think down the

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line, Nebraska is going to have to make a choice as to how we're going to take advantage of that. And bonding is one of the options--

WILLIAMS: One minute.

FLOOD: --that we have stated has a lot of merit. It has a lot of value as-- as you look at inflation. Now people can easily look at it and disagree. But I'm pleased to report that we are making progress on our road system. And if you're going to complain, you got to make sure you tell people when things are going good for you. And I think right now we're seeing the kind of progress that we could have only hoped for a year ago. And I think that's in part thanks to Senator Walz and Senator Moser's priority. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Flood. Senator Moser, you're recognized.

MOSER: I do appreciate the support of Senator Flood, Senator Walz, and Senator Kolterman on completing the Expressway System. One part of the appeal of bonding is the-- that the construction costs have gone up a lot faster than what the interest rates have been. Since 2003 to 2019, concrete construction costs, according to the Federal Highway Administration report-- it's on page 12 in the handout that I gave for my bill. In that time, they've doubled, and that's 13 years, and the cost of bond interest was hovering around one percent on bonds that the state could qualify for. They're probably going to be higher now because interest rates are on their way up a little bit. But you could do the same amount of work for a lot less money without actually having to spend more money. There's nothing in this bill that says we need to increase spending, although I think we need to do a review of what our revenue is going to be to get our roads built up the way we'd like them. But this particular bill does not increase funding. It just allows you to spend it in amounts that are more economical, maybe in a little bit bigger sections. And the cost of inflation is, well, twice, so that's 100 percent, so it's like five times or six times faster than the cost of the bond interest. I understand that there are some in the administration who don't want to see the Legislature get into bonding because they're worried about it being a slippery slope, and that the Legislature may bond for things that are unwise. I really felt like this was a wise reason to bond, but Senator Walz is willing to defer this discussion until our next half of the session. And we can talk about it more at that point. But I appreciate her bringing it forward and being so forceful and passionate about roads, and especially those through her district. Thank you.

WILLIAMS: Thank you, Senator Moser. Speaker Hilgers, you're recognized.

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HILGERS: Thank-- thank you, Mr. President. Good evening, colleagues. I just want to say a couple-- couple brief words here first. I appreciate the leadership Senator Walz has shown on this particular bill, working with Senator Moser, Senator Flood. I know they've had a lot of conversations, really going towards what I think is one of the-- a big idea that it's worth for us driving towards, which is improving, as rapidly as possible, our transportation infrastructure throughout the state. It is critical to our growth as a state, to retaining families and attracting capital, creating companies, growing our communities. It's-- it's true for Omaha. It's true for Lincoln. But it is especially true outside of the state. So as we look at big swings towards next year, I just want to say that I'm grateful for their leadership in pushing these issues forward in front of the body. Secondly, I've had a couple of people ask me: Well, is this going to be-- is this bill pulled or what's going to happen? I want to be really clear. This-- this bill is not being pulled; it's going to be parked. We're going to park it. It's going to retain its priority status going into next year, in January. This has been prioritized. This bill will remain prioritized. It will continue to have its priority going into January. In the interim, a couple of big things are going to happen. One is we're about to get hundreds of millions of dollars from the federal government as part of the ARP funds. And secondly, the federal government is also considering a potential infrastructure bill that may have a significant roads funding component. And so it makes a lot of sense to me to say: Let's wait until January, let's see what happens in the intervening months, let's see the-- the work that the Department of Transportation has done and can do in that time. And let's see where we are in January. This will remain an opportunity for Senator Walz to bring right before the body, just as it is in General File, at the beginning of next year when we have some more information. So I just want to be clear and put it on the record this-- this evening about what's going to happen with this bill. It's not going to go away. It's going to remain there with its priority, going into January. With that, I will yield whatever time I have left to Senator Walz. And when she is complete with her closing this evening, if we could then move on to the next bill. Thank you, Mr. President.

WILLIAMS: Thank you, Speaker Hilgers. Senator Walz, you're yielded
3:00.

WALZ: Thank you, Mr. President. This is definitely a conversation that we needed to have in the past and that we continue to have to have in the future. I want to reiterate something that I think is most important, the most important part of this conversation. The

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Legislature has the responsibility to be good stewards of citizens' money, not only by not spending at the wrong time, but by spending money at the right time. I don't think we've been very good stewards of our taxpayers' money by pushing off an expressway for over 30 years. It's time that we finish this in a timely manner. I would like to thank Senators Flood, Moser, and Kolterman for joining me in this fight, and for believing in this bill, and in bonding as an option for the Department of Transportation to bring this state into this-- into this century. I look forward to working with them and the Governor's Office throughout the interim and the next session when LB542 will be heard again. Thank you.

WILLIAMS: Thank you, Senator Walz. LB542, will be passed over. Any items, Mr. Clerk?

ASSISTANT CLERK: Just one item, Mr President: amendment to be printed from Senator Murman to LB529.

WILLIAMS: Thank you, Mr. Clerk. Returning to the agenda, LB236.

ASSISTANT CLERK: LB236, offered by Senator Brewer. It's a bill for an act relating to counties: to authorize the carrying of concealed weapons as prescribed; to harmonize provisions; and to repeal the original sections. The bill was introduced on January 11. It was referred to the Government, Military and Veterans Affairs Committee. That committee placed the bill on General File with committee amendments attached.

WILLIAMS: Thank you, Mr. Clerk. Senator Brewer, you're recognized to open on LB236.

BREWER: Thank you, Mr. President. Good evening, fellow senators. I'm going to try and do a little bit of history here so you can understand how we got to LB236 in the first place. In my freshman year as a senator, I introduced the constitutional carry bill. It got a late hearing in the Judiciary Committee-- surprise, surprise-- and then it went nowhere. It was a bill that had been pushed from the district up, because there were a number that were concerned, because the cost to do the concealed carry and the fact that some of the counties-- they didn't need to leave the county. So they wanted a way that they could have the ability-- concealed carry-- and not have to go through the state process of the State Patrol concealed carry. That same year, we had a debate on Senator Hilgers' LB68, the preemption bill. This seemed like a good idea. It would give us consistency across the state. But that bill also died. The biggest reason that people didn't vote for Senator Hilgers' bill, was they said it needed to be local

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control. And I don't think any of us have a problem with that. As a matter of fact, I think it's a great idea. But the problem we have is how that ended up shaping the bill. And that's what we're going to discuss now. Different communities have different needs, local controls. One-size-fit-all doesn't work. And that was the idea when we got to looking at LB236, is you wanted each county to have the ability to control their own fate when it comes to concealed carry. We currently have the ability in Nebraska to have open carry, but in many places that is not acceptable. So concealed carry was an option for many that had the resources. But for some, that \$200-plus was just a bridge too far. So their choice was to have nothing or to illegally carry. This bill is about providing counties the power to authorize permitless carry in the county-- again, in the county for that county. There have been some that have expressed to me concerns that the bill might not be constitutional, and I hope everybody understands that I take it very serious, the oath to protect and defend the Constitution. With that said, we put a request in to the Attorney General for an Opinion. Well, careful what you ask for. The Attorney General believes that giving counties this power would be unconstitutional. He explains that this could be an illegal delegation by the Unicameral, so I don't know that I agree with him, but we respect his decision and we make the best of it. The AG-- AG's Opinion explained two possible ways to fix the bill. One would be to put guardrails on how the county has the power and how it's exercised. The other would be to make it a statewide constitutional carry-- keep in mind, that's what I tried to do my freshman year. I have amendments, too, on this bill and I'll be explaining the proposed fix for LB236 my next time on the mike. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Brewer. As the Clerk stated, there are amendments from the Government Committee. Senator Brewer, as Chair of the Government Committee, you are recognized to open on your amendments.

BREWER: Thank you, Mr. President. All right. LB236-- at a public hearing on February 24, it came out of the Government Committee, 5-3 vote on AM438. The amendment deals with a few things that needed addressed, like: required procedure for passing a county permitless carry ordinance; creating a duty to inform the law enforcement officer when you're carrying, so this would mirror that of the actual concealed carry permit; and limiting the counties that could pass this ordinance. That ultimately was the stickler because what we had was 90 of 93 counties. Douglas, Sarpy, and Lancaster would have been excluded from this. My AM1388 white copy is a committee amendment, so I will explain that on my next time at the mike. Thank you, Mr. President.

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WILLIAMS: Thank you, Senator Brewer. Mr. Clerk, there is an amendment to the committee amendment.

ASSISTANT CLERK: Mr. President, there are. The first amendment from Senator Brewer is AM874, but I have a note he wishes to withdraw that one.

BREWER: Say again?

ASSISTANT CLERK: That-- Senator Brewer?

WILLIAMS: Is the Senator on?

ASSISTANT CLERK: Yes. Senator Brewer would then offer AM1388.

WILLIAMS: Senator Brewer, you're recognized to open on AM1388.

BREWER: Thank you again, Mr. President. OK, I mentioned earlier the Attorney General suggested two ways to cure the constitutional problem with LB236: put on the guardrails, make it a statewide constitutional carry. I spent a lot of time working on this bill to get it to General File. I had 20-plus co-sponsors. We had 33 votes for cloture. The problem is we would have had to have a bill different than what people agreed to. And I think that that's not fair to them. The bill would have had to have been reshaped almost overnight because of the timing of the guidance from-- or the decision by the Attorney General. So because of that, we were forced to look at other options. This amendment replaces the original bill with changes from three other bills that affect your right to keep and bear arms. Those three bills are LB85, LB244, and LB173. The first two bills are truly very basic, simple bills that are needed. The first one is Senator Bostelman's LB85, which would provide a postcard reminder to a concealed carry handgun-- handgun permit holder four months prior to its expiration. The other, Senator Clement's LB244, would then also provide a 30-day grace period after the permit expires. This last year we had a number of permits that expired, partly because of COVID, partly because it's a five-year cycle on this permit. Five years, you can get-- you can lose track of things fairly easily. And I don't think we ought to be playing "gotcha" with people's rights. Providing a 30-day grace period simply makes sense. And understand that, if you're-- if you're getting the permit originally, you're going to pay \$200-plus by the time you pay for the training and the \$100 for the permit. If you're just doing a renewal of an application, it is only \$50. These are modest changes, and they help those that are handgun permit holders. Finally, the last one is Senator Ben Hansen's LB173, which would amend our criminal statute on concealed weapons. There was

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a case decided in late 2016, by the Supreme Court-- State v. Senn. The Court Opinion made the waters very muddy in understanding what it means to carry a concealed weapon in Nebraska. Under the Court's decision, people who are transporting a cased, unloaded weapon or firearm would be convicted of carrying a concealed weapon illegally. This obviously is a problem. It's a problem for people walking out of the gun store with their brand new gun in the factory box; it is still a concealed weapon. It's a problem for people making the trip to the gun range to take the class to get their concealed carry permit. So essentially, transporting that weapon in a case, unloaded, to either move it from the store to your home of record or to use that to go through your training would cause you to be charged with carrying a concealed weapon. Normally, activities should not be criminalized when it is simply an activity associated with what you need to do in order to purchase or follow the law. Our criminal laws should not allow the government to pick and choose who's going to go to jail. Essentially, this is it, because you can literally pick whoever you want as they purchase or go to training. Our law is probably unconstitutional. And the-- the language in LB173 cures that problem, and it makes it clear that an unloaded firearm in a case is not-- is not a concealed weapon. It would also say that an unloaded gun in a factory box is not a concealed weapon. Let me be clear. Open carry is legal in the state of Nebraska, but not in Omaha. The change is not about changing gun laws. It's simply clarifying this one law that has to do with moving the weapon from your place of purchase or to the range. The change is not about people carrying guns any new places. This is a very specific requirement. It is about allowing them to be able to move their weapon-- unloaded-- safely from a-- either a business or to a range without being charged. It also allows people to secure their guns instead of them being forced to have them in the open. You don't have to be pro- or anti-gun to agree with this policy. It is only common sense. It proposes-- it promotes public safety, and it helps with general safety for those involved with the purchase or transportation of guns. I think the three bills are all worth the time and attention. I do not think these changes should be controversial. They're very logical and basic. I would like to thank Senator Clements for prior-- prioritizing this bill, and thank all of the cosponsors. I would like to ask for your green vote on AM1388 and on the base bill of LB236. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Brewer. Debate is now open. Senator DeBoer, you're recognized.

DeBOER: Thank you, Mr. President. Senator Brewer, I understand what it's like when you have a last-minute, major change to your bill. So I

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appreciate the grace with which you are handling this curve ball which you have been thrown. I sit on the Judiciary Committee, which heard the three bills, which now compose AM1388, and I support all of them. These are good bills, and I'm very grateful, especially for the clarification about transportation of guns and what kind of containers that can transport them. Senator Lowe brought a bill that was somewhat similar to that my first year, and I was working with him on it. And the-- one of the-- the questions I had for him, in the committee at the time, was about the word "intended," so if you look at page 2 of the amendment, I just wanted to clarify-- and I told Senator Brewer I was going to do this ahead of time, just so everybody knows, because sometimes the word "intended" means different things in the law. I just wanted to make sure everybody understood what it-- what it means here. So it says: For purposes of this subsection, case means a hard-sided or soft-sided box, container, or receptacle intended or designed for the primary purpose of storing or transporting a firearm or the firearm or the manufacturer's original packaging. Original packaging is very clear. Intended-- I just wanted to make sure that we're getting on the record that intended means intended by the creator of the receptacle, creator of the case, not the person who is putting their gun in it. So it's not just-- I decided that this cup, this cup is intended to hold my gun. I put my gun in it, now it's intended for that. So just for purposes of the record, it is the intent of the manufacturer of the case. Is that correct, Senator Brewer? Senator Brewer, [INAUDIBLE] a question?

WILLIAMS: Senator Brewer, would you yield?

BREWER: I would.

DeBOER: Senator Brewer, is that correct?

BREWER: That is correct. Thank you.

DeBOER: Sorry. OK, so that's all I wanted to clear up, is that the intention is the intention of the person who manufactured, designed, or created the case for those purposes. Thank you, Senator Brewer.

WILLIAMS: Thank you, Senator DeBoer and Senator Brewer. Senator Ben Hansen, you're recognized.

B. HANSEN: Thank you, Mr. President. First of all, I want to thank Senator Brewer for AM1388. I'm in favor of the bill and the underlying amendments. It does include my LB173, which we were just discussing. And not to reiterate everything he was-- Senator Brewer did a fine job of already explaining the bill. Basically, when it comes to our state

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gun laws, clarity does matter. And this is just clarifying a gray area that has largely been overlooked in statute. The simple intent of the amendment is to allow law-abiding citizens who do not have their concealed carry permit to transport their unloaded firearms in appropriate cases so they can be used properly. It makes sense. It's smart. It's intentional. So I encourage everyone to vote green on AM1388, AM432 [SIC AM438] and the underlying bill, LB236. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Hansen. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Mr. President. I would like to thank Senator Brewer, also. LB85, which is my portion of the amendment that will require the Nebraska State Patrol to send a renewal notice, through the mail or electronically, to the holder of a concealed handgun permit four months prior to the expiration of the permit. Concealed handgun permits are valid for a period of five years and, four months prior to the expiration date, individuals may renew their permit. The renewal process involves an individual submitting an application for renewal, and passing a national instant criminal background check system to assure continuing compliance with statutory requirements. Currently, all permit holders' information is entered in the Department of Motor Vehicles' system, and that is already used to send out renewal notices for driver's license. And DMV said that they could easily do this within their system, when we talked to them. So this is-- would definitely save time and resources for the State Patrol. I would ask for your green vote on AM1388 and LB236. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Bostelman. Senator Clements, you're recognized.

CLEMENTS: Thank you, Mr. President. My part of LB-- or AM1388 was LB244. I had several constituents contact me who just barely missed a few days of renewing their five-year concealed carry permit. And current statute prohibits a grace period, so they would have to pay about \$200 plus take an eight-hour class instead of just a \$50 renewal. So this part of it would give them a 30-day grace period after the expiration of the permit. And the permit is not valid during that grace period until they do get renewed. And so that was the simple part of my bill, and I ask for your green vote for AM1388 and LB236. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Clements. Senator John Cavanaugh, you're recognized.

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J. CAVANAUGH: Thank you, Mr. President. And I'm rising in support of AM1388, as well. I'll be as brief as possible. I just was noting, as Senator Brewer was going through what was in this, that the current state statute is in conflict with the Omaha city ordinance as pertains to the transport of guns. And as Senator Brewer pointed out, when it comes to guns, certainty about how you should act is important. And so this is a good bill that clarifies that issue about how folks should transport guns in the state of Nebraska. And I think it's a good step in that direction for clarity. It will help people to increase safety, so I think it's a good bill. And obviously the-- Senator Bostelman's part and Senator Clements' part, I think, are fair and reasonable parts that deserve a green vote, as well. So I encourage everyone to vote for AM1388. Thank you.

WILLIAMS: Thank you. Senator Cavanaugh. Seeing no one in the queue, Senator Brewer, you're recognized to close on AM1388. Senator Brewer waives closing. Members, the question is: Shall the amendment to the committee amendment to LB236 be adopted? All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

ASSISTANT CLERK: 44 ayes, 0 nays on the adoption of the amendment.

WILLIAMS: The amendment is adopted. Seeing no one in the queue, Senator Brewer, you're recognized to close on the committee amendment. Senator Brewer waives closing. Members, the question is: Shall the committee amendments to LB236 be adopted? All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

ASSISTANT CLERK: 45 ayes, 0 nays on the adoption of the committee amendments, as amended.

WILLIAMS: The committee amendments are adopted. Seeing no one in the queue, Senator Brewer, you're recognized to close on LB236. Senator Brewer waives closing. Members, the question is the advancement of LB236 to E&R Initial. All those in favor vote aye; those opposed vote nay. Have all voted that would like to vote? Record, Mr. Clerk.

ASSISTANT CLERK: 47 ayes, 0 nays on the advancement of the bill.

WILLIAMS: LB236 advances. Mr. Clerk, for items.

CLERK: I have nothing at this time, Mr. President.

WILLIAMS: Thank you, Mr. Clerk. Returning to Select File.

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CLERK: Mr. President, LB131 on Select File. Senator McKinney, I have Enrollment and Review amendments, first of all.

WILLIAMS: Mr. McKinney for amendment.

McKINNEY: Mr. President, I move that the E&R amendments to LB131 be adopted.

WILLIAMS: Members, you've heard the amendment. All those in favor say aye. Opposed say nay. Amendments are adopted.

CLERK: Senator Flood would move to amend-- AM1275.

WILLIAMS: Senator Flood, you're recognized to open on AM1275.

FLOOD: Thank you, Mr. President and members. This amendment is essentially a bill that I introduced. It's in AM1139. It provides cities of the first class extra authority. When wanting to purchase real estate in 1969, we set the limit for first-class cities at \$2 million that they could purchase. This takes it up to \$5 million for acquisitions if they're renting back to the state, and it allows them to finance that. And this was unanimously kicked out by the Urban Affairs Committee, all of its members. It had no opposition. And I would appreciate your adoption of AM1275.

WILLIAMS: Thank you, Senator Flood. Debate is now open. Seeing no one in the queue, Senator Flood, you're recognized to close on your amendment. Senator Flood waives closing. Members, the question is: Shall AM1275 to LB131 be adopted? All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record Mr. Clerk.

CLERK: 34 ayes, 0 nays on adoption of Senator Flood's amendment.

WILLIAMS: AM1275 is adopted.

CLERK: Senator Wayne would move to amend-- AM1303.

WILLIAMS: Senator Wayne, you're recognized to open on AM1303.

WAYNE: Thank you, Mr. President and members of the Legislature. AM1303 was-- makes three small changes to the natural gas portions of LB131. After listening to Chris Stapleton and Garth Brooks, we decided that-- on General File-- that we should strike the overtime section that people had problems with. Senator Friesen, Senator Graene, and others mentioned last week it would be hard and difficult to pick between what was regular overtime and extraordinary overtime. So we removed that. Second, the amendment also strikes the cost of replenishing

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depleted storage. Since natural gas prices have returned to normal in the past few months, the cost of-- to replenish depleted storage is no longer a concern, which was when it-- when we passed this bill or initially brought it out, that was a huge concern. Additionally, since there-- many of the impacted municipalities actually denied access to their stored gas during the cold snap, the actual need to replenish their depleted storage is less. Finally, the amendment reduces the reimbursement from up to 90 to 80 percent of the extraordinary costs. This is the change that I discussed with Senator Stinner and Senator Friesen over a glass of water, not wine, to ensure that municipalities can put some skin in the game. And with that, I would ask for a green vote to make sure that those communities who have suffered from the cold snap can apply for some relief. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Wayne. Debate is now open. Seeing no one in the queue wishing to speak, Senator Wayne, you're recognized to close. Senator Wayne waives closing. Members, the question is the adoption of AM1303 to LB131. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 36 ayes, 0 nays on adoption of the amendment.

WILLIAMS: The amendment is adopted.

CLERK: I have nothing further on the bill, Senator McKinney.

WILLIAMS: Thank you, Mr. Clerk. Senator McKinney, for a motion.

McKINNEY: Mr. President, I move to advance LB131 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced. Mr. Clerk.

CLERK: Mr. President, LB131A. I have E&R amendments, first of all, Senator.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to adopt the E&R amendments to LB131A.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. Members are-- amendments are adopted. Mr. Clerk.

CLERK: I have nothing further on that bill, Senator. I have nothing further on the bill-- McKinney, I'm sorry.

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WILLIAMS: Thank you, Mr. Clerk. Senator McKinney, for a motion.

McKINNEY: Mr. President, I move to advance LB131A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor, say aye. Those opposed say nay. The motion is adopted. Mr. Clerk.

CLERK: No, I'm-- I don't have anything right now, Mr. President.

WILLIAMS: Go ahead back to the agenda, Mr. Clerk.

CLERK: Next bill, Mr. President: LB147. I have E&R amendments, Senator.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move that the E&R amendments to LB147 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. All those opposed say nay. The motion is adopted.

CLERK: I have nothing further on that bill, Mr. President.

WILLIAMS: Thank you, Mr. Clerk. Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB147 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced. Mr. Clerk.

CLERK: Mr. President, the next bill: Senator McKinney, LB147A. I have no amendments to the bill.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to advance LB147A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor, say aye. Opposed say nay. The bill is advanced. Continuing with Select File priority bills-- LB39.

CLERK: LB39. Senator, I have Enrollment and Review amendments first.

WILLIAMS: Senator McKinney.

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McKINNEY: Mr. President, I move that the E&R amendments to LB39 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The motions [SIC] are adopted.

CLERK: Senator McKinney would move to amend with AM1394.

WILLIAMS: Senator McKinney, you're recognized to open on AM1394.

McKINNEY: Thank you, Mr. President. AM1394 is a friendly amendment. I spoke with Senator Lindstrom and Senator Flood. What it does is decrease the amount, the percentage that's going to the arts in the-- that was adopted in a committee amendment on General File-- from 25 percent-- from 30 percent to 25 percent. The other 5 percent would be transferred to the Convention Center Financing Fund to be added to the Turnback Tax Committee in that fund. And I ask for your support, and I'm open to any questions. Thank you.

WILLIAMS: Thank you, Senator McKinney. Debate is now open. Seeing no one wishing to speak, Senator McKinney, you're recognized to close on AM1394. Senator McKinney waives closing. Members, the question is the adoption of AM1394 to LB39. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record Mr. Clerk.

CLERK: 38 ayes, 0 nays on adoption of Senator McKinney's amendment.

WILLIAMS: AM1394 is adopted.

CLERK: Senator Lindstrom would move to amend-- AM1420.

WILLIAMS: Senator Lindstrom, you're recognized to open on AM1420.

LINDSTROM: Thank you, Mr. President. And good evening, colleagues. AM1420 provides a definition of commenced dates, and inserts the word "multipurpose" on page 2, line 2. It also added the word "court" and provided definition to include, but not limited to, basketball, volleyball or tennis. After LB39, advanced from General File, I had some conversations with Senator Vargas and Senator Wayne, and we came to the conclusion that LB39 had the potential to be useful in areas that are in need of redevelopment. Therefore, AM1420 would loosen the requirements of this bill applied to economic redevelopment areas. The amendment provides the definition of an economic development area in the state of Nebraska, to allow for 4 separate sports arena instead of the 12 for a metro area. I would urge your green vote on AM1420 and on a voice vote on LB39. Thank you, Mr. President.

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WILLIAMS: Thank you, Senator Lindstrom. Debate is now open. Seeing no one in the queue wishing to speak, Senator Lindstrom, you're recognized to close. Senator Lindstrom waives closing. Members, the question is the adoption of AM1420 to LB39. All in favor vote aye; opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 38 ayes, 0 nays on adoption of Senator Lindstrom's amendment.

WILLIAMS: AM1420 is adopted.

CLERK: I have nothing further on that bill, Senator McKinney.

WILLIAMS: Thank you, Mr. Clerk. Mr.-- Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB39 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced. Returning to the agenda.

CLERK: Mr. President, LB39A. Senator, I have no amendments to the bill.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to adopt-- advance LB39A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced.

CLERK: LB84, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to advance LB84 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: Mr. President, Senator McKinney, LB366. I have no amendments to the bill.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB366 to E&R for engrossing.

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WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced.

CLERK: LB366A, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to advance LB366A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced.

CLERK: LB682. Senator, I have E&R amendments, first of all.

WILLIAMS: Senator McKinney, for a motion.

McKINNEY: Mr. President, I move that the E&R amendments to LB682 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The amendments are adopted.

CLERK: Senator Linehan would move to amend with AM1433.

WILLIAMS: Senator Linehan, you're recognized to open on AM1433.

LINEHAN: Thank you, Mr. President. LB682, of course, reauthorizes the New Markets Tax Credit Program. The bill advanced from General File on a vote from 38-0. The Department of Revenue raised an issue today regarding the timing for applications. So to make double sure we don't miss the window of opportunity for application, the amendment adds the E clause to the bill. I would ask for your green vote on the amendment and advancement of the bill. Thank you.

WILLIAMS: Thank you, Senator Linehan. Debate is now open. Seeing no one wishing to speak, Senator Linehan, you're recognized to close. Senator Linehan waives closing. Members, the question is the adoption of AM1433 to LB682. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 41 ayes, 0 nays on adoption of Senator Linehan's amendment.

WILLIAMS: The amendment is adopted.

CLERK: I have nothing further on the bill, Mr. President.

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WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB682 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced.

CLERK: Mr. President, LB396. Senator McKinney, I have no amendments to the bill.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB396 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: LB396A, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB396A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: LB18. I have no amendments to the bill, Senator.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB18 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: LB185. I have Enrollment and Review amendments, Senator.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move that the E&R amendments to LB185 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The E&R amendments are adopted.

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CLERK: I have nothing further on that bill, Senator.

WILLIAMS: Thank you, Mr. Clerk. Senator McKinney.

McKINNEY: Mr. President, I move to advance LB185 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: Mr. President, LB388. Senator, I have Enrollment and Review amendments, first of all.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move that the E&R amendments to LB388 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The E&R amendments are adopted.

CLERK: Senator Wayne, I have FA36.

WILLIAMS: Senator Wayne, you're recognized to open FA36.

WAYNE: Thank you, Mr. President. Colleagues, after long conversations and drafting this amendment, I hope everybody takes time to read this amendment. And I'm just going to outline briefly what this amendment does and we can have a conversation. If everybody wants to go home, we can just vote and move, but I will tell you, regardless of how this bill or this amendment moves today, this will definitely--

WILLIAMS: Senator Wayne, can you-- Senator-- Mr. Clerk, can you make an announcement?

CLERK: Senator, I have FA36 in front of me. I'm assuming you want to talk to AM1197.

WAYNE: Yes, so is the order my amendment, Senator Flood's amendment, then my amendment or is it my amendment then my amendment? Because if it is, I'll just substitute my amendment to my amendment.

CLERK: I don't have a Flood amendment first.

WAYNE: Oh, OK. Well then yeah. I want to talk--

CLERK: So you want to withdraw FA36?

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WAYNE: Yes. I was just getting into the flow of things, Mr. Clerk.

CLERK: I know, Senator, sorry to do that to you. Senator Wayne, AM1197.

WAYNE: Just remember, for the first time in 50 years, Patrick apologized to a senator. I just want you to, to know that.

WILLIAMS: Senator Wayne, you are now recognized to open on AM1197.

WAYNE: Thank you, Mr. President. All right, colleagues, I can't-- can I have a call of the house?

WILLIAMS: There's been a request to place the house under call. The question is shall the house go under call? All those in favor vote aye; those opposed vote nay. Record, Mr. Clerk.

CLERK: 20 ayes, 6 nays to place the house under call.

WILLIAMS: The house is under call. Senators, please record your presence. Those unexcused senators outside the Chamber, please return to the Chamber and record your presence. All unauthorized personnel, please leave the floor. The house is under call.

WAYNE: Hello? Thank you.

WILLIAMS: Senator Wayne, you're now allowed to open.

WAYNE: Thank you. Colleagues, one-- there's two reasons why I called the house. One, you can call any time you want to and you-- we should know that, but two, this is one of the most important amendments that I've ever written and I think it's important that we all listen to it. And I'm not saying that just to say that, but I think we're talking about something very critical here when the underlying bill is spending \$40 million for broadband in rural Nebraska. And I think it's important because what this amendment does-- and, and again, I hope we really take a conversation about this amendment. We can vote on it. We can still get out here in a reasonable time, but I do think this is very important of what we're trying to do for rural communities. What this amendment does is not allow municipalities, for two years, to even start the process of looking at broadband. That says basically, if we're going to put \$40 million behind the private sector along with tax breaks, along with corporate tax rate breaks, then the least they can do is have a conversation with local municipalities on the importance of this critical infrastructure piece that we call broadband. But I want to walk through this and that's why I thought it

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was important because it just isn't about giving access to the public sector to enter into the space. It's really about a step process in which your community can define how important Internet is, but more importantly, how the lack of broadband is a critical infrastructure in your community. So first, there's a sunset, but second, this doesn't start for two years from now. But what happens at the local level underneath this amendment is kind of amazing. It's amazing because what they first have to do is have a hearing and a feasibility study on whether or not broadband even exists. And we used the criteria set forth in underlining LB388 and previous bills and previous regulations to determine what area is underutilized and what area is completely not utilized-- or access not utilized-- access to broadband. So the locals determine that first. They have to basically declare this area of our municipality is underutilized or not available or, or minimum available. From that, there's a procedure that has to take place. There has to be a feasibility study, but more importantly, there has to be a public notice and there is a 30-day requirement before they can even start moving forward on this process to make sure the public gets input on whether or not this is a critical infrastructure that their community needs. This is not-- these are the exact guardrails and guidelines that Speaker Hilgers talked about last time. We are putting guardrails and guidelines around public entities entering into this space and here's how it happens. Here's the critical thing that people always talk about: vote of the people. The only way they can enter into this space is a vote of the people or a super majority of their council or village board, a super majority. This is not just a free market of where the locals can decide, hey, we want to do broadband and compete with private sector. And in fact, this amendment allows the private sector to be enticed to come to their area. And here's what I mean by that. They first determine whether it's underutilized or not utilized at all or not accessed or, or not-- or a minimum access, but the feasibility study conducted by the locals, up to them, up to their local jurisdiction. If they determine they want to move forward, a private company will move into the area. If it's feasible, I have to assume the private market will do it. If it's not feasible, then of course I would hope local voters would stand up and go to their local council and say no, we don't want to waste dollars, but this is truly local control. This isn't a competition. This is the ability for the locals to say the free market has left us out. The free market has decided not to get Senator Bostelman fiber. And although Senator Bostelman does not live in a municipality, it is that conversation allowing the locals to say what's best for them. And if it's best for them, there is a minimum of a 30-day notice. And guess what? This doesn't start for two years. This is giving telecommunications underneath LB388 the opportunity to see where that

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\$40 million goes. But for those who are left behind, the communities who are not touched by this critical, critical infrastructure, they get to say, hey, we want to look more into this. We want to actually look around and see if it works. And by the way, there's still a sunset. That sunset means at the end of the day, this is not going to go on forever. We are going to take a chance to see how it happens and make sure this body, in ten years, comes back and revisits this issue. So I hope we have a conversation about this legislation. And whether it passes or not, this will be a bill next year because I think we got to have a broader conversation. But I have seen and I've been contacted as Urban Affairs Chair by too many municipalities saying they can't do it. And here's the ironic part. When a city manager comes from another state-- and this has been documented over and over and testified to at the hearing on the underlying bill-- and yes, this doesn't require 30, it only requires 25 because it's substantially different. Well, here's what I will tell you. When city managers come across from Kansas, Colorado, South Dakota, Iowa, this is one of the areas they say wait a minute, we can't do anything about this? In every other state surrounding us, we can do something about this. We have a, a more even negotiating table with the private sector because if they want to say no or they want to jack up our rates in order to come into our area, we can build it out ourselves. That is a more equal footing at the table to negotiate with broadband. And I hear us talk about corporate tax rates. I hear us talk about tax incentives. In all the surrounding states that make us competitive, why doesn't that apply here? And the second reason why, besides just what other states do, we are unique in this sense. We have a history when it comes to critical infrastructures being public. We have a history when it comes to the things that we need the most in rural Nebraska, in the farmer down the line, electricity, of being public because at the end of the day, shareholders, corporate shareholders are going to put profits over people and communities every day. It makes no business sense and that's the argument Senator Moser made over, over-- over and over on General File is cities don't have the expertise and it makes no business sense. That is why our sewers are not privately ran. One, it doesn't make business sense, but two, somehow they figured out with-- through expertise to get the job done, which is no different here. There are certain public utilities, certain utilities and critical, critical infrastructures that we as a body, since the 1930s-- actually going back to 1870s, has said there are certain things in Nebraska we have to value and make sure it's not profits over people, but people are the main reason. And if this pandemic has shown us anything, that in Seward-- Senator Brewer's district, you can-- we have-- they have known this for years--

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WILLIAMS: One minute.

WAYNE: --when we talk about snowstorms, that connectivity to schools matters. This pandemic has highlighted what Senator Brewer's district has struggled with forever regarding connectivity to the library, to the local school district, to reading. This pandemic showed that it's not just in rural, it's across the state municipalities. And at some point, I hope this body-- I hope today we say profit over people no more, that this is a critical tool for the, for the future of Nebraska and we have to at least put the option on the table, even if it's two years away. We'll give the Governor and the Transportation Committee two years with \$40 million, but if that doesn't work, if communities are left out, let's give them a chance to make a decision for their future. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Wayne. Debate is now open. Senator Friesen, you're recognized.

FRIESEN: Thank you, Mr. President, and thank you, Senator Wayne, for your weekly passionate speech on a topic. Again, this will be a poison pill for this bill. We have worked with a lot of different entities to develop something where we can get broadband out to unserved areas and provide a path to get our federal dollars that may flow down someday into providing broadband into unserved and underserved areas. Again, this is one of those things where, yeah, we sometimes say that while private industry does it best and then the next time we switch and say no, we should take it public and public can do it best. And I think, again, if it had not been for the private investment in this state and our telephone system that has been there for years, yes, they've received some subsidies, but when you look at the rural areas that they've had to serve and we've had to maintain those systems, I think the record is not too bad. Can we do better? I think we can. And as time gone on and we have developed a better system and with the new language in these bills, accountability is, is required. It is a cost share and this is the first time really that the state of Nebraska has put General Fund dollars into broadband out there. And so, again, this is a poison pill amendment. We can have that discussion. You can bring a bill again next year. And it's not a poorly written bill, but one of the things I want to explain is when we have set up our different broadband bills over the past three or four years, we have allowed the Public Service Commission to set up what we call a reverse auction. And what we, what we designed is a system where if, if somebody isn't getting service, the Public Service Commission can take a whole exchange, which means you're going to take the community and all of the rural areas and give it to another provider. If we, for instance,

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allow a, a municipality or even another provider to overbuild an incumbent carrier, now you have taken the profit center away from that exchange and somebody still needs to build out into those rural areas, that last-mile customer ten miles from town. And so we take that profit center away from that incumbent carrier, who's going to build out into those rural areas? And so, again, if we let companies cherry-pick or if we let communities cherry-pick their top customers off and try to provide broadband service at a cheaper rate, we lose the ability to get it out to that last mile. And we have to also remember that municipalities are putting on occupation taxes, franchise fees. They have-- they're sometimes making it more difficult for companies to expand broadband in their communities. They won't deal with pole attachment fees. The communities sometimes have made it harder for these companies to operate. And if we want to let private industry compare and work in a level playing field with cities, then let's take away their ability to charge occupation taxes and franchise fees, make them pay sales tax-- not pay sales tax on their fiber, make them not pay personal property tax on their equipment, and maybe we can get broadband out there quicker if we would quit taxing private industry. But again, we-- cities-- at some point in time, we can look at some things. Right now, they can enter into a public-private partnership with a company. The process was put in place in the last few years. The ability to do that is there and so this amendment is not needed and not welcome on this bill. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Friesen. Members, I raise the call. Senator Hilgers, you're recognized.

HILGERS: Thank, thank you, Mr. President. Good evening, colleagues. I'll be brief. I rise in strong opposition to AM1197 and in support of LB388, which is my personal priority bill. I appreciate the words that Senator Friesen just said and spoke on it on the merits and the substance of, of the underlying amendment. I would just make two points. The first is that this bill is, is narrow and it's meant to really accomplish one purpose, which is to as rapidly as possible get additional dollars at a critical point in time in our state's history to enable communities that don't have broadband-- real broadband, the broadband that can actually form the basis of new job growth, new companies being formed, families moving here, families staying here in Nebraska-- to get those dollars out into the community. That's its purpose. We've had a number of senators, including Senator Wayne, but a number of others who have asked us to attach additional amendments to this bill. Senator Friesen and I have spoken on a number of occasions, said no to each one of those amendments because we don't want to have this purpose be diluted. We don't want to muddy the

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waters and we certainly don't want to be a poison pill get attached. As Senator Friesen just mentioned, this would be one. I'll be very clear, if, if this amendment gets on, it will sink the bill. Now what I would tell you is Senator Wayne's point, which is-- by the way, what's underlying his, his argument that do the cities have a role to play here? I think that's a question that needs to be asked. And frankly, if I were to answer that question now, I would likely say, yes, they do have a role. Now to Senator Friesen's point, he has said, hey, there's already ways that cities can get involved. And I think that's a fair rebuttal, but I think even beyond that, are there ways that cities could be involved in a way that actually helps get us closer to this goal of ubiquitous broadband throughout our communities in Nebraska? I think the answer is probably yes. And in fact, that's something I was exploring last summer and fall. I will tell you, getting into the-- actually implementing, designing some sort of regulatory structure, something that makes that happen consistent with our decades now-- decades-long regulatory framework that we have in place, built on an old superstructure from the telephone days, that's not an easy thing and it's not something that should be done at 8:45 this evening on this amendment. And so what I would say is vote down-- please vote no on AM1197. I will extend my hand across this aisle to Senator Wayne and repeat my offer from the last time we had this debate and discussion, which is there's an opportunity to work collaboratively and creatively on this particular issue in a way that actually fits a municipal role in this system that we have. Let's work on that. And if we can get that done by the way, that would be a potentially big thing we could do over the summer and fall. It's not-- this isn't the vehicle. The vehicle is LB388, which is going to inject \$40 million into, into communities that need it to grow broadband for families and businesses around the state of Nebraska. This amendment, this is not the right vehicle for this amendment. So vote it down today, let the idea live on, and I will work with Senator Wayne over the summer and fall and find something that could work and get accomplished what I think we all think can be accomplished, which is can we use our communities to help supercharge broadband deployment? I think there's a path. It's not AM1197 and I'd ask you to vote red on that and then green on the underlying bill. Thank you, Mr. President.

WILLIAMS: Thank you, Speaker Hilgers. Senator Wayne, you're recognized.

WAYNE: Thank you, Mr. President and colleagues. Let, let me, let me-- first, this amendment has been filed for a while, so 8:45 tonight is a scheduling issue and nobody, nobody on this floor filed a, a motion to change the schedule. The schedule was done by the introducer of this

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bill knowing we would be here at night. That, that's not a reason. Second, this is the third time this week-- or considering-- I guess my weeks are blending together-- that I keep hearing about this poison pill. It's only a poison pill because the Governor is saying he may veto it. Well, I'm sorry, ladies and gentlemen. I knocked on the doors. He wasn't there with me. I'm the one down here missing my daughter's soccer games. He hasn't been there videotaping it so I can see it live. We are a separate body. And the fact that somebody says it's a poison pill because somebody is going to veto it is an automatic reason why we should vote for it. At what point is this body going to say we are separate, but equal? How many times have I sat on this floor and said, oh, we got to do-- we got to negotiate this, we got to do this? I've literally negotiated against myself on this, pushed it out two years, put all the guide rails, and the crazy part about this is if we push it back a year, the same individuals who are against this bill today will likely support it. There's only one key difference. It's a separate bill, not worried about it getting vetoed. I said this my freshman year when I lost a veto override. I'm cut from a different cloth. I don't really care about reelections, never have. And most of the time, I got both sides of the aisle mad at me. I'm on an island by myself most of the time and every once in a while, I can throw a line out to somebody else that's on another island and we can maybe be in the middle or I can crawl over to their island and we can hang out for a little bit. But that's about it because I represent a very diverse group of people. And the fact of the matter is, is Ponca doesn't have the quiet-- the, the Internet that's needed and that's in my district. The fact of the matter is Florence doesn't have the Internet that it needs in my district. And if the lobby is scared about this bill or this amendment passing, what is the fear? It's two, it's two years away. They have to go through an entire process to make sure that there is community engagement. This is more of a community engagement than any other requirement we've had at the local level. A supermajority vote? We don't even require that on bonding, but the idea that is a poison pill because of a veto is a fundamental problem that we have to change in this body. If you disagree about public utilities operating in Nebraska, then stop supporting public power. You can't have it both ways. But here's a little secret, you won't get reelected if you don't support public power. You won't get elected in a third if you don't. So I support public power, but when it comes to a critical infrastructure of growing Nebraska, we have LB18, which is about teleworkers in a different state. You know why in a different state? Because they actually have better connection in Council Bluffs and in Kansas than they do in rural Nebraska, where we can have workers working from home.

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WILLIAMS: One minute.

WAYNE: And I don't even like that bill. We have better communications in other states who have a public option because it creates a level playing field. So don't talk to me about local control next year when I'm talking about TEEOSA. Don't talk to me about supporting locals about the school board if they can't get Internet to make it work. We pick and choose oftentimes when we're going to talk about certain things, but at the re-- basic level, this bill is about creating a level, level playing field. And by the way, the industry doesn't oppose this bill. They've actually supported the exact same kind in Arkansas. They've actually supported the exact same kind in Illinois. You don't see the lobby out there against this bill. It's us scared of the Governor. We can do better and we can be better and I hope it starts today. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Wayne. Senator Flood, you're recognized.

FLOOD: Thank you, Mr. President. Members, I appreciate what Senator Wayne's doing with AM1197 and I have voted for this-- I think once or twice-- just given the fact that we've had a number of amendments on here. What I think has happened in this state in the last 20 years is we've gone from a system-- we're going from a system where it's inside baseball for telephone companies that lay Internet down for cable companies that are in the broadband business. And what we want to be in is we want to be in a business where we all are focused on it. For a long time, it was about telephone companies and voice services getting money and building out as they saw fit into different areas, broadband, but with no accountability and that started changing in 2016. And I would say we're in a much better place with a lot more companies in 2021 than we were in 2016. And Senator Brandt can testify to this. He's been part of the Legislature that's been wanting more accountability. But what we have seen for too long is a game where the money is doled out and everybody kind of figures it out at the Norfolk-- at the Lincoln Country Club. Everybody knows who their PSC commissioner is and they-- it's a, it's a closed class of people and they decide who's going to get the money on the back nine and the people in rural Nebraska haven't gotten it. And now we're in a situation where we want accountability, we want transparency, we want to know exactly where the money's going, and we want to know they build it out. And here's my biggest fear going forward and that is that we're going to get not just the \$40 million, but let's say we get another \$200 or \$300 million for broadband. We're talking about disbursing a quarter-plus million dollars or more of broadband money by the time you put the federal money in there. And what happened last

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time they tried this, through the Department of Economic Development, is that they had internal conflicts and threats of lawsuits and all sorts of folks that came in and made it very difficult and uncomfortable for cities to sign a form that said they didn't have 25/3 service. The city of Madison's mayor wasn't going to sign that form because he couldn't verify what people had for broadband. And so, you know what, what I am waiting on here from my office-- and I don't know if it will get here in time. It may not be-- we might not be able to do it, but I'd like to see in the bill, aside from Senator Wayne's amendment, which I know he has spent a lot of time on this, I'd like to see a couple of things. I'd like to see notice to the city clerk that funds are going to be handed out so that the elected officials know. I'd like to see it put in the newspapers so that people know that there is a challenge or a-- somebody objecting to the use of the funds, a provider objecting to another provider. And I'd like to change the evidence standard to clear and convincing instead of credible. Now those are things that aren't deal-killers at the end of the day, if we're not able to get that amendment on there, but I would like the companies, the telephone companies, the broadband companies, the cable companies to know that we are watching them. We want to see this done right. We want to see this be successful. And there are a lot of companies out there that I would, I would trust to build out the bigger city next to them that they've been foreclosed from going into for a long time. We have to make progress and that requires transparency and accountability. And I think the Legislature has made some great strides in the last five years as it relates to both of those important missions of state government and of the taxpayer's dollar, but when you start talking about handing out \$250 million potentially, we have to make sure that we get \$250-- \$250 million worth of, of value. Senator Brandt, would you yield to a question?

WILLIAMS: Senator Brandt, would you yield?

BRANDT: Yes, I--

WILLIAMS: One minute also, Senators.

BRANDT: Yes, I would.

FLOOD: Senator Brandt, what's the most frustrating thing to you when you think about rural Nebraska broadband and its rollout?

BRANDT: Development. There, there are not a lot of companies that are willing to develop rural Nebraska, particularly outside of the corporate city limits.

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FLOOD: So-- and you're talking about hooking up the rural communities. How do we do that? What do you think the bet-- is it a mix between fiber to the premises, fixed wireless? What is your opinion?

BRANDT: I think you look at all the technologies today and you also look at all the companies that are out there, particularly a public-private partnership using public power in those outlying areas because they may not have broadband, but they all have power poles that can be attached to.

FLOOD: So you're looking for a way to get-- well, we'll go ahead and quit here and come back. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Flood and Senator Brandt. Senator Friesen, you're recognized.

FRIESEN: Thank you, Mr. President. Let me make one thing really clear to anybody that wasn't listening to what I said. The Governor doesn't have anything to do with the poison pill. I personally will not schedule the bill or ask that it be scheduled. The Governor had nothing to do with this, Senator Wayne, so listen next time to what I'm saying. This has nothing to do with the Governor. This is a compromise between me and others who wrote this. This is not the Governor's bill that he brought. This is my bill. This is Senator Hilgers'-- Speaker Hilgers' priority bill. We designed it this way on purpose. It is accountable. The Public Service Commission has everything available on its website where these dollars go. We intentionally tried to fix the things that happened last year with the DED and that's why it's back to the Public Service Commission. And everything we always talk about here, we talk about rural electricians, but when we talk about pole attachments and trying to work with them on standardized pole attachment fees, they fight us and say no. Everything that happens out there with pole attachment fees and everything else and replacement poles has a direct impact on getting broadband out in the rural areas and the rural electricians fight us every step of the way. We have changed a lot of broadband laws since I've come here. We have gone for where you-- it was almost impossible to lease out dark fiber to where we have a process where it could happen, I think, within 90 days. And there is just so much redundant fiber out there that there isn't much need for dark fiber to be leased, but there are the possibilities of dark fiber leases. There's-- public-private partnerships can be had. There are communities who have worked with private providers and gotten broadband to their communities. They can continue to do that with any of the federal dollars that are coming down. They can partner with private industry, apply for these grants, and make that money

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leveraged into a lot more. But if we start cherry-picking off communities, we take away the real reasonable possibility that those rural areas outside of these city limits can receive broadband. And we could make this take years longer because no one wants to go out there. You're talking about putting fiber out where you have one customer per two miles. You will never recoup the cost of that from a customer that may or may not accept broadband when it gets to his house. This is a long-term goal that we're working on, trying to get it here. And in the end, maybe Starlink, maybe Elon Musk's low-Earth orbit satellites will be the answer to some rural areas, the sparse areas. Maybe fiber, at the cost that we're talking about, is not going to be the solution. There are other possibilities out there. Even in communities that are overbuilt, sometimes the take rate-- the acceptance rate is only 40 percent. So now you have 60 percent of the taxpayers who don't want the service paying for the 40 percent that do with a, with a city who is busy trying to keep up their streets and bridges, who can't even keep that done. You're just going to put more of a burden on the property taxpayer, which we've been talking about. We are getting this out to communities. ALLO Communications has done a great job of overbuilding communities of a certain size. They make a business case. They don't need a community to even do a study.

WILLIAMS: One minute.

FRIESEN: They know what they're doing. They understand the business of it and they're doing it. We have numerous other communities that have-- one other company has overbuilt 40 communities last year. It's getting done, but it can't get done immediately and I think this bill sets the path to get that done. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Friesen. Speaker Hilgers, you're recognized.

HILGERS: Thank, thank you, Mr. President. Good evening again, colleagues. I wasn't intending to rise again on this particular discussion, but I do think after I got up and Senator Wayne suggested or didn't-- actually didn't suggest it all-- said flat-- said flatly, explicitly that the poison pill here is that we think that it's going to draw a veto from the Governor. I want to be really clear. I want to be very clear. Senator Friesen and I have been very clear with other senators from the beginning. We don't want any amendments on this particular bill and there are certain bill-- certain amendments on the merits, on the policy we have said would be poison pills, we will kill the bill. There's another senator in this body, I won't name them individually, who came to us a month ago, a similar, different but-- different, but similar concept to something that Senator Wayne is

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bringing here now and we told him no. If it gets on, we'll kill the bill. This is a separate branch of government. The idea that poison pills mean veto overrides or vetoes for us, maybe for other senators, not for Senator Friesen, not, not for me. This isn't a question of a veto. This is a question of policy. We are the legislative branch. We are the policymaking branch. And Senator Friesen and I are 100 percent aligned. So I want to be really clear since we're making a record here. When I said poison pill, when Senator Friesen said poison pill, it's on the policy, it's on the merits, and it's a line that we have drawn for weeks, if not months. This is meant to do something simple, straightforward that will have a big impact for the state of Nebraska. Other policy fights we can have. We can have them on another day and another time. These discussions on AM1197 and some others that have been brought that we've had conversations with off the mike in the previous week, those are good conversations to have. I think that's part of the potential solution here. It's not on LB388. Senator Friesen and I are 100 percent aligned on this and it's on the policy, so I just want to be-- I, I, I rose again. Please vote no on AM1197, vote green on the bill, but I want to make sure the record is very clear as to what we think this is a poison pill regarding. It has nothing to do with a veto. Thank you, Mr. President.

WILLIAMS: Thank you. Speaker Hilgers. Senator Wayne, you're recognized and this is your third opportunity.

WAYNE: Thank you, Mr. President. And colleagues who all-- who are all my, my-- Senator Hilgers-- Speaker Hilgers' and I's classmates, I know you've always wanted the Hilgers versus Wayne, but you're not going to get that tonight either. So sorry, it's not going to happen. But Senator Friesen, I-- you know, I guess I've never had a bill requested at the Governor and so that's what it says and so that's why I took it as the Governor's bill. I didn't know it was literally yours when it says Friesen requested at the Governor, so I, I will apologize for that. I just-- you know, he's never called me and requested me to do a bill for him, so I wasn't sure how that worked. Nevertheless, colleagues, I, I want us to understand this logic. And I do want to get a vote and we can move forward and I'm, and I'm assuming that, you know, it'll be a bill next year. I-- you know, I, I wish it wasn't like that. I hope, I hope we send a message tonight with 27 votes-- but if we can't get to 27, at least 24 votes-- to the private sector that this is serious. Telecommunications, broadband is serious in this state and if they don't step up, we will. But I, I do-- I'm laughing because the logic behind this is, is just amazing to me. The logic is we'll give you tax breaks, we'll give you tax credits, we'll pay you to build it, and then we're going to pay to use it. That, that just

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makes no sense to me. We're going to pay you to build something. We are going to give you enough money that you build it out and then you're going to turn around and charge the same taxpayers to use it. In what other industry do my conservative colleagues think this is a good idea? Because now we're not talking about policy decisions, we're talking about true conservative principles. We are not only giving them tax breaks because they don't pay taxes on many-- we have a special section in our tax code for telecommunication. Not only do they qualify underneath the ImagiNE Act so we're giving them tax credits, now we are going to give them \$40 million to build something that we deem is critical and so they can turn around and pay it-- make us pay for it. Senator Friesen, is there any stipulation that people in poverty who are built out of-- in, into these communities get a lower rate? Since it's government dollars, is there any, is there anything like that? Because on Final, I'm going to bring it back for an amendment to say those who qualify for poverty or free and reduced lunch, since the government's paying the bill to these communities, at least we can make sure that they have a, a different rate. And maybe there is something in there, I don't know, but these are the basic things that we're talking about. It, it, it's just amazing that we've spent this much money on telecommunications and we have communities that are still left in the dark and we're going to throw \$40 million at it again. And yes, there are some, some guide rails and some other things, but, you know, what bothers me the most is if this body were to attach a bill-- an amendment to my bill, which they have before, and the introducer of amendment sits down and really works through all of the things that I think is a decent idea, but because I want my bill clean, I'm not going to move forward, that-- I guess if that's the principle we're going to lay out, then--

WILLIAMS: One minute.

WAYNE: --we'll have more conversations around Christmas tree bills. Again, colleagues, this is my last time talking before my closing. I need-- I hope you read the amendment and see that there are guardrails, there are safeguards. We are making sure the public is notified. We are making sure that there are-- a study done, that there are things that happen to give the public the opportunity, including a public vote, including a public vote. I don't know much, much more we can do. There are colleagues of mine who just say the timing is off. Well tell that to the kids in your district, in rural Nebraska who can't access broadband if they have to wait potentially three or four more years. The timing is off. Thank you, Mr. President.

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WILLIAMS: Thank you, Senator Wayne. Senator Bostelman, you're recognized.

BOSTELMAN: Good evening, colleagues. Thank you, Mr. President. Thank you, Senator Wayne, for the discussion for the amendment. I will be opposed to the amendment. I do support the bill. And we've talked about this off the mike once or twice, Senator Wayne and I have. You know, the-- if you look at my bill, which we've already passed, LB338 will actually provide us the opportunity to not only fund and expand broadband in our rural communities, but then outside of the city limits, if you will. The challenge with his amendment that Senator Wayne has now, which he knows is my concern is, is that the funds will only go to the cities. I won't see that come out to my, to my area. It won't leave the, the one or two miles outside of the village or town or city, wherever it's at. I think that's the challenge with it right now. And I appreciate everything Senator Wayne is saying and his, and his desire, vigor within this is to, to make things happen. And I get that and, and I, and I support him in that sense, but I think we have that opportunity in LB338. And when the funds come in, if we could funnel that-- if we could use that model that we have that-- it's called rural-based plan and what that does is, is allow that community to-- the village, a community, whatever it is that's in my district, they could, they could work together, the school, the hospital, the co-op, whatever it is, and then they could go outside of the, outside of the city, outside of the city limits, outside of that area, and reach out into that local area and have a provider that they want to come in and provide into that and provide for that whole area and that then gets out to where I'm at. That gets out to the farmer, to the ranch, or wherever it is. AM1197, although it has a great intent, I, I-- again, I appreciate what, what he's thinking, what he's trying to do. It's not there for me, if you will. It's not there for those of us who live outside of the city limits. And I'm afraid that what would happen is all the money would go to the cities and then there would be-- there we would set. I would still not have broadband. I would still have a satellite where I get 0.5 upload. I would still have a neighbor whose satellite is eight point something download and a five point something upload. So I appreciate what Senator Wayne's doing. I appreciate his, his tenacity with this, his, his direction with this. It's not there yet for me. It's not there yet, I think, for those of us who are living outside of the town and that's why I oppose the AM. I do support LB388 and again, thank you, Senator Wayne, but I think that's something that we can definitely work on. We can-- I would be very happy to, to work with you on it. I think it's something-- a direction that we need to go next session. It's just at that time-- right now that LB388 needs to pass as it is. Thank you.

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WILLIAMS: Thank you, Senator Bostelman. Seeing no one in the queue, Senator Wayne. There's been a request to place the house under call. All those in favor say-- vote aye; those opposed vote nay. Record, Mr. Clerk.

CLERK: 23 ayes, 4 nays to place the house under call.

WILLIAMS: The house is under call. Senators, please record your presence. Those unexcused senators outside the Chamber, please return to the Chamber and record your presence. All unauthorized personnel, please leave the floor. The house is under call. Senator Wayne, you can begin your closing.

WAYNE: Thank you, Mr. President. Colleagues, Senator Bostelman, how is the private market working the last 20 years for you? Not very well. And what's interesting about this is I know I'm missing three votes because three votes are checked out. I want that board to say 24. I would even offer if it had 26, I'll pull it off on Final Read and take it out. This is about sending a message to the private industry that broadband in rural Nebraska means something. So when we do roll call, reverse order, if you're kind of at the end and we're only at 22, go ahead and push it. Let's get to 24 and show them we're serious. That's what this is about. I like the bill, but I understand the reality of a poison pill and I understand the reality of a-- of the owner of the bill controlling the bill. But here's what I will tell you. The idea of doing nothing because it doesn't solve all the problems is the exact thing I heard on Opportunity Scholarships, Senator Linehan. On your bill dealing with Opportunity Scholarships, we heard we have to fix the whole education system. We hear that about prison reform, that we're not fixing the whole thing, so little dabs that we take here and there aren't making a difference. We hear that about transportation problems, the four-lane highways, that we just don't have enough, so why not do it all? We can't do it all, we can't do it at all. And that's just not how I'm built. I believe in making as many steps as we can and if we can't make any more, then we wait for the next opportunity to make more and we keep fighting. But here's what I would tell you, colleagues. I can't want to help your community more than you want to help your community. Omaha has two or three different-- we have wireless, we have Wi-Fi, we have options. This is rural Nebraska coming to Urban Affairs over and over again, saying part of their problem with economic development is they don't have high-quality broadband. This bill doesn't cost us a thing. This bill does not cost us a thing. This bill doesn't even start for two years and still ends within ten. This is just, this is just leaving small communities in the cold. And we can make up a lot of excuses of why they can't, why

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they should, why they won't, but at the end of the day, the last 20 years, nothing has changed. The same U.S. Cellular tower that I drive through when I'm going out to the 3rd District is the same one I saw when I was going to Colorado when I was seven years old. Things aren't moving fast enough for Nebraska. This is about leveling the playing field. This is about sending a message to private industry and this is about protecting and adding all the safeguards that Speaker Hilgers asked for: regs, safeguards, public input, feasibility study, 30-day notice, multiple hearings, a, a, a vote for the people-- by the people, nothing else. So let's send a message. Let's send a message that rural Nebraska, small communities need broadband. It is their lifeline for economic development, along with infrastructure like rail--

WILLIAMS: One minute.

WAYNE: --along with infrastructure like interstates and highways. Broadband is that critical. If you don't want to pass it tonight because the timing's wrong, send a message with a vote. While I know I'm missing three, let's get to 24, if not 25, and let's send a message that we're serious. The \$40 million we're going to spend means something. Otherwise, I'm going to take Senator Hilgers' and Senator Friesen's offer up over the summer to put together a bill that changes the leveling-- level playing-- it creates a level playing field between the municipalities and the industry. Please vote green. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Wayne. Members, the question is the adoption of AM1197 to LB388. There's been a request for a roll call vote in reverse order. Mr. Clerk.

CLERK: Senator Wishart, voting yes. Senator Williams, voting no. Senator Wayne, voting yes. Senator Walz, voting yes. Senator Vargas, voting yes. Senator Stinner, voting no. Senator Slama, voting no. Senator Sanders, voting no. Senator Pansing Brooks, voting yes. Senator Pahls. Senator Murman, voting no. Senator Moser, voting no. Senator Morfeld, not voting. Senator McKinney, voting yes. Senator McDonnell, voting yes. Senator McCollister, voting no. Senator Lowe, voting no. Senator Linehan, not voting. Senator Lindstrom, voting no. Senator Lathrop, voting yes. Senator Kolterman, voting no. Senator Hunt, voting yes. Senator Hughes, not voting. Senator Hilkemann, voting no. Senator Hilgers, voting no. Senator Matt Hansen-- I'm sorry-- voting yes. Senator Ben Hansen, voting no. Senator Halloran, not voting. Senator Groene, voting no. Senator Gragert, voting no. Senator Geist, voting no. Senator Friesen, voting no. Senator Flood, voting yes. Senator Erdman, voting no. Senator Dorn, voting no.

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Senator DeBoer, voting no. Senator Day, voting yes. Senator Clements, voting no. Senator Machaela Cavanaugh, voting yes. Senator John Cavanaugh, voting yes. Senator Briese. Senator Brewer, voting no. Senator Brandt, voting yes. Senator Bostelman, voting no. Senator Bostar, not voting. Senator Blood. Senator Arch, voting no. Senator Albrecht, voting no. Senator Aguilar, voting yes. Senator Hughes, voting no. Senator Linehan, voting yes. 17 ayes, 26 nays, Mr. President.

WILLIAMS: The amendment is not adopted. Mr. Clerk. I raise the call.

CLERK: I have nothing further on the bill, Mr. President.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President--

WILLIAMS: Excuse me, Senator Bostelman punched in. Senator Bostelman, you're recognized.

BOSTELMAN: Thank you, Mr. President. Senator Wayne, that vote was for not-- the telecoms, the cables, the fiber folks better be listening because you're serious. I'm serious. We've been talking long enough. We've done some significant things this year on broadband. We're not stopping now. So over the interim next year, we're going to do more. So telecoms, pay attention. There's going to be more coming. Thank you, Mr. President.

WILLIAMS: Thank you, Senator Bostelman. Now Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB388 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced. Mr. Clerk.

CLERK: LB388A, Senator. I have E&R amendments.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move that the E&R amendments to LB388A be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. E&R amendments are adopted.

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CLERK: I have nothing further on that bill, Senator.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to advance LB388A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced. Items, Mr. Clerk.

CLERK: Mr. President, before we proceed, amendments to be printed: LB241, Senator Brandt; Senator Walz, LB528; Senator Walz, LB529A; Senator Lathrop, LB561; Senator Ben Hansen, LB236. Mr. President, Select File returning LB452. I have Enrollment and Review amendments, Senator.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move that the E&R amendments to LB452 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. E&R amendments are adopted.

CLERK: Senator McKinney would move to amend-- AM1195.

WILLIAMS: Senator McKinney, you're recognized to open on AM1195.

McKINNEY: Mr. President, I move to pull this amendment-- AM1195, pull it.

WILLIAMS: The amendment is withdrawn.

CLERK: Senator McKinney would move to amend with AM1253.

WILLIAMS: Senator McKinney, you're recognized to open on AM1253.

McKINNEY: Thank you, Mr. President. AM1253 fixes some concerns that were-- that came up on General File. So the biggest changes: one, we're not adding the private and parochial schools. But in Section 3, it says now: Beginning with school year '23/24, each school district in consultation with the State Department of Education, shall include financial literacy instruction as appropriate in the instructional program-- program of its elementary and middle schools, and require each student to complete at least one five-credit high school course in personal finance or financial literacy prior to graduation. The next change in Section 4 says: On or before December 31, 2024, or--

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and on or before December 31 of each year thereafter, in order to promote and support financial literacy education, each school district shall provide an annual financial literacy status report to its school board, including, but not limited to, student progress in financial literacy courses and other districts-- district-determined measures of financial literacy progress from the previous school year. And the next other change-- well, addition, is the-- the State Board of Education shall adopt measurable academic content standards for financial literacy as part of social studies standards. With that, I would ask for your green vote for AM1253. If you have any questions, feel free to ask. Thank you.

WILLIAMS: Thank you, Senator McKinney. Debate is now open. Senator Clements, you're recognized.

CLEMENTS: Mr. President, would Senator McKinney yield to a question?

WILLIAMS: Senator McKinney, would you yield?

McKINNEY: Yes.

CLEMENTS: I see that one section says to be "as appropriate." And-- and it has his elementary and high school. Is-- is the intention to have kindergarten through sixth grade-- every-- every grade have to have this number of hours?

McKINNEY: No. The credit hours is only for high school. In elementary, it's as appropriate at each grade level.

CLEMENTS: OK.

McKINNEY: So they'll learn as-- so in kindergarten, you're not going to learn what you're going to learn in the 12th grade of high school.

CLEMENTS: Thank you. Then another question. If a school has already-- had teachers tell me: Well, our school already does this. Is this adding anything more or is it where, if they already have a program, is-- is this adding to it?

McKINNEY: No. If they're already doing it, that's great. This is just-- for those that weren't doing it, it's-- it's-- it's putting it into statute. But if they're already doing it, then it shouldn't be an issue.

CLEMENTS: Good. There was concern as to whether this was going to make them change what they're doing, do something different. So thank you, Senator McKinney. Thank you, Mr. President.

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WILLIAMS: Thank you, Senator Clements and Senator McKinney. Senator Arch, you're recognized.

ARCH: Thank you, Mr. President. Senator McKinney, could you answer a question for me, please?

WILLIAMS: Senator McKinney, would you yield?

McKINNEY: Yes.

ARCH: I'm unfamiliar with that five credit standard. What-- what exactly does that mean? What-- what does that mean as far as amount of time for a high school student?

McKINNEY: So most-- so it came up on General File. Someone reached out from-- a superintendent, reached out and said the initial half credit hour wasn't in line with how schools as of now track courses. So the five is just more in line with how they credit a student for the completion of a course.

ARCH: And is that-- to-- to get five credit, is that-- is that like one? Is that like one class-- in other words, I don't mean one day, but I mean, you know, for a-- for a period of time just once during that high school term?

McKINNEY: Yes.

ARCH: OK. All right. Thank you very much.

McKINNEY: No problem.

WILLIAMS: Thank you. Senator Arch and Senator McKinney. Seeing no one in the queue, Senator McKinney, you're recognized to close. Senator McKinney waives closing. Members, the question is the adoption of AM1253 to LB452. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 39 ayes, 0 nays on the adoption of the amendment.

WILLIAMS: The amendment is adopted.

CLERK: I have nothing further on the bill. Senator.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB452 to E&R for engrossing.

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WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: LB452A, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney, for a motion.

McKINNEY: Mr. President, I move to advance LB452A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The bill is advanced.

CLERK: LB103, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB103 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. LB103 is advanced. Moving to priority bills, Select File.

CLERK: Mr. President, LB336. I have Enrollment and Review amendments, Senator.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move that the E&R amendments to LB336 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The E&R amendments are adopted.

CLERK: I have nothing further on that bill, Senator.

WILLIAMS: Thank you, Mr. Clerk. Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB336 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Opposed say nay. The bill is advanced.

CLERK: LB406. Senator, I have Enrollment and Review amendments, first of all.

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WILLIAMS: Senator McKinney, for a motion.

McKINNEY: Mr. President, I move that the E&R amendments to LB406 be adopted.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. The amendments are adopted.

CLERK: Senator McDonnell would move to amend-- AM1386.

WILLIAMS: Senator McDonnell, you're recognized to open on AM1386.

McDONNELL: Thank you, Mr. President. Good evening, colleagues. The AM1386 puts into the-- the bill that discussion we had on-- on General File about the idea of making sure there was a clear sunset. And this special committee shall terminate on December 31, 2022.

WILLIAMS: Thank you, Senator McDonnell. Debate is now open. Seeing no one in the queue, Senator McDonnell, you're recognized to close. Senator McDonnell waives closing. Members, the question is the advancement of AM1386 to LB430-- LB406, excuse me. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 34 ayes, 0 nays, Mr. President, on the amendment.

WILLIAMS: AM1386 is adopted.

CLERK: Senator Groene would move to amend-- AM1424.

WILLIAMS: Senator Groene, you're recognized to open on your amendment.

GROENE: Thank you, Mr. President. I appreciate Senator McDonnell putting a sunset date on there. But I-- I also had noticed something about the bill, and I just make an assumption that all of we-- at least a lot of us did-- that when we give-- appropriate \$2 million for a-- for, as it says in the bill, the special committee could enter into contracts, consulting, engineering and development studies. The contract shall be subject to approval by the Executive Board upon the recommendation of the majority of the members. I assume that there was a bid process. I assumed that it fit under Statute 81-701 [SIC-- 81-1701], the Nebraska Consultants' Competitive Negotiation Act, where we may-- let me look again here-- excuse me, late in the night-- where the Department of Administrative Services has to take bids, you know, we had the St. Francis issue, and then bids were taken, and the public knew what the cost would be and that we had a fair bid. But I come to find out that the Legislature doesn't-- is not under that statute,

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that if we decide to do something like this, we don't have to take bids, because the legislation was correct. So I attempted to tie the Legislature into 81-701, but it doesn't; that's executive branch statute. So anyway, I just talked to bill writing and I talked to Senator Wayne-- I mean, Senator Donald [SIC-- McDonnell] and Senator Hilgers about it, and they don't seem to have any problems with it. We-- we're just going to fit into-- into the statute that these contracts will be based on competitive bids. That we know as a body what the expected cost of the of the consultation, engineering, and development studies are expected to be, and that there's other-- there's not a lot of large firms that do this in Nebraska, but there's two major ones--, HDR and Olsson's, that both-- both of them would have a shot at this and give the taxpayer the best deal. So anyway, way I understand it, that Senator McDonnell is not adverse to this. And I'd like to be able to look back and say: Where did the \$2 million dollars get spent? What was the bid? These companies, it's-- Senator McDonnell expressed the view to me that they want to get rolling on this. And the bids might slow it down, but the reality is this. These companies are well-versed in the bid process. They do it all the time. They do it any time they deal with the state--or the executive branch, the Department of Natural Resources, NRDs-- they have to have a bid. So it wouldn't take them much to put some numbers together and compete on this issue. So anyway, I just thought-- I would hope we don't have a long debate on it. And it's just common sense. I don't know how anybody could defend-- defend the opposite of this, that we just give \$2 million out there, and they bill as they go. I don't think that's good government, and so I would appreciate a yes vote on-- a green vote on AM1424. Thank you.

WILLIAMS: Thank you, Senator Groene. Debate is now open. Seeing no one in the queue, Senator Groene, you're recognized to close on-- Senator Groene waives closing. The question, members, is the adoption of AM1424 to LB406. All those in favor vote aye; Those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 35 ayes, 0 nays on adoption of the amendment.

WILLIAMS: The adopt-- the amendment is adopted.

CLERK: I have nothing further on the bill, Senator McKinney.

WILLIAMS: Senator McKinney.

McKINNEY: Mr. President, I move to advance LB406 to E&R for engrossing.

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WILLIAMS: Members, you've heard the amendment. All those in favor say aye. Those opposed say nay. LB406 is advanced.

CLERK: Mr. President, LB406A-- no Enrollment and Review. Senator McDonnell would move to amend with AM1211.

WILLIAMS: Senator McDonnell, you're recognized to open on AM1211.

McDONNELL: Thank you, Mr. President. And it's just a clarification that, on page 2, line 2, strike "126," which is research, and insert "122," which is legislative services. Thank you, Mr. President.

WILLIAMS: Thank you, Senator McDonnell. Debate is now open. Seeing no one wanting to speak, Senator McDonnell, you're recognized to close. Senator McDonnell waives closing. Members, the question is the advancement of AM1211 to LB406A. All those in favor vote aye; those opposed vote nay. Have all voted that wish to vote? Record, Mr. Clerk.

CLERK: 34 ayes, 0 nays, Mr. President, on the adoption of Senator McDonnell's amendment.

WILLIAMS: The amendment is adopted.

CLERK: I have nothing further on the bill, Senator McKinney.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB406A to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. LB406A is advanced. Mr. Clerk.

CLERK: LB26, Senator. I have no amendments to the bill.

WILLIAMS: Senator McKinney for a motion.

McKINNEY: Mr. President, I move to advance LB26 to E&R for engrossing.

WILLIAMS: Members, you've heard the motion. All those in favor say aye. Those opposed say nay. LB26 is advanced. Speaker Hilgers for an announcement.

HILGERS: Thank you, Mr. President. Good evening, colleagues. It's been a long day. We got a lot of work done. I appreciate everyone's efforts throughout the day, and I think it's time for us all to go home. So we won't pick up LB298. I spoke to Senator McDonnell. We will get to

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that. But let's-- let's pack it in for the evening. Appreciate all the work; we'll see you in the morning. Thank you, Mr. President.

WILLIAMS: Mr. Clerk for items.

CLERK: I have no items. Senator Wayne would move to adjourn the body until Thursday, May 13, at 9:00.

WILLIAMS: Members, you've heard the motion to adjourn. All those in favor say aye. All those opposed? We are adjourned.