LEGISLATURE OF NEBRASKA

ONE HUNDRED NINTH LEGISLATURE

FIRST SESSION

## **LEGISLATIVE BILL 67**

Introduced by Raybould, 28. Read first time January 09, 2025 Committee: Health and Human Services

- 1 A BILL FOR AN ACT relating to sexual assault; to adopt the Sexual Assault
- 2 Emergency Care Act; and to provide severability.
- 3 Be it enacted by the people of the State of Nebraska,

Sections 1 to 4 of this act shall be known and may be 1 Section 1. 2 cited as the Sexual Assault Emergency Care Act. 3 **Sec. 2.** For purposes of the Sexual Assault Emergency Care Act: (1) Department means the Department of Health and Human Services; 4 (2) Director means the Director of Public Health of the Division of 5 6 Public Health or the director's designee; 7 (3) Emergency care for a sexual assault survivor means a medical examination, procedure, or service provided by a hospital to a sexual 8 9 assault survivor following a sexual assault; 10 (4) Emergency contraception means a federal Food and Drug Administration-approved drug administered after sexual intercourse that 11 12 prevents pregnancy but which does not disrupt an existing pregnancy; 13 (5) Hospital means a hospital licensed under the Health Care 14 Facility Licensure Act; (6) Medically and factually accurate and objective means verified or 15 supported by the weight of research conducted in compliance with accepted 16 17 scientific methods and standards, the currently accepted professional standards of care and established protocols for medical care following 18 19 sexual assault as established in section 29-4311, and recognized as accurate and objective by leading professional organizations and agencies 20 with relevant expertise in the field of obstetrics and gynecology; 21 22 (7) Sexual assault means any sexual assault that involves sexual penetration as defined in section 28-318 or substantially similar 23 24 conduct; and 25 (8) Sexual assault survivor means an individual who is a victim of sexual assault and who reports such sexual assault to a hospital, 26 including anonymous reporting pursuant to section 28-902. 27 28 (1) A hospital which provides emergency care for a sexual Sec. 3. assault survivor shall: 29 (a) Provide the sexual assault survivor with medically and factually 30 accurate and objective written and oral information about emergency 31

1 <u>contraception;</u>

(b) Provide the sexual assault survivor with written and oral
information in a language the sexual assault survivor understands about
the option to receive emergency contraception at the hospital; and

5 (c) Dispense a complete course of emergency contraception, in 6 accordance with the currently accepted professional standards of care and 7 established protocols for sexual assault forensic medical examinations, 8 to the sexual assault survivor, unless declined by the survivor.

9 (2) A hospital which provides emergency care for a sexual assault 10 survivor shall provide training for all personnel involved in such care 11 regarding the provision of medically and factually accurate and objective 12 information about emergency contraception.

(3) A hospital which provides emergency care for a sexual assault
 survivor shall ensure compliance with the Sexual Assault Emergency Care
 Act and shall develop policies and procedures, as necessary, to ensure
 compliance with the act in the case of moral or religious objections by
 individual health care providers.

18 Sec. 4. (1) Any complaint regarding compliance with the Sexual
19 Assault Emergency Care Act may be filed with the department.

(2)(a) The department shall review complaints received regarding
 failure of a hospital to provide services in compliance with the Sexual
 Assault Emergency Care Act to determine the action to be taken to satisfy
 the complaint. In making a determination as to whether or not to conduct
 an investigation, the department may consider factors such as:

(i) Whether the complaint pertains to a matter within the authority
 of the department to enforce;

27 (ii) Whether the circumstances indicate that a complaint is made in
 28 good faith and is not malicious, frivolous, or vexatious;

(iii) Whether the complaint is timely or has been delayed too long
 to justify present evaluation of its merit;

31 (iv) Whether the complainant may be a necessary witness if action is

1 <u>taken and is willing to identify himself or herself and come forward to</u>
2 testify if action is taken; or

3 <u>(v) Whether the information provided or within the knowledge of the</u> 4 <u>complainant is sufficient to provide a reasonable basis to believe that a</u> 5 <u>violation has occurred or to secure necessary evidence from other</u> 6 <u>sources.</u>

7 (b) A complaint submitted to the department shall be confidential. A 8 person submitting a complaint shall be immune from criminal or civil 9 liability of any nature, whether direct or derivative, for submitting a 10 complaint or for disclosure of documents, records, or other information 11 to the department pursuant to this section.

12 (3) The department shall retain all complaints it receives regarding failure of a hospital to provide services in compliance with the Sexual 13 Assault Emergency Care Act. The department shall provide a report 14 15 electronically to the Clerk of the Legislature by December 1 of every even-numbered year that includes, but is not limited to, the annual 16 17 number of complaints, the nature of each complaint, and the hospitals for which those complaints were made. The report shall also include the 18 19 determination of the department's investigation and any disciplinary action or penalties applied. The report shall not include any personal 20 21 health or identifying information.

22 (4)(a) If the department determines after investigation of a complaint that a hospital has failed to provide services in compliance 23 with the Sexual Assault Emergency Care Act, the department shall send to 24 25 the hospital, by certified mail to the last address shown on the records of the department, a notice setting forth the determination, the 26 particular reasons for the determination, including a specific 27 28 description of the nature of the violation and the provision of law violated, and the type of disciplinary action which is pending, which may 29 30 include the penalties described in subsection (5) of this section. Within fifteen days after service of the notice, the hospital shall notify the 31

department in writing that the hospital (i) desires to contest the notice 1 2 and requests an informal conference with a representative of the 3 department in person or by other means at the request of the hospital, 4 (ii) desires to contest the notice and requests an informal conference with a representative of a peer review organization with which the 5 department has contracted, (iii) desires to contest the notice and 6 7 requests a hearing, or (iv) does not contest the notice. If the department does not receive such notification within such fifteen-day 8 9 period, the action of the department shall be final.

10 (b) If an informal conference is requested pursuant to subdivision (4)(a)(i) or (ii) of this section, the director shall assign to conduct 11 the informal conference, respectively, a representative of the department 12 13 other than the individual who did the investigation upon which the notice 14 is based or a representative of the peer review organization. The 15 representative shall hold an informal conference with the hospital within 16 thirty days after the department's receipt of such request. Within twenty 17 working days after the conclusion of the conference, the representative shall report in writing to the department the representative's conclusion 18 19 regarding whether to affirm, modify, or dismiss the notice and the specific reasons for the conclusion and shall provide a copy of the 20 21 report to the director and the hospital.

22 (c) Within ten working days after receiving a report under subdivision (4)(b) of this section, the department shall consider such 23 24 report and affirm, modify, or dismiss the notice and shall state the 25 specific reasons for such decision, including, if applicable, the specific reasons for not adopting the conclusion of the representative as 26 27 contained in such report. The department shall provide the hospital with 28 a copy of such decision by certified mail to the last address shown in the records of the department. If the hospital desires to contest an 29 affirmed or modified notice, the hospital shall notify the director in 30 writing within five working days after receiving such decision that the 31

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hospital requests a hearing. (d) If a hospital successfully demonstrates during an informal conference or a hearing that the deficiencies should not have been cited in the notice, (i) the deficiencies shall be removed from the notice and the deficiency statement and (ii) any sanction imposed solely as a result of those cited deficiencies shall be rescinded. (e)(i) If the hospital requests a hearing under subdivision (4)(a)(iii) of this section, the department shall hold a hearing and give the hospital the right to present such evidence as may be proper. On the basis of such evidence, the director shall affirm, modify, or set aside the determination. A copy of such decision setting forth the findings of facts and the particular reasons upon which the decision is based shall be sent by either registered or certified mail to the hospital. The decision shall become final thirty days after the copy is mailed unless the hospital, within such thirty-day period, appeals the decision under subdivision (4)(f) of this section. (ii) The procedure governing hearings authorized by this section shall be in accordance with rules and regulations adopted and promulgated by the department. A full and complete record shall be kept of all proceedings. Witnesses may be subpoenaed by either party and shall be allowed fees at a rate prescribed by rule and regulation. (f) Any party to a decision of the department under the Sexual Assault Emergency Care Act may appeal such decision. The appeal shall be in accordance with the Administrative Procedure Act. (5) The department shall:

26 <u>(a) For the first substantiated complaint:</u>

(i) Issue a written warning to the hospital stating that it has
 failed to provide services in compliance with the Sexual Assault
 Emergency Care Act; and
 (ii) Require the hospital to correct the deficiency that led to the

31 <u>complaint; and</u>

-6-

LB67 2025	LB67 2025
1	(b) For the second and subsequent substantiated complaints, impose a
2	fine of one thousand dollars on the hospital:
3	<u>(i) Per sexual assault survivor who the department finds to have</u>
4	been denied medically and factually accurate and objective written and
5	oral information about emergency contraception or who the department
6	finds was not offered emergency contraception in violation of subsection
7	(1) of section 3 of this act; or
8	(ii) Per month from the date of the complaint alleging noncompliance
9	until the hospital provides training in compliance with subsection (2) of
10	section 3 of this act.
11	Sec. 5. If any section in this act or any part of any section is
12	declared invalid or unconstitutional, the declaration shall not affect

13 the validity or constitutionality of the remaining portions.