

Chairwoman Bosh and members of the Judiciary Committee,

Reproductive Health Collaborative Nebraska works with a statewide network of 10 health care agencies to advance access to high-quality reproductive healthcare for roughly 25,000 Nebraskans annually. We are here to express our opposition to LB731, a bill that will significantly undermine Nebraska's ability to retain and attract health care providers, especially in rural areas, which already struggle to attract providers.

LB731 extends the statute of limitations on medical malpractice claims to allow lawsuits up to 12 years after care was provided. This is a sharp departure from Nebraska's existing malpractice statute, which generally requires claims within two years of the act or reasonable discovery and limits all claims to within ten years of care.

Even providers who do not focus on evidence-based care for transgender patients, including those who only sign for routine prescription refills, would be impacted by this bill. Expanding liability in this way substantially increases providers' exposure to malpractice lawsuits and extends the period of legal risk. Rural Title X clinics already operate on thin margins with limited staff. This increased liability exposure translates directly into higher malpractice insurance premiums, added administrative costs, and intensifies fear of litigation, even when care is evidence-based and within standards established by professional medical associations.

Higher costs and litigation anxiety are not abstract concerns. They directly shape provider behavior, including clinicians narrowing their practice scope, reducing patient volume, or opting to leave the state altogether, to go where liability risks are lower or more predictable. In Nebraska, where we already have 19 counties without providers who can prescribe contraception, we cannot afford to lose more providers or make recruitment more difficult. Extending liability periods just as we are struggling to staff clinics, threatens access to essential care.

Legislation should support a predictable legal environment that encourages clinicians to serve in our communities, especially those practicing within Title X clinics. LB731's malpractice framework will deter practitioners from establishing or maintaining practice in Nebraska, further worsening workforce shortages in rural areas, and ultimately reducing patient access to care.

For these reasons, we urge this committee to oppose LB731 and ensure Nebraskans in every part of the state can obtain safe and comprehensive care.

Thank you for your time.

Cleo Zagurski
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