

AMENDMENTS TO LB196

(Amendments to Standing Committee amendments, AM3100)

Introduced by Bostar, 29.

1 1. Strike amendment 1 and insert the following new amendment:

2 1. Strike original sections 2, 3, 4, and 5 and insert the following
3 new sections:

4 Section 1. Section 81-8,318, Revised Statutes Cumulative Supplement,
5 2022, is amended to read:

6 81-8,318 (1) To receive compensation under the In the Line of Duty
7 Compensation Act, a claim for the compensation shall ~~must~~ be filed with
8 the Risk Manager within three years ~~one year~~ after the date of death of
9 the public safety officer who was killed in the line of duty. Such claim
10 shall be on a form prescribed by the Risk Manager and shall include:

11 (a) The name, address, and title or position of the public safety
12 officer who was killed in the line of duty;

13 (b) A copy of the form filed in accordance with subsection (4) of
14 section 81-8,317, if any. If no such form has been filed, the claim shall
15 include the name and address of the person or persons to whom
16 compensation is payable under subdivision (3)(b) of section 81-8,317;

17 (c) A sworn statement providing a full factual account of the
18 circumstances resulting in or the course of events causing the death of
19 the public safety officer; and

20 (d) Such other information as the Risk Manager reasonably requires.

21 (2) The Risk Manager shall send written notice to all claimants
22 within two weeks after the initiation of a claim indicating whether or
23 not the claim is complete. For purposes of this subsection, a claim is
24 complete if a claimant has submitted to the Risk Manager all documents
25 and information required under subsection (1) of this section. If a claim
26 is incomplete, the Risk Manager shall include in the written notice a

1 list of the documents or information which the claimant must submit in
2 order for the claim to be complete. If a claim is complete, the State
3 Claims Board shall make an investigation of the claim in the manner
4 provided in the State Miscellaneous Claims Act. Upon completion of such
5 investigation, and no later than forty-five days after receipt of a
6 complete claim, the State Claims Board shall approve or deny such claim
7 in accordance with section 81-8,300 and the Risk Manager shall send
8 written notice to the claimant stating whether the claim has been
9 approved or denied. If a claim is denied, the notice shall include the
10 reason or reasons for the denial. If a claimant is dissatisfied with a
11 denial, he or she may file an application for review with the Risk
12 Manager in accordance with subsection (2) of section 81-8,300. If a claim
13 is approved, compensation shall be paid to the claimants entitled to such
14 compensation in accordance with subsection (3) of section 81-8,300.

15 (3) This section shall apply to any claim arising on or after
16 January 1, 2022.

17 Sec. 3. Original sections 81-8,318 and 81-2017, Revised Statutes
18 Cumulative Supplement, 2022, are repealed.