

132nd MAINE LEGISLATURE

FIRST REGULAR SESSION-2025

Legislative Document

No. 156

H.P. 89

House of Representatives, January 14, 2025

An Act to Improve Notifications Related to Substance-exposed Infants

Submitted by the Department of Health and Human Services pursuant to Joint Rule 204. Reference to the Committee on Health and Human Services suggested and ordered printed.

R(+ B. Hunt

ROBERT B. HUNT Clerk

Presented by Representative MEYER of Eliot.

1	Be it enacted by the People of the State of Maine as follows:
2 3	Sec. 1. 22 MRSA §4004-B, as amended by PL 2019, c. 342, §2, is further amended to read:
4 5 6	§4004-B. Infants born affected by substance use disorder or after prenatal exposure to drugs or with a fetal alcohol spectrum disorder Investigation by department upon notice by health care provider
7 8 9 10 11	The department shall act to protect infants born identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, whether the prenatal exposure was to legal or illegal drugs, or having a fetal alcohol spectrum disorder, regardless of whether the infant is abused or neglected for whom a notification is made to the department under section 4011-B. The department shall:
12 13 14	1. Receive notifications. Receive notifications of infants who may be affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or who have a fetal alcohol spectrum disorder as required under section 4011-B;
15 16 17 18	2. Investigate. Promptly investigate review notifications received of infants born who may be affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or who have a fetal alcohol spectrum disorder as required under section 4011-B and investigate as determined to be necessary by the department to protect the infant;
19 20 21 22 23	3. Determine if infant is affected. Determine whether each infant for whom the department conducts an investigation receives a notification is affected by the infant's parent's substance use or withdrawal symptoms resulting from prenatal drug exposure, regardless of whether the parent is using legal or illegal substances, or has a fetal alcohol spectrum disorder;
24 25 26	4. Determine if infant is abused or neglected. Determine whether the infant for whom the department conducts an investigation is abused or neglected and, if so, determine the degree of harm or threatened harm in each case;
27 28 29 30 31 32 33 34 35 36	5. Develop plan for safe care. For each infant who the department determines to be affected by <u>the infant's parent's</u> substance use or withdrawal symptoms resulting from prenatal drug exposure, regardless of whether the parent is using legal or illegal substances, or who has a fetal alcohol spectrum disorder, develop, with the assistance of any health care provider involved in the <u>caregiver's parent's</u> or the child's medical or mental health care, a plan for the safe care of the infant and, in appropriate cases, refer the child or <u>caregiver parent</u> or both to a social service agency, a health care provider or a voluntary substance use disorder prevention service. For purposes of this subsection, "health care provider" means a person described in section 4011-A, subsection 1, paragraph A, subparagraphs (1) to (10), (15), (17) to (20) or (22); and
37 38	6. Comply with section 4004. For each infant who the department determines to be abused or neglected, comply with section 4004, subsection 2, paragraphs E and F.
39 40	Sec. 2. 22 MRSA §4011-B, as amended by PL 2019, c. 342, §3, is further amended to read:
41 42	§4011-B. Notification of prenatal exposure to drugs or having a fetal alcohol spectrum disorder by health care provider

1 1. Notification of prenatal exposure to drugs or having a fetal alcohol spectrum 2 disorder regarding infants affected by parent's substance use. A health care provider 3 involved in the delivery or care of an infant who the provider knows or has reasonable 4 cause to suspect has been born affected by substance use, has withdrawal symptoms that 5 require medical monitoring or care beyond standard newborn care when those symptoms 6 have resulted from or have likely resulted from prenatal drug exposure, whether the 7 prenatal exposure was to legal or illegal drugs, or has a fetal alcohol spectrum disorder 8 shall notify the department of that condition in the infant. The notification required by this 9 subsection must be made in the same manner as reports of abuse or neglect required by this 10 subchapter is affected by the infant's parent's substance use, regardless of whether the parent is using legal or illegal substances, shall notify the department. The department shall 11 adopt rules that set out the process for identifying these infants, notifying the department 12 and the department's response to such notifications. 13 14 A. This section, and any notification made pursuant to this section, may not be construed to establish a definition of "abuse" or "neglect." 15

16 B. This section, and any notification made pursuant to this section, may not be 17 construed to require prosecution for any illegal action, including, but not limited to, the 18 act of exposing a fetus to drugs or other substances.

Definition. For purposes of this section, "health care provider" means a person described in section 4011-A, subsection 1, paragraph A, subparagraphs (1) to (10), (15), (17) to (20) or (22) or any person who assists in the delivery or birth of a child for compensation, including, but not limited to, a midwife.

23The department shall adopt rules to implement this section. Rules adopted pursuant to24this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

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SUMMARY

This bill updates the law regarding notification to the Department of Health and Human Services of infants affected by their parents' substance use by granting the department rulemaking authority to set out the process for identifying these infants, notifying the department and the department's response to such notifications. The bill also creates a distinction between notifications of infants affected by their parents' substance use and reports of suspected abuse or neglect.