

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

Amend the bill by striking out all of section 3.

Amend the bill in section 4 in subsection 16 in the 3rd line (page 1, line 31 in L.D.) by striking out the following: "\$1,200,000" and inserting the following: '\$1,200,000\$1,600,000'

Amend the bill in section 5 in paragraph C in the 2nd line (page 2, line 12 in L.D.) by striking out the following: "\$1,200,000" and inserting the following: '\$1,200,000\$1,600,000'

Amend the bill by striking out all of section 6.

Amend the bill in section 8 in subsection 3 in the 2nd line (page 2, line 33 in L.D.) by striking out the following: "\$2,000,000" and inserting the following: '\$3,100,000'

Amend the bill in section 8 in subsection 3 in the 5th and 6th lines (page 2, lines 36 and 37 in L.D.) by striking out the following: "owned and operated by a physician or physician's group"

Amend the bill by striking out all of sections 10 to 13.

Amend the bill in section 14 in subsection 6 by striking out all of the first paragraph (page 3, lines 24 to 28 in L.D.) and inserting the following:

‘6. Maintenance of the record. The record created pursuant to subsection 5-A first opens on the day the department receives a letter of intent ~~certificate of need application~~. From that day, all of the record is a public record, ~~and any~~ except that the letter of intent becomes a public record upon the receipt of the letter and is available for review from the date of receipt. Any person may examine ~~that~~ all or part of the public record and purchase copies of any or all of that record during the normal business hours of the department.’

Amend the bill by inserting after section 14 the following:

‘Sec. 15. 22 MRSA §336, sub-§5 is enacted to read:

5. Major medical equipment. The commissioner shall issue a certificate of need for replacement of major medical equipment upon determining that a project meets the requirements of section 335, subsection 7.’

Amend the bill by striking out all of section 18 and inserting the following:

‘Sec. 18. 22 MRSA §343, as enacted by PL 2001, c. 664, §2, is amended to read:

§ 343. Public information

The department shall prepare and publish at least annually a report on its activities conducted pursuant to this Act. The annual report must include information on all certificates of need granted and denied and on the assessment of penalties. With regard to all certificates granted on a conditional basis, the report must include a summary of information reported pursuant to section 332 and any accompanying statements by the commissioner or department staff submitted regarding the reports.

Sec. 19. 22 MRSA §350, as enacted by PL 2001, c. 664, §2, is repealed and the following enacted in its place:

§ 350. Penalty

1. Violation. An individual, partnership, association, organization, corporation or trust that violates any provision of this chapter or any rate, rule or regulation pursuant to this chapter is subject to a fine imposed in conformance with the Maine Administrative Procedure Act and payable to the State of not more than \$10,000. The department may hold these funds in a special revenue account that may be used only to support certificate of need reviews, such as for hiring expert analysts on a short-term consulting basis.

2. Administrative hearing and appeal. To contest the imposition of a fine under this section, the individual, partnership, association, organization, corporation or trust shall submit to the department a written request for an administrative hearing within 10 days of notice of imposition of a fine pursuant to this section. Judicial appeal must be in accordance with Title 5, chapter 375, subchapter 7.'

Amend the bill by striking out all of section 20.

Amend the bill by striking out all of section 22.

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

The amendment is the majority report of the committee. The amendment changes the bill by:

1. Retaining the current exemption from certificate of need for medical office buildings owned or subsidized by a hospital or a hospital's parent company;
2. Bringing the threshold amounts up to the current levels, which brings the thresholds for major medical equipment and new technology to \$1,600,000 and the threshold for capital expenditures to \$3,100,000;
3. Eliminating the exemption for the replacement of major medical equipment from the certificate of need requirements and instead applying a simplified review and approval process for certificate of need;
4. Removing provisions in the bill related to energy-efficient projects for nursing facilities;
5. Lowering the proposed increase in the penalty for violations from \$50,000 to \$10,000; and
6. Removing the provision for a combined application for applicants seeking both a certificate of need and a certificate of public advantage.