

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 the emergency preamble.

Amend the bill in Part A in section 1 in §125 in the first paragraph in the 3rd line (page 1, line 26 in L.D.) by striking out the following: "alcoholism" and inserting the following: '~~alcoholism~~appropriate'

Amend the bill in Part A by striking out all of section 5 and inserting the following:

‘Sec. A-5. 5 MRSA §957, sub-§1, as enacted by PL 1989, c. 857, §19, is amended to read:

1. Assessment and referral. The program shall provide assessment and referral services to employees whose work performance has been affected by behavioral or medical disorders including, but not limited to, ~~alcoholism and drug abuse~~substance use disorder, misuse of ~~other~~ drugs, emotional problems, family disorders and financial, legal, marital and any other stresses. The major elements of the program consist of the following:

- A. An assessment interview;
- B. Referral to appropriate treatment;
- C. Follow-up;
- D. Coordination of a benefit package;
- E. Continuous care;
- F. Maintenance of confidentiality of client records; and
- G. Education of state employees.’

Amend the bill in Part A in section 6 by striking out all of subsection 6 (page 4, lines 14 to 20 in L.D.) and inserting the following:

‘6. Social service. "Social service" means any children's, youth, adult or elderly service and ~~alcoholism~~substance use disorder, community action, developmental disability, ~~drug or substance abuse~~, home-heating assistance, juvenile, mental health, intellectual disability, older Americans, poverty, rehabilitation, transportation, weatherization or other social service that may be defined in the future and that is operated by the departments or the division utilizing state-administered funds, including related health and medical services and income supplementation programs.’

Amend the bill in Part A by inserting after section 12 the following:

‘Sec. A-13. 5 MRSA §20003, sub-§1, as amended by PL 1991, c. 601, §3, is repealed.

Amend the bill in Part A by inserting after section 17 the following:

‘Sec. A-18. 5 MRSA §20003, sub-§12, as enacted by PL 1989, c. 934, Pt. A, §3, is repealed.

Amend the bill in Part A in section 18 by striking out all of subsection 17-A (page 6, lines 19 to 22 in L.D.) and inserting the following:

17-A. Person with substance use disorder. "Person with substance use disorder" means a person who, due to the use of alcohol or a drug, has a clinical and significant functional impairment, including a health problem or a disability or an inability to meet major responsibilities at work, home or school. A substance use disorder may be mild, moderate or severe as determined by the diagnostic criteria met by the person.'

Amend the bill in Part A by striking out all of sections 20 to 22 and inserting the following:

Sec. A-20. 5 MRSA §20003, sub-§21, as enacted by PL 1989, c. 934, Pt. A, §3, is repealed.

Sec. A-21. 5 MRSA §20003, sub-§21-A is enacted to read:

21-A. Substance use prevention. "Substance use prevention" means all facilities, programs or services relating to substance use control, education, rehabilitation, research, training and treatment, including reinforcing health behaviors and lifestyles and reducing risks contributing to alcohol, tobacco and other drug misuse. "Substance use prevention" does not include any function defined in subsection 19 as "prevention of drug traffic."

Sec. A-22. 5 MRSA §20003, sub-§22, as enacted by PL 1989, c. 934, Pt. A, §3, is amended to read:

22. Treatment. "Treatment" means the broad range of emergency, outpatient, intermediate and inpatient services and care, including career counseling, diagnostic evaluation, employment, health, medical, psychiatric, psychological, recreational, rehabilitative, social service care, treatment and vocational services, that may be extended to an alcoholic, intoxicated person, a drug abuser, user, drug addict, drug-dependent a person with substance use disorder or a person in need of assistance due to the use of a dependency-related drug.'

Amend the bill in Part A in section 23 in §20005 by striking out all of subsection 12-A (page 10, lines 4 to 8 in L.D.) and inserting the following:

12-A. Training programs. Provide or assist in the provision of training programs for all persons in the field of treating alcoholics and drug abusers persons with substance use disorder, persons engaged in the prevention of alcohol and other drug abuses substance use disorder or any other organization or individual in need of or requesting training or other educational information related to alcohol or other drug abuses substance use disorder;'

Amend the bill in Part A in section 29 in §20008 by striking out all of subsection 3 (page 12, lines 7 to 10 in L.D.) and inserting the following:

3. Treatment. The department shall provide for adequate and appropriate treatment for alcoholics, drug abusers, users, drug addicts persons with substance use disorder and drug-dependent persons admitted under sections 20043 to and 20044. Treatment may not be provided at a correctional institution, except for inmates.'

Amend the bill in Part A in section 32 in §20022 by striking out all of subsection 1 (page 13, lines 15 to 17 in L.D.) and inserting the following:

‘1. Research. Conducting research on the causes and nature of drugs, ~~drug abusers~~substance use or people who are dependent on drugs, ~~especially alcoholics and intoxicated persons~~or alcohol;’

Amend the bill in Part A in section 32 in §20022 by striking out all of subsection 4 (page 13, lines 23 to 30 in L.D.) and inserting the following:

‘4. Treatment facilities. Maintaining an inventory of the types and quantity of ~~drug~~substance use prevention facilities, programs and services available or provided under public or private auspices to ~~drug addicts, persons with substance use disorder and drug abusers and drug-dependent persons, especially alcoholics and intoxicated persons~~users. This function includes the unduplicated count, locations and characteristics of persons receiving treatment, as well as the frequency of admission and readmission and the frequency and duration of treatment of those persons. The inventory must include the amount, type and source of resources for ~~drug abusers~~substance use disorder prevention.’

Amend the bill in Part A by striking out all of section 33 (page 13, lines 31 to 40 and page 14, lines 1 and 2 in L.D.) and inserting the following:

‘Sec. A-33. 5 MRSA §20023, first ¶, as amended by PL 2011, c. 657, Pt. AA, §32, is further amended to read:

To the fullest extent possible, the Commissioner of Education shall coordinate all elementary and secondary school ~~alcohol and drug abusers~~substance use disorder education programs administered by the Department of Education and funded under the federal Drug-Free Schools and Communities Act of 1986 with programs administered by the Department of Health and Human Services. The Commissioner of Education shall participate in planning, budgeting and evaluation of ~~alcohol and other drug abusers~~substance use disorder programs, ~~in cooperation with the Substance Abuse Advisory Group,~~ and ensure that ~~alcohol and drug abusers~~substance use disorder education programs administered by the Department of Education that involve any community participation are coordinated with available treatment services.’

Amend the bill in Part A in section 35 in §20043 in the first 2 lines (page 14, lines 28 and 29 in L.D.) by striking out the following: "**alcoholics, drug users, persons with substance use disorder and drug-dependent persons**" and inserting the following: '**drug users and persons with substance use disorder**'

Amend the bill in Part A in section 35 in §20043 by striking out all of the first paragraph (page 14, lines 30 to 33 in L.D.) and inserting the following:

‘The department shall adopt rules for acceptance of persons into a treatment program, considering available treatment resources and facilities, for the purpose of early and effective treatment of ~~alcoholics, drug abusers, drug addicts and drug-dependent persons~~users and persons with substance use disorder.’

Amend the bill in Part A in section 36 in §20044 in the first 2 lines (page 15, lines 26 and 27 in L.D.) by striking out the following: "**alcoholics, drug users, persons with substance use disorder and drug-dependent persons**" and inserting the following: '**drug users and persons with substance use disorder**'

Amend the bill in Part A in section 36 in §20044 by striking out all of subsection 1 (page 15, lines 28 to 30 in L.D.) and inserting the following:

'1. Voluntary treatment. ~~An alcoholic, drug abuser, drug addict or drug-dependent person~~A drug user or person with substance use disorder may apply for voluntary treatment directly to an approved treatment facility.'

Amend the bill in Part A by inserting after section 37 the following:

'Sec. A-38. 5 MRSA §20051, sub-§1, as amended by PL 2009, c. 299, Pt. A, §1, is further amended to read:

1. Laws. A county, municipality or other political subdivision may not adopt or enforce a local law, ordinance, regulation or rule having the force of law that includes drinking, ~~being a person with alcoholism~~ or being found in an intoxicated condition as one of the elements of an offense giving rise to a criminal or civil penalty or sanction.'

Amend the bill in Part A in section 40 in subsection 3 in paragraph J by striking out all of subparagraph (5) (page 17, lines 23 to 25 in L.D.) and inserting the following:

(5) ~~Persons affected by or recovering from alcoholism, chronic intoxication, drug abuse or drug dependency, evidenced by~~in recovery from substance use disorder for a minimum of 3 years of sobriety or abstinence from drug abuse.

Amend the bill in Part A in section 41 in §20067 in subsection 2 in the last line (page 17, line 36 in L.D.) by striking out the following: ", including alcoholism and intoxication" and inserting the following: '~~including alcoholism and intoxication~~'

Amend the bill in Part A in section 41 in §20067 by striking out all of subsections 3 and 4 (page 18, lines 1 to 19 in L.D.) and inserting the following:

'3. Serve as advocate; review and evaluate; inform the public. The commission shall serve as an advocate on ~~alcoholism and drug abuses~~substance use disorder prevention, promoting and assisting activities designed to meet the problems of ~~drug abuse and drug dependence~~substance use disorder at the national and state levels. With the support of the department, the commission shall review and evaluate on a continuing basis state and federal policies and programs relating to ~~drug abuses~~substance use disorder and other activities conducted or assisted by state departments or agencies that affect persons ~~who abuse or are dependent on~~with substance use disorder or who use drugs. In cooperation with the department, the commission shall keep the public informed by collecting and disseminating

information, by conducting or commissioning studies and publishing the results of those studies, by issuing publications and reports and by providing public forums, including conferences and workshops.

4. Report to the Legislature. The commission shall report annually to the joint standing committee of the Legislature having jurisdiction over health and human services matters and the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs on or before the last business day of each year. The report must include developments and needs related to ~~drug-abuse~~substance use disorder prevention, ~~including alcoholism and intoxication,~~ and significant policy matters relating to ~~substance abuse~~substance use disorder.'

Amend the bill in Part A by striking out all of sections 45 and 46 (page 19, lines 5 to 30 in L.D.) and inserting the following:

'Sec. A-45. 8 MRSA §1001, sub-§13, as enacted by PL 2003, c. 687, Pt. A, §5 and affected by Pt. B, §11, is repealed.

Sec. A-46. 8 MRSA §1016, sub-§2, ¶E, as enacted by PL 2003, c. 687, Pt. A, §5 and affected by Pt. B, §11, is amended to read:

E. Is not a fugitive from justice, a drug ~~abuser~~user, a ~~drug addict,~~ a ~~drug-dependent~~ person with substance use disorder, an illegal alien or a person who was dishonorably discharged from the Armed Forces of the United States;'

Amend the bill in Part A in section 49 in paragraph C by striking out all of subparagraph (6) (page 22, lines 25 and 26 in L.D.) and inserting the following:

,

(6) The defendant's past conduct, including any history ~~relating to drug or alcohol abuse~~of substance use disorder;

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Amend the bill in Part A by striking out all of section 75 (page 30, lines 23 to 31 in L.D.) and inserting the following:

'Sec. A-75. 22 MRSA §3174-VV, last ¶, as reallocated by RR 2011, c. 2, §27, is amended to read:

The department shall adopt rules to implement this section. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. Prior to adopting rules under this section, the department shall seek input from stakeholders and experts in the field of ~~substance abuse addiction and recovery~~substance use disorder, including, but not limited to, representatives of the ~~Office of Substance Abuse~~Department of Health and Human Services and individuals with expertise in medication-assisted treatment.'

Amend the bill in Part A by striking out all of sections 91 to 94 and inserting the following:

'Sec. A-91. 24 MRSA §2329, as amended by PL 2011, c. 320, Pt. A, §2, is further amended to read:

§ 2329. Equitable health care for substance use disorder treatment

1. Purpose. The Legislature recognizes that ~~alcoholism and drug dependency~~ substance use disorder constitutes a major health ~~problems~~ problem in the State and in the Nation. The Legislature further recognizes that ~~alcoholism is a disease and that alcoholism and drug dependency~~ substance use disorder is a disease that can be effectively treated. As such, ~~alcoholism and drug dependency~~ warrants substance use disorder warrants the same attention from the health care industry as other serious diseases and illnesses. The Legislature further recognizes that health care contracts, at times, fail to provide adequate benefits for the treatment of ~~alcoholism and drug dependency~~ substance use disorder, which results in more costly health care for treatment of complications caused by the lack of early intervention and other treatment services for persons suffering from ~~these illnesses~~ substance use disorder. This situation causes a higher health care, social, law enforcement and economic cost to the citizens of this State than is necessary, including the need for the State to provide treatment to some subscribers at public expense. To assist the many citizens of this State who suffer from ~~these illnesses~~ this illness in a more ~~cost effective~~ cost-effective way, the Legislature declares that certain health care coverage providing benefits for the treatment of the illness of ~~alcoholism and drug dependency~~ substance use disorder must be included in all group health care contracts.

2. Definitions. As used in this section, unless the context indicates otherwise, the following terms have the following meanings.

A. "Outpatient care" means care rendered by a state-licensed, approved or certified detoxification, residential treatment or outpatient program, or partial hospitalization program on a periodic basis, including, but not limited to, patient diagnosis, assessment and treatment, individual, family and group counseling and educational and support services.

B. "Residential treatment" means services at a facility that provides care 24 hours daily to one or more patients, including, but not limited to, the following services: ~~Room~~ room and board; medical, nursing and dietary services; patient diagnosis, assessment and treatment; individual, family and group counseling; and educational and support services, including a designated unit of a licensed health care facility providing any and all other services specified in this paragraph to patients with the ~~illnesses of alcoholism and drug dependency~~ substance use disorder.

C. "Treatment plan" means a written plan initiated at the time of admission, approved by a Doctor of Medicine, a Doctor of Osteopathy or a Licensed Substance Abuse Counselor employed by a certified or licensed ~~substance abuse~~ substance use disorder program, including, but not limited to, the patient's medical, ~~drug and alcoholism~~ substance use disorder history; record of physical examination; diagnosis; assessment of physical capabilities; mental capacity; orders for medication, diet and special needs for the patient's health or safety and treatment, including medical, psychiatric, psychological, social services, individual, family and group counseling; and educational, support and referral services.

3. Requirement. Every nonprofit hospital or medical service organization ~~which~~that issues group health care contracts providing coverage for hospital care to residents of this State shall provide benefits as required in this section to any subscriber or other person covered under those contracts for the treatment of ~~alcoholism and other drug dependency~~substance use disorder pursuant to a treatment plan.

4. Services; providers. Each group contract ~~shall~~must provide, at a minimum, for the following coverage, pursuant to a treatment plan:

A. Residential treatment at a hospital or free-standing residential treatment center ~~which~~that is licensed, certified or approved by the State; and

B. Outpatient care rendered by state licensed, certified or approved providers who have contracted with the nonprofit hospital or medical service organization under terms and conditions ~~which~~that the organization ~~deems~~considers satisfactory to its membership.

Treatment or confinement at any facility ~~shall~~may not preclude further or additional treatment at any other eligible facility, provided that the benefit days used do not exceed the total number of benefit days provided for under the contract.

5. Exceptions. This section ~~shall~~does not apply to employee group insurance contracts issued to employers with 20 or fewer employees insured under the group contract or to group contracts designed primarily to supplement the Civilian Health and Medical Program of the Uniformed Services, as defined in the United States Code, Title 10, Section 1072, subsection 4.

6. Limits; coinsurance; deductibles. Any policy or contract ~~which~~that provides coverage for the services required by this section may contain provisions for maximum benefits and coinsurance, and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.

7. Notice. At the time of delivery or renewal, the nonprofit hospital or medical service organization shall provide written notification to all individuals eligible for benefits under group policies or contracts of these ~~alcoholism and drug dependency~~substance use disorder benefits.

8. Confidentiality. ~~Alcoholism and drug~~Substance use disorder treatment patient records are confidential.

9. Reports to the Superintendent of Insurance. Every nonprofit hospital or medical service organization subject to this section shall report its experience for each calendar year beginning with 1984 to the superintendent not later than April 30th of the following year. The report ~~shall~~must be in a form prescribed by the superintendent and ~~shall~~must include the amount of claims paid in this State for the services required by this section and the total amount of claims paid in this State for group health care contracts, both separated between those paid for inpatient and outpatient services. The superintendent shall compile this data for all nonprofit hospital or medical service organizations in an annual report.

10. Application; expiration. The requirements of this section shall apply to all policies and any certificates or contracts executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1984. For purposes of this section, all contracts shall be deemed to be renewed no later than the next yearly anniversary of the contract date.

Sec. A-92. 24-A MRSA §2842, as corrected by RR 2015, c. 2, §14, is amended to read:

§ 2842. Equitable health care for substance use disorder treatment

1. Purpose. The Legislature recognizes that ~~alcoholism and drug dependency~~ substance use disorder constitutes a major health ~~problems~~ problem in the State and in the Nation. The Legislature further recognizes that ~~alcoholism is a disease and that alcoholism and drug dependency~~ substance use disorder is a disease that can be effectively treated. As such, ~~alcoholism and drug dependency~~ warrants substance use disorder warrants the same attention from the health care industry as other serious diseases and illnesses. The Legislature further recognizes that health insurance contracts, at times, fail to provide adequate benefits for the treatment of ~~alcoholism and drug dependency~~ substance use disorder, which results in more costly health care for treatment of complications caused by the lack of early intervention and other treatment services for persons suffering from ~~these illnesses~~ substance use disorder. This situation causes a higher health care, social, law enforcement and economic cost to the citizens of this State than is necessary, including the need for the State to provide treatment to some insureds at public expense. To assist the many citizens of this State who suffer from ~~these illnesses~~ this illness in a more ~~cost-effective~~ cost-effective way, the Legislature declares that certain health insurance coverage providing benefits for the treatment of the illness of ~~alcoholism and drug dependency~~ substance use disorder must be included in all group health insurance contracts.

2. Definitions. As used in this section, unless the context indicates otherwise, the following terms have the following meanings.

A. "Outpatient care" means care rendered by a state-licensed, approved or certified detoxification, residential treatment or outpatient program, or partial hospitalization program on a periodic basis, including, but not limited to, patient diagnosis, assessment and treatment, individual, family and group counseling and educational and support services.

B. "Residential treatment" means services at a facility that provides care 24 hours daily to one or more patients, including, but not limited to, the following services: ~~Room~~ room and board; medical, nursing and dietary services; patient diagnosis, assessment and treatment; individual, family and group counseling; and educational and support services, including a designated unit of a licensed health care facility providing any and all other services specified in this paragraph to patients with ~~the illnesses of alcoholism and drug dependency~~ substance use disorder.

C. "Treatment plan" means a written plan initiated at the time of admission, approved by a Doctor of Medicine, a Doctor of Osteopathy or a Registered Substance Abuse Counselor employed by a certified or licensed ~~substance abuse~~ substance use disorder program, including, but not limited to, the patient's medical, ~~drug and alcoholism~~ substance use disorder history; record of physical examination; diagnosis; assessment of physical capabilities; mental capacity; orders for medication, diet and

special needs for the patient's health or safety and treatment, including medical, psychiatric, psychological, social services, individual, family and group counseling; and educational, support and referral services.

3. Requirement. Every insurer ~~which~~that issues group health care contracts providing coverage for hospital care to residents of this State shall provide benefits as required in this section to any subscriber or other person covered under those contracts for the treatment of ~~alcoholism and other drug dependency~~substance use disorder pursuant to a treatment plan.

4. Services; providers. Each group contract ~~shall~~must provide, at a minimum, for the following coverage, pursuant to a treatment plan:

A. Residential treatment at a hospital or free-standing residential treatment center ~~which~~that is licensed, certified or approved by the State; and

B. Outpatient care rendered by state licensed, certified or approved providers.

Treatment or confinement at any facility ~~shall~~may not preclude further or additional treatment at any other eligible facility, provided that the benefit days used do not exceed the total number of benefit days provided for under the contract.

5. Exceptions. This section ~~shall~~does not apply to employee group insurance policies issued to employers with 20 or fewer employees insured under the group policy or to group policies designed primarily to supplement the Civilian Health and Medical Program of the Uniformed Services, as described in the United States Code, Title 10, Section 1072, subsection 4.

6. Limits; coinsurance; deductibles. Any policy or contract ~~which~~that provides coverage for the services required by this section may contain provisions for maximum benefits and coinsurance, and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.

7. Notice. At the time of delivery or renewal, the group health insurer shall provide written notification to all individuals eligible for benefits under group policies or contracts of ~~these alcoholism and drug dependency~~substance use disorder benefits.

8. Confidentiality. ~~Alcoholism and drug~~Substance use disorder treatment patient records are confidential.

9. Reports to the Superintendent of Insurance. Every insurer subject to this section shall report its experience for each calendar year beginning with 1984 to the superintendent not later than April 30th of the following year. The report ~~shall~~must be in a form prescribed by the superintendent and ~~shall~~must include the amount of claims paid in this State for the services required by this section and the total amount of claims paid in this State for group health care contracts, both separated between those paid for inpatient and outpatient services. The superintendent shall compile this data for all insurers in an annual report.

10. Application; expiration. The requirements of this section shall apply to all policies and any certificates or contracts executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1984. For purposes of this section, all contracts shall be deemed to be renewed no later than the next yearly anniversary of the contract date.'

Amend the bill in Part A by inserting after section 95 the following:

'**Sec. A-96. 24-A MRSA §4222-B, sub-§14**, as amended by PL 2001, c. 258, Pt. G, §3, is further amended to read:

14. The requirement of filing a report of experience of claims payment for ~~alcoholism and drug dependency~~ substance use disorder treatment in the format prescribed by section 2842, subsection 9; for chiropractic services in the format prescribed by section 2748, subsection 3 and section 2840-A, subsection 3; and for breast cancer screening services in the format prescribed by section 2745-A, subsection 4 and section 2837-A, subsection 4 applies to health maintenance organizations.'

Amend the bill in Part A by inserting after section 98 the following:

'**Sec. A-99. 25 MRSA §2002, sub-§5**, as amended by PL 1993, c. 524, §1, is repealed.

Amend the bill in Part A in section 99 in paragraph D in subparagraph (5) by striking out all of division (r) (page 40, lines 9 and 10 in L.D.) and inserting the following:

(r) Are you a drug abuser, drug addict or drug dependent person user or a person with substance use disorder?

Amend the bill in Part A by inserting after section 112 the following:

'**Sec. A-113. 28-A MRSA §2519, sub-§3, ¶B**, as enacted by PL 1987, c. 45, Pt. A, §4, is amended to read:

B. The course provides instruction and the development of skills in the following subject matters:

- (1) Identification of intoxicated individuals and minors;
- (2) Intervention to prevent excessive consumption of alcohol by such methods as serving food and encouraging the consumption of nonalcoholic beverages;
- (3) Making consumers aware of their condition and their responsibility for driving in an intoxicated condition and providing alternate transportation when available;
- (4) Knowledge of state laws relating to the sale and distribution of alcohol and the legal responsibilities of servers and consumers;

(5) Knowledge of the effect of alcohol by volume and timing of intake in relation to an individual's weight;

(6) Examination of proof of age identification and methods of detecting false or altered age identification documents;

(7) Policies and practices to prevent the sale or service of alcohol to minors and visibly intoxicated individuals; and

(8) The effects of alcohol on the human body, including the disease concept of ~~alcoholism~~substance use disorder.

Amend the bill in Part A by striking out all of section 128 (page 64, lines 8 to 14 in L.D.) and inserting the following:

‘Sec. A-128. 32 MRSA §6203-A, sub-§1, as enacted by PL 2007, c. 402, Pt. U, §2, is amended to read:

1. Agency. "Agency" means an establishment, organization or institution, public or private, that is licensed by the Department of Health and Human Services and that offers, purports to offer, maintains or operates one or more programs for the assessment, diagnosis, care, treatment or rehabilitation of individuals who are suffering physically, emotionally or psychologically from ~~the abuse of alcohol or other drugs~~substance use disorder.’

Amend the bill in Part A by striking out all of section 130 (page 64, lines 25 to 29 in L.D.) and inserting the following:

‘Sec. A-130. 32 MRSA §6203-A, sub-§7, as enacted by PL 2007, c. 402, Pt. U, §2, is amended to read:

7. Consumer of alcohol and drug counseling services. "Consumer of alcohol and drug counseling services" means a person affected by or recovering from ~~alcoholism or other drug abuses~~substance use disorder.’

Amend the bill in Part A in section 138 in paragraph F in subparagraph (5) by striking out all of division (h) (page 67, lines 10 and 11 in L.D.) and inserting the following:

‘

(h) Are you a drug abuser, drug addict or drug-dependent person user or a person with substance use disorder?

’

Amend the bill in Part A by striking out all of section 139 (page 67, lines 34 to 37 in L.D.) and inserting the following:

‘Sec. A-139. 32 MRSA §9410-A, sub-§1, ¶H, as enacted by PL 1987, c. 170, §12, is amended to read:

H. Is not a drug abuser, drug addict or drug-dependent person or a person with substance use disorder;’

Amend the bill in Part A in section 152 in paragraph D in the first line (page 70, line 26 in L.D.) by striking out the following: "alcoholism," and inserting the following: '~~alcoholism,~~'

Amend the bill in Part A by striking out all of section 158 (page 72, lines 5 to 21 in L.D.).

Amend the bill in Part B by striking out all of section 1 and inserting the following:

‘Sec. B-1. Executive branch rules, forms, policies and publications. On or after the effective date of this section, when adopting or amending rules and developing or publishing forms, policies and publications, all executive branch entities shall replace references to "substance abuse" with references to "substance use disorder" and shall ensure that language referring to persons with substance use disorder is consistent with respectful, "person first," language.’

Amend the bill by striking out all of the emergency clause.

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

SUMMARY

This amendment removes statutory references to "alcoholic" and "alcoholism" as "substance use disorder" includes both alcohol and drug dependence. It also removes statutory references to "drug-dependent person" as this term is included in the term "person with a substance use disorder." It changes the definition of "person with substance use disorder" that is in the bill to a definition similar to that used in the clinical setting. It also removes provisions from the bill that rename the Office of Substance Abuse and Mental Health in the Department of Health and Human Services. The amendment requires that all executive agencies, rather than only the Department of Health and Human Services, replace references to "substance abuse" with "substance use disorder" in rules, forms, policies and publications and specifies that those changes must occur as agencies amend or create those documents. The amendment also removes the emergency preamble and emergency clause.

FISCAL NOTE REQUIRED

(See attached)