

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 inserting after the enacting clause and before section 1 the following:

‘**Sec. 1. 22 MRSA §1823**, as amended by PL 2017, c. 407, Pt. A, §73, is further amended to read:

### **§ 1823. Treatment of minors**

Any hospital licensed under this chapter or alcohol or drug treatment facility licensed pursuant to section 7801 that provides facilities to a minor in connection with the prevention of a sexually transmitted infection or the treatment of that minor for venereal disease a sexually transmitted infection or treatment of that minor for substance use or for the collection of sexual assault evidence through a sexual assault forensic examination is under no obligation to obtain the consent of that minor's parent or guardian or to inform that parent or guardian of the provision of such facilities so long as such facilities have been provided at the direction of the person or persons referred to in Title 32, sections 2595, 3292, 3817, 6221 or 7004. The hospital shall notify and obtain the consent of that minor's parent or guardian if that hospitalization continues for more than 16 hours.

**Sec. 2. 22 MRSA §1901**, as enacted by PL 1973, c. 624, §1, is amended to read:

### **§ 1901. Legislative intent**

The Legislature finds that family planning services are not sufficiently available as a practical matter to many persons in this State; ~~that unwanted eonception~~ pregnancy may place severe medical, emotional, social and economic burdens on the family unit and that it is desirable that inhibitions and restrictions to the delivery of family planning services be reduced so that all persons desiring and needing such services ~~shall~~ have ready and practicable access ~~theretoto the services~~ in appropriate settings sensitive to ~~their persons'~~ needs and beliefs. The Legislature therefore declares that it is consistent with public policy to make available comprehensive medical knowledge, assistance and services relating to family planning.’

Amend the bill in section 1 in §1902 in subsection 4 in the 5th line from the end (page 1, line 34 in L.D.) by striking out the following: "including"

Amend the bill in section 1 in §1902 in subsection 4 in the 2nd and 3rd lines from the end (page 1, lines 36 and 37 in L.D.) by striking out the following: "screening, testing, counseling and vaccinating for" and inserting the following: 'prevention or treatment of'

Amend the bill in section 2 in §1903 in subsection 3 in the last line (page 2, line 17 in L.D.) by striking out the following: "and" and inserting the following: 'and'

Amend the bill in section 2 in §1903 in subsection 4 in the 2nd line (page 2, line 19 in L.D.) by striking out the following: "physician ~~shall~~ may not" and inserting the following: 'physician shall ~~health care practitioner may not~~'

Amend the bill in section 2 in §1903 in subsection 4 in the last line (page 2, line 21 in L.D.) by striking out the following: "." and inserting the following: '.; and'

Amend the bill in section 2 in §1903 by adding after subsection 4 the following:

**‘5. Scope of practice.** Nothing in this chapter changes the scope of practice of a health care practitioner.’

Amend the bill by inserting after section 2 the following:

**‘Sec. 3. 22 MRSA §1904,** as enacted by PL 1973, c. 624, §1 and amended by PL 2003, c. 689, Pt. B, §§6 and 7, is repealed and the following enacted in its place:

### **§ 1904. Rules**

The commissioner is authorized and directed to adopt rules and establish programs to enable the department, either directly or under contractual arrangements with other organizations, to promptly implement this chapter.

**Sec. 4. 22 MRSA §1905,** as enacted by PL 1973, c. 624, §1 and amended by PL 1975, c. 293, §4 and PL 2003, c. 689, Pt. B, §6, is further amended to read:

### **§ 1905.Funds**

The ~~Department of Health and Human Services~~department is authorized to receive and disburse such funds as may be available to it for family planning services to any nonprofit organization, public or private, engaged in providing such services. Family planning programs administered by the ~~Department of Health and Human Services~~department may be developed in consultation, in coordination or on a contractual basis; with other family planning agencies in this State, including, but not limited to, the Family Planning Association of Maine, Inc., and its affiliates.

**Sec. 5. 22 MRSA §1906,** as enacted by PL 1973, c. 624, §1 and amended by PL 1975, c. 293, §4 and PL 2003, c. 689, Pt. B, §§6 and 7, is repealed and the following enacted in its place:

### **§ 1906. Availability**

To the extent family planning funds are available, the department shall provide family planning services to medically indigent persons eligible for such services as determined by rules adopted by the commissioner. Family planning services must also be available to all others who are unable to reasonably obtain these services privately, at a reasonable cost to be determined by the rules adopted by the commissioner. Any funds so collected must be retained by the department for the support of these services.’

Amend the bill by striking out all of section 4 and inserting the following:

**‘Sec. 4. 22 MRSA §1908,** as enacted by PL 1973, c. 624, §1, is repealed and the following enacted in its place:

### **§ 1908. Minors**

Notwithstanding section 1503, family planning services may be furnished to any minor by a health care practitioner. The health care practitioner is under no obligation to obtain the consent of the minor's parent or guardian or to inform the parent or guardian of the prevention or treatment under this section. Nothing in this section may be construed to prohibit the health care practitioner rendering the prevention services or treatment from informing the parent or guardian.

**Sec. 5. 32 MRSA §2595**, as amended by PL 1999, c. 90, §3, is further amended to read:

### **§ 2595. Treatment of minors**

An individual licensed under this chapter who renders medical care to a minor for the prevention or treatment of venereal disease a sexually transmitted infection or abuse of drugs or alcohol treatment of substance use or for the collection of sexual assault evidence through a sexual assault forensic examination is under no obligation to obtain the consent of the minor's parent or guardian or to inform the parent or guardian of the prevention or treatment or collection. Nothing in this section may be construed so as to prohibit the licensed individual rendering the prevention services or treatment or collection from informing the parent or guardian. For purposes of this section, "abuse of drugs substance use" means the use of drugs or alcohol solely to induce a stimulant, depressant or hallucinogenic effect upon the higher functions of the central nervous system and not as a therapeutic agent recommended by a practitioner in the course of medical treatment.

**Sec. 6. 32 MRSA §3292**, as amended by PL 2017, c. 407, Pt. A, §128, is further amended to read:

### **§ 3292. Treatment of minors**

An individual licensed under this chapter who renders medical care to a minor for the prevention or treatment of venereal disease a sexually transmitted infection or treatment of substance use or for the collection of sexual assault evidence through a sexual assault forensic examination is under no obligation to obtain the consent of the minor's parent or guardian or to inform the parent or guardian of the prevention or treatment or collection. This section may not be construed to prohibit the licensed individual rendering the prevention services or treatment or collection from informing the parent or guardian. For purposes of this section, "substance use" means the use of drugs or alcohol solely for their stimulant, depressant or hallucinogenic effect upon the higher functions of the central nervous system and not as a therapeutic agent recommended by a practitioner in the course of medical treatment.'

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

## **SUMMARY**

This amendment, which is the majority report of the committee, amends the bill to remove conflicts with other provisions in statute relating to consent by minors. Current law provides that the treatment of a minor for a sexually transmitted infection does not require the consent of the minor's parent or guardian. This amendment provides that the prevention or treatment of a sexually transmitted infection does not require the consent of the minor's parent or guardian. Current law also provides that family planning services may be provided to a minor who is a parent, who is married, with the consent of the

minor's guardian or if the minor will suffer probable health hazards. This amendment provides that a health care provider may provide family planning services to a minor without requiring the consent of the minor's parent or guardian, just as with sexually transmitted infections. This amendment clarifies that the provisions of the Maine Revised Statutes, Title 22, chapter 406 regarding family planning services are not intended to change the scope of practice of a health care provider. It also makes other technical changes.