1	L.D. 257
2	Date: (Filing No. H-)
3	HEALTH AND HUMAN SERVICES
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5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	126TH LEGISLATURE
8	FIRST REGULAR SESSION
9 10	COMMITTEE AMENDMENT "" to H.P. 194, L.D. 257, Bill, "An Act To Protect Newborns Exposed to Drugs or Alcohol"
11 12	Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:
13	'Sec. 1. 22 MRSA §4002, sub-§5-B is enacted to read:
14 15 16 17	5-B. Fetal alcohol spectrum disorders. "Fetal alcohol spectrum disorders" means conditions whose effects include having facial characteristics, growth restriction, central nervous system abnormalities or other characteristics consistent with prenatal alcohol exposure identified in a child from birth to 12 months of age.
18 19	Sec. 2. 22 MRSA §4004-B, as enacted by PL 2003, c. 673, Pt. Z, §1, is amended to read:
20 21	§4004-B. Infants born affected by substance abuse or after prenatal exposure to drugs or with fetal alcohol spectrum disorders
22 23 24 25 26	The department shall act to protect infants born identified as being affected by illegal substance abuse or suffering from, demonstrating withdrawal symptoms resulting from prenatal drug exposure, whether or not the prenatal exposure was to legal or illegal drugs, or having fetal alcohol spectrum disorders, regardless of whether or not the infant is abused or neglected. The department shall:
27 28 29 30	1. Receive notifications. Receive <u>reports notifications</u> of infants who may be affected by illegal substance abuse or <u>suffering from demonstrating</u> withdrawal symptoms resulting from prenatal drug exposure <u>or who have fetal alcohol spectrum disorders;</u>
31 32 33 34	2. Investigate. Promptly investigate <u>all reports notifications</u> received of infants born who may be affected by illegal substance abuse or <u>suffering from demonstrating</u> withdrawal symptoms resulting from prenatal drug exposure <u>or who have fetal alcohol</u> spectrum disorders as determined to be necessary by the department to protect the infant;

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3. Determine if infant is affected. Determine whether or not each infant reported
 for whom the department conducts an investigation is affected by illegal substance abuse
 or suffers from, demonstrates withdrawal symptoms resulting from prenatal drug
 exposure or has fetal alcohol spectrum disorders;

4. Determine if infant is abused or neglected. Determine whether or not 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;

5. Develop plan for safe care. For each infant whom the department determines to be affected by illegal substance abuse or, to be suffering from demonstrating withdrawal symptoms resulting from prenatal drug exposure or to have fetal alcohol spectrum disorders, develop, with the assistance of any health care provider involved in the mother's 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 mother or both to a social service agency or voluntary substance abuse prevention service; and

6. Comply with section 4004. For each infant whom the department determines to
 be abused or neglected, comply with section 4004, subsection 2, paragraphs E and F.

17 Sec. 3. 22 MRSA §4011-B, as enacted by PL 2003, c. 673, Pt. Z, §5, is amended
 18 to read:

19§4011-B.Notification of prenatal exposure to drugs or having fetal alcohol20spectrum disorders

21 1. Notification of prenatal exposure to drugs or having fetal alcohol spectrum 22 disorders. A health care provider involved in the delivery or care of an infant who the provider knows or has reasonable cause to suspect has been born affected by illegal 23 substance abuse or, is suffering from demonstrating withdrawal symptoms resulting from 24 25 prenatal drug exposure, whether or not the prenatal exposure was to legal or illegal drugs, or has fetal alcohol spectrum disorders shall notify the department of that condition in the 26 infant. The report notification required by this subsection must be made in the same 27 manner as reports of abuse or neglect required by this subchapter. 28

- A. This section, and any notification made pursuant to this section, may not be
 construed to establish a definition of "abuse" or "neglect."
- B. This section, and any notification made pursuant to this section, may not be
 construed to require prosecution for any illegal action, including, but not limited to,
 the act of exposing a fetus to drugs or other substances.

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2. 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.'

- 38 SUMMARY
- This amendment is the minority report of the committee and replaces the bill. The amendment amends current law on reporting to the Department of Health and Human

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1 Services by a health care provider involved in the delivery or care of an infant with 2 prenatal exposure to drugs as follows:

1. The amendment changes "reports" to the department to "notifications" to the
department and changes "suffering from withdrawal symptoms" to "demonstrating
withdrawal symptoms";

- Che amendment repeals the requirement that the department investigate all reports
 and authorizes the department to investigate as it determines to be necessary to protect an
 infant for whom the department has received notification; and
- 9 3. The amendment defines "fetal alcohol spectrum disorders" and adds it to the 10 conditions of an infant that require notification to the department.
- II
 FISCAL NOTE REQUIRED

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 (See attached)

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