

STATE OF MAINE
123RD LEGISLATURE
FIRST REGULAR SESSION



Summaries of bills and adopted amendments and laws enacted or finally passed during the First Regular Session of the 123rd Maine Legislature coming from the

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

July 2007

STAFF:

JANE ORBETON, SENIOR ANALYST
ELIZABETH F. COOPER, LEGISLATIVE ANALYST
OFFICE OF POLICY AND LEGAL ANALYSIS
13 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1670

MEMBERS:

SEN. JOSEPH C. BRANNIGAN, CHAIR
SEN. LISA T. MARRACHE
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**JOINT STANDING COMMITTEE ON
HEALTH AND HUMAN SERVICES**

Summary of Committee Actions

I. BILLS AND PAPERS CONSIDERED	<u>Number</u>	<u>% of Comm Activity</u>	<u>% of All Bills/Papers</u>
A. Bills referred to Committee			
<i>Bills referred and voted out</i>	163	94.8%	8.4%
<u><i>Bills Carried Over</i></u>	<u>8</u>	<u>4.7%</u>	<u>0.4%</u>
Total Bills referred	171	99.4%	8.9%
B. Bills reported out by law or joint order	1	0.6%	0.1%
Total Bills considered by Committee	172	100.0%	8.9%
Orders and Resolutions referred to Committee			
<i>Joint Study Orders referred and voted out</i>	0	0.0%	0.0%
<i>Joint Resolutions referred and voted out</i>	0	0.0%	0.0%
<i>Orders and Resolutions Carried Over</i>	<u>0</u>	<u>0.0%</u>	<u>0.0%</u>
Total Orders and Resolutions Referred	0	0.0%	0.0%
II. COMMITTEE REPORTS	<u>Number</u>	<u>% of this Committee's Reports</u>	<u>% of All Committee Reports</u>
A. Unanimous committee reports			
<i>Ought to Pass</i>	14	8.5%	0.8%
<i>Ought to Pass as Amended</i>	59	36.0%	3.4%
<i>Ought to Pass as New Draft</i>	0	0.0%	0.0%
<u><i>Ought Not to Pass</i></u>	<u>70</u>	<u>42.7%</u>	<u>4.0%</u>
Total unanimous reports	143	87.2%	8.2%
B. Divided committee reports			
<i>Two-way reports</i>	20	12.2%	1.1%
<i>Three-way reports</i>	1	0.6%	0.1%
<u><i>Four-way reports</i></u>	<u>0</u>	<u>0.0%</u>	<u>0.0%</u>
Total divided reports	21	12.8%	1.2%
Total committee reports	164	95.3%	9.4%
III. CONFIRMATION HEARINGS	0	N/A	N/A
IV. FINAL DISPOSITION	<u>Number</u>	<u>% of Comm Bills/Papers</u>	<u>% of All Bills/Papers</u>
A. Bills and Papers enacted or finally passed			
<i>Joint Study Orders</i>	0	0.0%	0.0%
<i>Public laws</i>	45	26.2%	2.3%
<i>Private and Special Laws</i>	2	1.2%	0.1%
<i>Resolves</i>	31	18.0%	1.6%
<u><i>Constitutional Resolutions</i></u>	<u>0</u>	<u>0.0%</u>	<u>0.0%</u>
Total Enacted or Finally Passed	78	45.3%	4.0%
B. Resolves to authorize major substantive rules			
Rules authorized without legislative changes	4	66.7%	16.7%
Rules authorized with legislative changes	2	33.3%	8.3%
<u>Rules not authorized by the Legislature</u>	<u>0</u>	<u>0.0%</u>	<u>0.0%</u>
Total number of rules reviewed	6	100.0%	25.0%
C. Bills vetoed or held by Governor			
<i>Vetoed over-ridden</i>	0	0.0%	0.0%
<i>Vetoed sustained</i>	0	0.0%	0.0%
<u><i>Held by the Governor</i></u>	<u>0</u>	<u>0.0%</u>	<u>0.0%</u>
Total	0	0.0%	0.0%

Note: A committee vote on a bill is not included here if the bill was subsequently re-referred to another committee or recommitted and carried over.

Joint Standing Committee on Health and Human Services

LD 4 An Act To Amend the Prescription Privacy Law

PUBLIC 460

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH	OTP-AM MAJ ONTP MIN	H-584 H-594 PERRY A

This bill amends the current law that prohibits the sale by prescription drug intermediaries of prescription drug information that identifies directly or indirectly the patient and designates such a sale or exchange as a violation of the Maine Unfair Trade Practices Act. This bill extends the prohibition in current law to the sale of information that identifies directly or indirectly the health care practitioner who ordered the prescription drug.

Committee Amendment "A" (H-584)

This amendment replaces the bill and is the majority report of the committee. The amendment provides an opt-out mechanism by which prescribers of prescription drugs may protect from marketing uses prescription drug information that identifies the prescriber. The amendment:

1. Adds a definition of "marketing";
2. Adds to the definition of "prescription drug information intermediary" persons or entities employed by or under contract to a prescription drug information intermediary;
3. Provides a statement of findings:
 - A. That the Legislature finds that enactment of this legislation will: improve the public health, limit annual increases in the cost of health care and protect the privacy of patients and prescribers in Maine's health care system;
 - B. That the State has a duty to assist in the maintenance of an effective and efficient health care system;
 - C. That patients and prescribers have requested that the Legislature provide a mechanism for protecting confidentiality;
 - D. That data companies sell prescriber and patient information to drug manufacturers who use it to influence prescribers to prescribe higher priced drugs, thereby increasing the cost of health care;
 - E. That restricting the use of prescriber-identifying information will decrease drug detailing and increase the use of lower priced drugs, thus decreasing the cost of health care;
 - F. That the resulting savings may be used for increased investment in drugs and increased access to health care; and
 - G. That the legislation is a narrowly and carefully tailored approach to achieving compelling state interests and other purposes;
4. Provides a statement of purposes the Legislature intends to achieve, including improving the public health, limiting annual increases in the cost of health care and protecting the privacy of patients and prescribers in Maine's health care system. Other purposes include protection of personal privacy rights, ending the use of prescriber comparisons and decreasing marketing costs.

In part as a reaction to a Journal of the American Medical Association article, "The Accuracy of Drug Information from Pharmaceutical Sales Representatives," vol. 273, no. 16, pp. 1296-98 (1995), which concluded that 11% of the in-person statements made to physicians by pharmaceutical sales representatives contradicted information that was

Joint Standing Committee on Health and Human Services

readily available to them, the amendment also provides a mechanism to be used in conjunction with academic detailing that is being considered by the Legislature this year and details the efforts of the Legislature in prior years to address problems with cost and access to health care and confidentiality of health information.

It also provides a statement that the provisions of the amendment are narrowly and carefully tailored to address the findings listed in the amendment to achieve the State's purposes listed in the amendment and in conjunction with the following efforts to advance the State's compelling interests:

- A. Prior authorization and drug utilization review in the MaineCare program under the Maine Revised Statutes, Title 22, section 3174-M;
- B. Reporting of a broad array of prescription drug marketing costs under Title 22, section 2698-A and subsequent reporting by the Department of Health and Human Services to the Legislature and the Attorney General;
- C. Prescription drug price disclosure under Title 22, section 2698-B;
- D. Generic and therapeutically equivalent substitution of prescription drugs under Title 32, section 13781; and E. Protection of patient prescription drug information held by health care practitioners under Title 22, section 1711-C;
5. Separates the confidentiality provisions applicable to the patient and the prescriber;
6. Beginning January 1, 2008, states that a carrier, pharmacy or prescription drug information intermediary may not license, use, sell, transfer or exchange for value for marketing purposes prescriber-identifying prescription drug information of a prescriber who has filed for confidentiality protection;
7. Establishes a mechanism for confidentiality protection through an opt-out procedure similar to the federal Do Not Call List utilizing the licensing and relicensing process for prescribers. The procedures include information for the prescriber and methods for filing with the Maine Health Data Organization to protect confidentiality of prescriber-identifying information;
8. Grants rule-making authority to the licensing boards and the Maine Health Data Organization, provides them funding through an assessment on manufacturers of prescription drugs dispensed through the MaineCare program and elderly low-cost drug program and requires a report on confidentiality protection activity within the Maine Health Data Organization under the law as part of the organization's annual report to the Legislature;
9. Provides authority to the Department of Health and Human Services to transfer funding to the Maine Health Data Organization and the Department of Professional and Financial Regulation to fund their costs for the mechanism to protect the confidentiality of prescriber-identifying prescription drug information; and
10. Adds an appropriations and allocations section.

House Amendment "A" (H-594)

This amendment removes the provisions that would have 20% of the amount of assessments to cover boards of licensure costs and instead allows the Department of Health and Human Services to use those funds.

Enacted Law Summary

Public Law 2007, chapter 460 does the following:

1. Adds a definition of "marketing";
2. Adds to the definition of "prescription drug information intermediary" persons or entities employed by or under contract to a prescription drug information intermediary;

Joint Standing Committee on Health and Human Services

3. Provides a statement of findings:

A. That the Legislature finds that enactment of this legislation will: improve the public health, limit annual increases in the cost of health care and protect the privacy of patients and prescribers in Maine's health care system;

B. That the State has a duty to assist in the maintenance of an effective and efficient health care system;

C. That patients and prescribers have requested that the Legislature provide a mechanism for protecting confidentiality;

D. That data companies sell prescriber and patient information to drug manufacturers who use it to influence prescribers to prescribe higher priced drugs, thereby increasing the cost of health care;

E. That restricting the use of prescriber-identifying information will decrease drug detailing and increase the use of lower priced drugs, thus decreasing the cost of health care;

F. That the resulting savings may be used for increased investment in drugs and increased access to health care; and

G. That the legislation is a narrowly and carefully tailored approach to achieving compelling state interests and other purposes;

4. Provides a statement of purposes the Legislature intends to achieve, including improving the public health, limiting annual increases in the cost of health care and protecting the privacy of patients and prescribers in Maine's health care system. Other purposes include protection of personal privacy rights, ending the use of prescriber comparisons and decreasing marketing costs.

The law also provides a mechanism to be used in conjunction with academic detailing that is being considered by the Legislature this year and details the efforts of the Legislature in prior years to address problems with cost and access to health care and confidentiality of health information.

It also provides a statement that the law is narrowly and carefully tailored to address the findings to achieve the State's listed purposes and in conjunction with the following efforts to advance the State's compelling interests:

A. Prior authorization and drug utilization review in the MaineCare program under the Maine Revised Statutes, Title 22, section 3174-M;

B. Reporting of a broad array of prescription drug marketing costs under Title 22, section 2698-A and subsequent reporting by the Department of Health and Human Services to the Legislature and the Attorney General;

C. Prescription drug price disclosure under Title 22, section 2698-B;

D. Generic and therapeutically equivalent substitution of prescription drugs under Title 32, section 13781;

and E. Protection of patient prescription drug information held by health care practitioners under Title 22, section 1711-C;

5. Separates the confidentiality provisions applicable to the patient and the prescriber;

Joint Standing Committee on Health and Human Services

- 6. Beginning January 1, 2008, states that a carrier, pharmacy or prescription drug information intermediary may not license, use, sell, transfer or exchange for value for marketing purposes prescriber-identifying prescription drug information of a prescriber who has filed for confidentiality protection;

- 7. Establishes a mechanism for confidentiality protection through an opt-out procedure similar to the federal Do Not Call List utilizing the licensing and relicensing process for prescribers. The procedures include information for the prescriber and methods for filing with the Maine Health Data Organization to protect confidentiality of prescriber-identifying information;

- 8. Grants rule-making authority to the licensing boards and the Maine Health Data Organization, provides Maine Health Data Organization funding through an assessment on manufacturers of prescription drugs dispensed through the MaineCare program and elderly low-cost drug program and requires a report on confidentiality protection activity within the Maine Health Data Organization under the law as part of the organization's annual report to the Legislature;

- 9. Provides authority to the Department of Health and Human Services to transfer funding to the Maine Health Data Organization and the Department of Professional and Financial Regulation to fund their costs for the mechanism to protect the confidentiality of prescriber-identifying prescription drug information.

See also LD 838.

LD 12 An Act To Establish a Residency Requirement for MaineCare Recipients ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROWNE	ONTP	

This bill establishes a 30-day residency requirement for applicants for the MaineCare program.

LD 22 An Act To Require Health Care Practitioners to Distribute Free Samples of Medication in Certain Circumstances ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BEAUDOIN	ONTP	

This bill requires health care practitioners to distribute free samples of medications to patients in order to test the reaction of the patient and the effectiveness in treatment of the disease or condition. The requirement to distribute free samples depends on availability, appropriateness and timeliness.

LD 28 An Act To Establish a Statewide Residency Requirement for General Assistance ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROWNE	ONTP	

Joint Standing Committee on Health and Human Services

This bill establishes a 30-day residency requirement for general assistance benefits.

LD 29 An Act To Amend the Laws Governing Welfare

PUBLIC 282

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BEAUDOIN	OTP-AM	H-351

This bill, presented as a concept draft pursuant to Joint Rule 208, proposes to amend the current law dealing with welfare recipients. The bill will require able-bodied welfare recipients to work with town officials and municipal officers to seek meaningful employment and will require them to work or volunteer in order to receive their welfare benefits.

Committee Amendment "A" (H-351)

This amendment replaces the bill and requires the Department of Health and Human Services to report to the Legislature a summary of the federal laws enacted in the previous fiscal year that may require changes in the ASPIRE-TANF program. It requires the department to report the potential impact of those federal law changes on the State's TANF program and the ASPIRE-TANF program. It repeals a requirement for the department to provide a report that compares Maine benefits under these programs to the benefits in other New England states.

Enacted Law Summary

Public Law 2007, chapter 282 replaces the bill and requires the Department of Health and Human Services to report to the Legislature a summary of the federal laws enacted in the previous fiscal year that may require changes in the ASPIRE-TANF program. It requires the department to report the potential impact of those federal law changes on the State's TANF program and the ASPIRE-TANF program. It repeals a requirement for the department to provide a report that compares Maine benefits under these programs to the benefits in other New England states.

LD 37 Resolve, Regarding Legislative Review of Portions of MaineCare Benefits Manual, Chapter III, Section 50, Principles of Reimbursement for Intermediate Care Facilities for Persons with Mental Retardation, a Major Substantive Rule of the Department of Health and Human Services, Office of MaineCare Services

RESOLVE 44
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
	OTP-AM	H-217

This resolve provides for legislative review of portions of MaineCare Benefits Manual, Chapter III, Section 50, Principles of Reimbursement for Intermediate Care Facilities for Persons with Mental Retardation, a major substantive rule of the Department of Health and Human Services, Office of MaineCare Services.

Committee Amendment "A" (H-217)

This amendment amends the resolve to provide approval of the provisionally adopted major substantive rules on reimbursement for intermediate care facilities for persons with mental retardation if certain enumerated changes are made to the rules.

Joint Standing Committee on Health and Human Services

Enacted Law Summary

Resolve 2007, chapter 44 approves major substantive rules on reimbursing ICF-MR's. It allows adoption of rules on an emergency basis.

Resolve 2007, chapter 44 was enacted as an emergency measure effective May 30, 2007.

- LD 38** **Resolve, Regarding Legislative Review of Portions of Chapter 250: Rules Relating to Smoking in the Workplace, a Major Substantive Rule of the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Partnership for a Tobacco-free Maine** **RESOLVE 4
EMERGENCY**

Sponsor(s)

PIEH

Committee Report

OTP

Amendments Adopted

This resolve provides for legislative review of portions of Chapter 250: Rules Relating to Smoking in the Workplace, a major substantive rule of the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Partnership for a Tobacco-free Maine.

Enacted Law Summary

Resolve 2007, chapter 4 approves major substantive rules on smoking in the workplace.

Resolve 2007, chapter 4 was enacted as an emergency measure effective March 22, 2007.

- LD 39** **Resolve, Regarding Legislative Review of Portions of Regulations Governing the Licensing and Functioning of Intermediate Care Facilities for Persons with Mental Retardation, a Major Substantive Rule of the Department of Health and Human Services** **RESOLVE 33
EMERGENCY**

Sponsor(s)

Committee Report

OTP

Amendments Adopted

This resolve provides for legislative review of portions of Regulations Governing the Licensing and Functioning of Intermediate Care Facilities for Persons with Mental Retardation, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2007, chapter 33 approves major substantive rules on licensing ICF-MR's.

Resolve 2007, chapter 33 was enacted as an emergency measure effective May 22, 2007.

- LD 40** **Resolve, Regarding Legislative Review of Portions of Chapter 100: Enforcement Procedures, a Major Substantive Rule of the Maine Health Data Organization** **RESOLVE 17
EMERGENCY**

Sponsor(s)

Committee Report

OTP

Amendments Adopted

Joint Standing Committee on Health and Human Services

This resolve provides for legislative review of portions of Chapter 100: Enforcement Procedures, a major substantive rule of the Maine Health Data Organization.

Enacted Law Summary

Resolve 2007, chapter 17 approves major substantive rules on the fines applicable to intentional or knowing misuse of MHDO data.

Resolve 2007, chapter 17 was enacted as an emergency measure effective May 14, 2007.

LD 43 Resolve, To Direct the Department of Health and Human Services To Exclude Veterans Education Assistance from Income in Determining Eligibility for the Food Stamp Program ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
COURTNEY	ONTP	

This resolve requires the Department of Health and Human Services to modify all state rules necessary to exclude educational benefits received from the United States Department of Veterans Affairs when calculating household income to determine eligibility for food stamps as allowed by the United States Farm Security and Rural Investment Act of 2002, Section 4102.

LD 48 An Act To Exempt Training and Educational Research Costs from the Voluntary Spending Cap ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HASKELL	ONTP	

This bill removes training and educational research costs from the voluntary spending cap on the State's hospitals and other health care providers.

LD 50 Resolve, Regarding Costly Computer Processes at the Department of Health and Human Services ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DUPREY PLOWMAN	ONTP	

This resolve directs the Department of Health and Human Services to amend its computer processing procedures for the reimbursement of providers of child care for children of participants in the ASPIRE program by October 1, 2007. The department must simplify the billing procedures and provide reimbursement to a child care provider through one check per month for all children of ASPIRE participants cared for by that provider.

LD 72 An Act To Improve MaineCare Members' Access to Information ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FARRINGTON BARTLETT	ONTP	

Joint Standing Committee on Health and Human Services

This bill provides that the Department of Health and Human Services shall provide a printed copy of the MaineCare benefits manual to a MaineCare member free of charge at the request of that member. The department may charge the actual cost of postage to a member for a manual that is mailed.

LD 87 Resolve, Directing the Department of Health and Human Services To Provide Printed Informational Handouts on Child Care Guidelines ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SNOWE-MELLO	ONTP	

This resolve requires the Department of Health and Human Services to provide a printed copy of the child care information that is available on the department's website, including, but not limited to, guidance for selecting a child care provider. It requires the department to identify costs associated with providing the printed information and to charge persons requesting the information a fee to cover those costs.

LD 97 An Act Regarding Prescription Drug Expiration Dates ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAMPBELL BRANNIGAN	ONTP	

This bill directs the Department of Professional and Financial Regulation, Maine Board of Pharmacy to adopt routine technical rules by January 1, 2008 regarding the attachment of expiration dates to prescription drugs dispensed by pharmacists, providing protection for patients and allowing use of the drugs only to the date supported by the highest standards of pharmacology and scientific research.

LD 137 Resolve, Requiring the Maine Center for Disease Control and Prevention To Report on Activities To Implement the Recommendations of the Task Force To Study Cervical Cancer Prevention, Detection and Education RESOLVE 73

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	OTP-AM	S-158

This bill requires the Legislature to provide funding to the Department of Health and Human Services, Maine Immunization Program for purchasing and distributing the human papillomavirus vaccine to all girls 11 and 12 years of age. It requires the Maine Immunization Program to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the status of program funding and vaccination rates, including specific information on the human papillomavirus vaccine, by January 30, 2008 and again by January 30, 2010. It requires the Maine Breast and Cervical Health Program to develop and distribute public education materials on cervical cancer prevention and the human papillomavirus vaccine and to translate the materials into other languages when necessary. It requires the Maine Center for Disease Control and Prevention (CDC) to coordinate with the Department of Education and the University of Maine System to develop educational materials for schools and universities. It requires the Maine CDC to develop an educational pamphlet for 5th grade students and a voluntary speakers group for health education and other classes. It requires the Maine CDC to collaborate with the Maine Medical Association to develop and expand continuing medical education opportunities related to cervical cancer. It requires the Department of Health and Human Services to determine the potential costs and benefits of obtaining a federal Medicaid family planning waiver to

Joint Standing Committee on Health and Human Services

provide cervical cancer screening and services to individuals that do not currently qualify for MaineCare. It requires the department to expand eligibility for the Maine Breast and Cervical Health Program to include women 35 to 39 years of age and to increase cervical cancer screening among women under 35 years of age, expand screening sites and days, update screening guidelines and work with specific stakeholders to explore options for encouraging people to attend cancer screenings. It requires the Maine Quality Forum to identify and assess current initiatives within the state health care system that may enhance delivery of cervical cancer screening and follow-up care. It requires the Department of Health and Human Services' Office of Minority Health to collaborate with other department offices and programs to examine cervical cancer incidence in racial and ethnic minorities in the State and study barriers to screening and treatment and best practices for overcoming those barriers. It requires the Department of Health and Human Services to examine the higher incidence of cervical cancer in Washington County and Somerset County to determine reasons for the variation and develop recommendations for reducing cervical cancer in those counties. It requires the Maine Center for Disease Control and Prevention to monitor and evaluate state progress in implementing the task force's recommendations and report to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 30, 2009 and again by January 30, 2011.

Committee Amendment "A" (S-158)

This amendment replaces the bill with a resolve. It removes sections of the bill related to funding for the human papillomavirus vaccine, a statewide public education campaign, school-based education initiatives, continuing medical education, a potential Medicaid waiver and requiring the Maine Quality Forum to review and report on health care system initiatives affecting the delivery of cervical cancer screening services. It retains the provisions in the bill that require the department to report: 1) expenditures and distribution of the human papillomavirus vaccine; 2) public education efforts regarding cervical cancer; 3) recommendations for improving cervical cancer prevention and detection in racial and ethnic minority populations and for reducing incidence of cervical cancer in Washington County and Somerset County; and 4) progress on implementing the recommendations of the Task Force To Study Cervical Cancer Prevention, Detection and Education. It also requires the department to make funding for the immunizing girls from low income families against human papillomavirus vaccination a priority in future budget requests. It requires the department to submit an initial report to the joint standing committee of the Legislature having jurisdiction over health and human services matters no later than January 30, 2009 and a second report no later than January 30, 2011. It authorizes the joint standing committee of the Legislature having jurisdiction over health and human services matters to submit legislation to the 124th Legislature and 125th Legislature.

Enacted Law Summary

Resolve 2007, chapter 73 requires the Department of Health and Human Services to report on: 1) expenditures and distribution of the human papillomavirus vaccine; 2) public education efforts regarding cervical cancer; 3) recommendations for improving cervical cancer prevention and detection in racial and ethnic minority populations and recommendations for reducing incidence of cervical cancer in Washington County and Somerset County; and 4) progress on implementing the recommendations of the Task Force To Study Cervical Cancer Prevention, Detection and Education. It also requires the department to make funding to provide the human papillomavirus vaccination to the population of low-income females in Maine that need the vaccine a priority in future budget requests. It requires the department to submit an initial report to the joint standing committee of the Legislature having jurisdiction over health and human services matters no later than January 30, 2009 and a second report no later than January 30, 2011. It authorizes the joint standing committee of the Legislature having jurisdiction over health and human services matters to submit legislation to the 124th Legislature and 125th Legislature.

Joint Standing Committee on Health and Human Services

LD 168 Resolve, To End Fraud in Maine's Welfare Benefit Programs

RESOLVE 31

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WALCOTT	OTP-AM	H-163

This bill, presented as a concept draft pursuant to Joint Rule 208, proposes to enact measures that would address and mitigate fraud in the State's welfare benefit programs, such as, but not limited to, MaineCare and Temporary Assistance for Needy Families.

Committee Amendment "A" (H-163)

This amendment changes the bill to a resolve and attempts to address and mitigate possible fraud in the MaineCare program and in the Temporary Assistance for Needy Families program and in determining eligibility for the federal food stamp program. The amendment requires routine technical rulemaking that would require independent verification of income and residence as part of eligibility determination.

Enacted Law Summary

Resolve 2007, chapter 31 addresses and mitigates possible fraud in the MaineCare program, the Temporary Assistance for Needy Families program and the federal food stamp program by requiring independent verification of income and residence as part of eligibility determination. The resolve makes any rules that the Department of Health and Human Services needs to implement related to this law routine technical rules.

LD 273 An Act To Help Save the Homes of Some Persons Who Enter Nursing Facilities

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TUTTLE MARRACHE	ONTP	

This bill will assist a MaineCare recipient entering a nursing facility to save the recipient's residence by prohibiting estate recovery action against the residence until the recipient has stated in writing that the recipient has no intention of returning to live in the residence.

LD 282 An Act To Provide Dental Care for Pregnant Women and New Mothers Receiving MaineCare Benefits

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH	ONTP	

This bill extends MaineCare dental and oral health services to a woman who is eligible for MaineCare because of pregnancy and for 60 days following the delivery of the child.

LD 283 An Act To Require Direct Payment to Child Care Centers

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DUPREY	ONTP	

Joint Standing Committee on Health and Human Services

This bill makes payment for child care benefits for a person transitioning off the ASPIRE-TANF program payable directly to the child care provider or facility that provided the child care and provides a mechanism for paying for child care services for which reimbursement is owed.

LD 306 An Act To Provide Medically Necessary Speech Therapy Services

PUBLIC 71

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER MARRACHE	OTP-AM	H-52

This bill allows the provision of speech therapy benefits under MaineCare Basic for members who without a maintenance level of speech therapy services would experience a significant decline in their ability to communicate orally, safely swallow or masticate.

Committee Amendment "A" (H-52)

This amendment incorporates a fiscal note.

Enacted Law Summary

Public Law 2007, chapter 71 allows the provision of speech therapy benefits under MaineCare Basic for members who without a maintenance level of speech therapy services would experience a significant decline in their ability to communicate orally, safely swallow or masticate.

LD 339 Resolve, To Ensure Proper Levels of Care for the Elderly and the Disabled

**RESOLVE 61
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	OTP-AM	S-117

This bill directs the Department of Health and Human Services to amend, by January 1, 2008, the rules for the licensing of long-term care facilities to prevent the inappropriate transfer of a resident to a hospital as a way of accomplishing the discharge of the resident. The rules are routine technical rules.

Committee Amendment "A" (S-117)

This amendment replaces the bill with a resolve. It establishes a process to assess and plan for the medically necessary physical, cognitive and behavioral needs of adult MaineCare members and to implement a training program in positive behavioral support health. It establishes a process for stakeholder involvement and collaboration. It requires the sharing of data, sets a timetable and requires a report to the Joint Standing Committee on Health and Human Services, which is authorized to submit legislation.

Enacted Law Summary

Resolve 2007, chapter 61 establishes a process to assess and plan for the medically necessary physical, cognitive and behavioral needs of adult MaineCare members and to implement a training program in positive behavioral support health. It establishes a process for stakeholder involvement and collaboration. It requires the sharing of data, sets a timetable and requires a report to the Joint Standing Committee on Health and Human Services, which is authorized to submit legislation.

Resolve 2007, chapter 61 was enacted as an emergency measure effective June 6, 2007.

Joint Standing Committee on Health and Human Services

LD 364 An Act To Stop Misleading Drug Advertisements

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAMPBELL	ONTP	

This bill prohibits the use of false or misleading prescription drug advertisements in the State by prescription drug manufacturers and also prohibits the use of language recommending the public to ask physicians about the use of any prescription drug.

LD 365 Resolve, To Promote Community Integration for Individuals with Brain Injuries

RESOLVE 105

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN	OTP-AM	H-518

This resolve requires the Department of Health and Human Services to apply by January 1, 2008 for a federal waiver to operate a MaineCare waiver program to allow a person with a brain injury who is eligible for services at the nursing facility level to choose to receive services in a home or in a community-based setting. The resolve provides for public information and input from interested parties. The resolve requires reports to the Legislature by April 15, 2008, January 15, 2009 and April 15, 2009 regarding the department's progress in applying for and securing the waiver.

Committee Amendment "A" (H-518)

This amendment replaces the resolve. It directs the Department of Health and Human Services to complete a comprehensive plan to address the needs of persons with disabilities due to brain injuries by January 1, 2008. It provides a process for the development of the plan and the participation of interested persons. It requires reports to the Legislature by January 15, 2008, January 15, 2009 and April 15, 2009 regarding its progress implementing the elements of the plan. The amendment authorizes the Joint Standing Committee on Health and Human Services to submit legislation regarding services to persons with brain injuries to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Resolve 2007, chapter 105 directs the Department of Health and Human Services to complete a comprehensive plan to address the needs of persons with disabilities due to brain injuries by January 1, 2008. It provides a process for the development of the plan and the participation of interested persons. It requires reports to the Legislature by January 15, 2008, January 15, 2009 and April 15, 2009 regarding its progress implementing the elements of the plan. The resolve authorizes the Joint Standing Committee on Health and Human Services to submit legislation regarding services to persons with brain injuries to the Second Regular Session of the 123rd Legislature.

LD 386 An Act To Provide for Prescription Monitoring and Protection of Personal Patient Information

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HINCK	ONTP	

Joint Standing Committee on Health and Human Services

This bill is a concept draft pursuant to Joint Rule 208.

This bill proposes to amend current law to establish an electronic prescription drug monitoring system to enhance patient safety by providing a means to avoid medication errors. The electronic prescription drug monitoring system will allow pharmacists, physicians and other authorized health care providers to obtain a complete record of all drugs prescribed to a patient, identify the prescribing physician for each drug and list the dates on which each prescription was filled. This information will give health care providers additional means to ensure that patients do not have adverse reactions due to incompatible drug interactions or over-prescription of medications from multiple prescribing physicians.

The bill proposes to direct the Department of Health and Human Services to apply for federal funds and seek other funding sources to develop the electronic prescription drug monitoring system.

This bill also proposes to amend current law to prevent the unauthorized collection, use, sale or exchange of confidential patient prescription drug information for commercial use, financial gain or other unauthorized purposes and to levy penalties that are stringent enough to deter these activities.

LD 405 An Act To Establish Necessary MaineCare Pharmacy Incentives

CARRIED OVER

Sponsor(s)

LEWIN

Committee Report

Amendments Adopted

This bill directs the Department of Health and Human Services to amend the rules for MaineCare reimbursement to pharmacies for prescription drugs in order to increase the dispensing fee on a basis that is indexed to the Consumer Price Index and to provide other increases in reimbursement. The rules adopted are designated as routine technical rules.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.

LD 414 An Act To Decrease Cervical Cancer in Maine Girls

ONTP

Sponsor(s)

FAIRCLOTH

Committee Report

ONTP

Amendments Adopted

This bill requires a female child entering grade 6 for the first time to be immunized against the human papillomavirus, the virus that causes cervical cancer. This requirement takes effect with the start of the 2008-2009 school year. The bill provides an exemption from this requirement for a child whose parent states in writing that the parent has received information provided by the Department of Health and Human Services regarding cervical cancer and the human papillomavirus and has chosen for the child not to receive the human papillomavirus vaccine. The bill requires that the department identify that information by January 1, 2008, make it available to family physicians, pediatricians and public and private schools that serve grade 6 and post the material on the department's publicly accessible website.

See also LD 137.

Joint Standing Committee on Health and Human Services

LD 429 An Act To Improve Access to HIV Testing in Health Care Settings

PUBLIC 93

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER	OTP-AM	H-90

This bill amends HIV testing law by replacing the requirement for obtaining a patient's written informed consent before an HIV test to requiring a test be undertaken only with a patient's knowledge and understanding that an HIV test is planned, by removing the requirement for pretest counseling and by requiring that a positive test result must be confidentially given through personal contact.

Committee Amendment "A" (H-90)

This amendment adds to the HIV pretest patient information procedures the opportunity for the patient to ask questions and corrects a reference to the person who communicates HIV test results. The amendment integrates certain provisions from LD 568, provisions that correct cross-references and repeal references to required pretest counseling.

Enacted Law Summary

Public Law 2007, chapter 93 amends the laws on HIV testing. It removes the requirement for pre-test counseling. It replaces the requirement of informed consent with a requirement that the patient know of and understand that an HIV test is being administered. It requires that positive test results be communicated confidentially and through personal contact.

See also LD 568.

LD 436 An Act To Postpone the Expiration of the Required Nonhospital Expenditures Component in the Capital Investment Fund

PUBLIC 94

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TURNER	OTP	

This bill postpones by one year the repeal date established in the Dirigo Health laws for setting aside 12.5% of the capital investment fund, the annual limit established for expenditures approved through the certificate of need program, for nonhospital projects.

Enacted Law Summary

Public Law 2007, chapter 94 postpones by one year the repeal date established in the Dirigo Health laws for setting aside 12.5% of the capital investment fund, the annual limit established for expenditures approved through the certificate of need program, for nonhospital projects.

LD 467 An Act Regarding the Protection and Advocacy Agency Advisory Council

PUBLIC 87

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	OTP	

Joint Standing Committee on Health and Human Services

This bill repeals the section of law that requires the advisory council of the protection and advocacy agency for persons with disabilities to file a report with the Secretary of State.

Enacted Law Summary

Public Law 2007, chapter 87 repeals the section of law that requires the advisory council of the protection and advocacy agency for persons with disabilities to file a report with the Secretary of State.

LD 487 **An Act Regarding Children in the Child Welfare System** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CANAVAN	ONTP	

This bill requires the Department of Health and Human Services to complete a clinical review upon determination that a child receiving child welfare services requires therapeutic care in a residential or foster care setting or requires other specialized mental health care treatment. It requires the department to assess a child leaving state custody, to evaluate children who have left custody through periodic contact and to collect data on the assessments and make the data available to the public.

LD 500 **An Act To Amend the Definition of Health Care Facility To Include Hospice Facilities** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DIAMOND	ONTP	

This bill amends the Maine Health and Higher Educational Facilities Authority Act to authorize the financing of hospice facilities.

See also LD 727.

LD 519 **An Act To Provide Assistance to Family Members, Friends and Neighbors Who Provide Home Health Care for Senior Citizens** **CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAMPBELL BRANNIGAN		

This bill allows family members, friends or neighbors to receive payment for providing personal care and health maintenance services to persons who receive Medicaid.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.

LD 520 **An Act To Ensure Access to MaineCare Services** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BEAUDOIN MARTIN	ONTP	

Joint Standing Committee on Health and Human Services

This bill ensures access to MaineCare services by providing incentives for health care practitioners to serve MaineCare members. The incentives, which will be established by routine technical rulemaking that must be completed by January 1, 2008, may include reimbursement or other incentives.

LD 551 An Act To Create the Maine Health Card Program

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINKHAM	ONTP MAJ OTP MIN	

This bill establishes the Maine Health Card program to enable uninsured persons to pay the MaineCare price for medically necessary health services and prescribed covered drugs.

**LD 568 An Act To Conform HIV Testing to the Recommendations of the
Federal Centers for Disease Control and Prevention**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	ONTP	

This bill repeals the requirement for informed consent for HIV testing and the requirement for counseling prior to testing and upon disclosure of the test results to the tested person effective January 1, 2008. The bill requires a health care provider to notify a person prior to HIV testing and to provide an opportunity for the person to decline the test by signing a written statement, which must be kept in the person's health care file. The bill requires oral and written information regarding HIV testing. The bill corrects cross-references to informed consent and counseling. The bill provides an effective date of January 1, 2008.

See also LD 429, enacted as Public Law 2007, chapter 93.

LD 574 An Act To Increase Funding for the State's Immunization Program

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER	ONTP	

The bill provides funding for the State's immunization program so that the program can provide vaccines to adults and children according to guidelines established by the federal Department of Health and Human Services, Centers for Disease Control and Prevention.

LD 596 An Act To Repeal the Laws Governing Long-term Foster Care

PUBLIC 46

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ROTUNDO	OTP	

This bill repeals the laws that give the Department of Health and Human Services authority to place children in long-term foster care through agreement with the foster parents or pursuant to a court order.

Joint Standing Committee on Health and Human Services

Enacted Law Summary

Public Law 2007, chapter 46 repeals the provision of M.R.S.A Title 22 that gives the Department of Health and Human Services authority to place children in long-term foster care through agreement with the foster parents or pursuant to a court order as the department has implemented a program of permanency in place of long-term foster care.

LD 609 Resolve, To Preserve and Support Community Treatment Options for Children's Behavioral Health Needs ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	ONTP	

This resolve provides a method of assessing children's community behavioral health needs and the services that are being provided. The resolve directs the Department of Health and Human Services to perform 2 assessments and to impose a moratorium on the elimination of children's community behavioral health services until the assessments have been performed and reviewed.

LD 615 An Act To Authorize the Use of the Department of Health and Human Services Staff as Hearing Officers PUBLIC 80

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER BRANNIGAN	OTP	

This bill eliminates the prohibition that existed in the former Department of Behavioral and Developmental Services against allowing department employees to serve as hearing examiners in grievances filed by clients receiving adult mental health services, adult mental retardation services or children's behavioral health services. Following the merger of that department with the Department of Health and Human Services, the office of administrative hearings operates separately from the program employees and can fairly and impartially hear these matters.

Enacted Law Summary

Public Law 2007, chapter 80 eliminates the prohibition that existed in the former Department of Behavioral and Developmental Services against allowing department employees to serve as hearing examiners in grievances filed by clients receiving adult mental health services, adult mental retardation services or children's behavioral health services. Following the merger of that department with the Department of Health and Human Services, the office of administrative hearings operates separately from the program employees and can fairly and impartially hear these matters.

LD 650 An Act To Equalize MaineCare Reimbursements to Hospitals P & S 19

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J	OTP-AM MAJ ONTP MIN	H-162 S-136 GOOLEY

This bill requires the Department of Health and Human Services to pay hospitals the reimbursements owed for MaineCare services for fiscal years 2003 and earlier prior to paying for later years. The department is required to adopt routine technical rules to pay for services in the manner required by the bill.

Joint Standing Committee on Health and Human Services

Committee Amendment "A" (H-162)

This amendment incorporates a fiscal note.

Senate Amendment "A" (S-136)

This amendment clarifies that the Department of Health and Human Services may provide relief to hospitals with financial hardship, while at the same time prioritizing final settlements for hospital fiscal years 2003 and earlier.

Enacted Law Summary

Private & Special Law 2007, chapter 19 establishes the priority by which hospitals will be paid under MaineCare for years 2003 and earlier and allows the Department of Health and Human Services to provide relief for hospitals experiencing financial hardship.

See also LD 651.

LD 651 An Act To Support Small, Local and Efficient Hospitals

ACCEPTED ONTP
REPORT

Sponsor(s)

MILLS J

Committee Report

ONTP MAJ
OTP MIN

Amendments Adopted

This bill requires the Department of Health and Human Services to use a formula that gives first preference to smaller hospitals, sole community providers and hospitals with lower than average operating revenues and higher than average percentages of MaineCare member patients when reimbursing for past MaineCare services for hospital fiscal years 2004 to 2006. The department shall adopt routine technical rules to implement this formula.

See also LD 650.

LD 652 Resolve, To Ensure Appropriate Personal Needs Allowances for Persons Residing in Long-term Care Facilities

CARRIED OVER

Sponsor(s)

BEAUDOIN

Committee Report

Amendments Adopted

H-237

This resolve provides for amending Department of Health and Human Services rules to provide for increases in the personal needs allowances of residents in nursing facilities and residential care facilities from July 1, 2007 and provides for annual increases after July 1, 2008 that are indexed to the Consumer Price Index for medical services. The rules are designated as routine technical rules. This bill was carried over to the Second Regular Session after adoption of Committee Amendment "A" (H-237) in the House and Senate.

Committee Amendment "A" (H-237)

This amendment limits the resolve to increasing the personal needs allowance for residential care facilities residents to \$65 and \$85 per month, with no inflation adjustment. This amendment also adds an appropriations and allocations section.

See also LD 880.

Joint Standing Committee on Health and Human Services

This bill was carried over to any general or special session of the 123rd Legislature by Joint Order, HP 1369.

LD 703 An Act To Repeal the Tax on Private Nonmedical Institutions

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER DOW	ONTP	

This bill repeals the 5% service provider tax imposed on private nonmedical institutions.

LD 704 Resolve, Regarding Legislative Review of Portions of MaineCare Benefits Manual, Chapter III, Section 97, Private Non-medical Institution Services, a Major Substantive Rule of the Department of Health and Human Services

**RESOLVE 16
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
	OTP	

This resolve provides for legislative review of portions of MaineCare Benefits Manual, Chapter III, section 97, Private Non-medical Institution Services, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2007, chapter 16 approves major substantive rules regarding licensing of PNMI's.

Resolve 2007, chapter 16 was enacted as an emergency measure effective May 8, 2007.

LD 711 An Act Regarding Notice That Must Be Provided by a Psychiatric Facility Concerning Certain Patients

PUBLIC 89

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	OTP-AM	S-49

This bill requires that a private psychiatric hospital, psychiatric unit or psychiatric treatment facility notify the protection and advocacy agency for persons with disabilities and provide the agency with access to information whenever an involuntarily admitted patient has died, attempted suicide or sustained a serious injury, which is consistent with the requirements for state mental health institutes.

Committee Amendment "A" (S-49)

This amendment enacts provisions in the law regarding involuntary hospitalization requiring nonstate mental health institutions to provide notice to the Department of Health and Human Services whenever any involuntarily admitted patient has died, attempted suicide or sustained a serious injury. The amendment further requires the department to forward these notices to the federally designated protection and advocacy agency for persons with disabilities.

Enacted Law Summary

Public Law 2007, chapter 89 requires nonstate mental health institutions to notify to the Department of Health and Human Services whenever any involuntarily admitted patient has died, attempted suicide or sustained a

Joint Standing Committee on Health and Human Services

serious injury. It requires the department to forward these notices to the federally designated protection and advocacy agency for persons with disabilities.

LD 722 An Act To Create the Acquired Brain Injury Fund

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN NUTTING J	ONTP	

This bill establishes the Acquired Brain Injury Fund and the Acquired Brain Injury Advisory Council. This bill makes ongoing General Fund appropriations of \$1,400,000 per year for the fund.

LD 723 Resolve, To Promote Chronic Disease Prevention and Care

RESOLVE 36

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A BRANNIGAN	OTP-AM	H-215

This bill requires the Commissioner of Health and Human Services to develop and implement a blueprint for health to address chronic care management and prevention of chronic conditions. The bill requires the commissioner to develop and implement a chronic condition prevention and chronic care management program by January 1, 2009 for the MaineCare population and to extend the educational component of the program by January 1, 2010 for all persons statewide who are at risk of requiring or who require chronic care. The bill directs the commissioner to report to the Legislature each year on the blueprint for health, including recommendations for legislation for implementation and improvement.

Committee Amendment "A" (H-215)

This amendment replaces the bill with a resolve that requires the Department of Health and Human Services and the Advisory Council on Health Systems Development to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 on the promotion of chronic disease prevention and care.

Enacted Law Summary

Resolve 2007, chapter 36 requires the Department of Health and Human Services and the Advisory Council of Health Systems Development to report to the Health and Human Services Committee by January 15, 2008, on the promotion of chronic disease prevention and care.

LD 724 Resolve, To Direct the Department of Health and Human Services To Provide Temporary Assistance for Needy Families Benefits to Certain Guardians of Minors

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HAYES	ONTP	

This resolve directs the Department of Health and Human Services to amend its rules governing the Temporary Assistance for Needy Families program to provide that a guardian of a minor who is not related to the minor may receive a monthly benefit.

Joint Standing Committee on Health and Human Services

LD 725 An Act To Ensure Retail Tobacco License Compliance

PUBLIC 172

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
RAND	OTP	

This bill requires a tobacco retailer to document a current retail tobacco license before a distributor can ship cigarettes to that retailer. This bill ensures all tobacco retailers are licensed in order to purchase cigarettes from distributors to be sold at retail.

Enacted Law Summary

Public Law 2007, chapter 172 requires tobacco retailers to prove that they are licensed before a distributor ships to the retailer.

LD 726 An Act To Provide Services for Adults with Diagnoses of Mental Retardation and Other Developmental Disabilities

PUBLIC 152

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER MARRACHE	OTP-AM	H-161

This bill requires the Department of Health and Human Services to provide mental retardation and other developmental disabilities supports and services to the extent of available funding. It requires reports by January 15th of each year to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs and the joint standing committee of the Legislature having jurisdiction over health and human services matters on unmet needs for supports and services and the waiting list for each type of service and support.

Committee Amendment "A" (H-161)

This amendment changes the bill by deleting the requirement that the Department of Health and Human Services report on the unmet needs for supports and services for people with mental retardation and developmental disabilities. It requires the departments represented by the Interdepartmental Committee on Transition to make recommendations on methods to coordinate information and data that would facilitate the identification and tracking of the needs of persons with mental retardation, serious emotional disturbance, pervasive developmental disorder or other developmental disabilities to the Interdepartmental Committee on Transition. It requires the Interdepartmental Committee on Transition to include these recommendations in its annual report to the Legislature. It requires the Maine Developmental Disabilities Council to provide information from the analysis required by the federal government related to the needs of people with disabilities in the State to the Legislature by January 31st of each year.

Enacted Law Summary

Public Law 2007, chapter 152 requires the departments represented by the Interdepartmental Committee on Transition to make recommendations on methods to coordinate information and data that would facilitate the identification and tracking of the needs of persons with mental retardation, serious emotional disturbance, pervasive developmental disorder or other developmental disabilities to the Interdepartmental Committee on Transition. It requires the Interdepartmental Committee on Transition to include these recommendations in its annual report to the Legislature. It requires the Maine Developmental Disabilities Council to provide information from the analysis required by the federal government related to the needs of people with disabilities in the State to the Legislature by January 31st of each year.

Joint Standing Committee on Health and Human Services

**LD 727 An Act To Expand the Definition of Health Care Facility under the
Maine Health and Higher Educational Facilities Authority Act**

**PUBLIC 72
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER TURNER	OTP-AM	H-55

This bill incorporates health information networks into the definition of "health care facility" so that infrastructure needs of health care facilities are part of the Maine Health and Higher Educational Facilities Authority Act.

Committee Amendment "A" (H-55)

This amendment replaces the bill. It retains the provisions of the bill that add a statewide health information network to the definition of "health care facility" for eligibility for funding through the Maine Health and Higher Educational Facilities Authority and adds to that definition hospice facilities that are or will be licensed by the Department of Health and Human Services. It adds an emergency preamble and an emergency clause to the bill.

Enacted Law Summary

Public Law 2007, chapter 72 adds to the Maine Health and Higher Education Facilities Act law hospice facilities and a statewide health information network.

Public Law 2007, chapter 72 was enacted as an emergency measure effective May 4, 2007.

See also LD 500.

**LD 753 Resolve, To Invest in Children and Families through Family Resource
Centers**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH EDMONDS	ONTP	

This resolve makes one-time General Fund appropriations of \$720,000 in fiscal years 2007-08 and 2008-09 for 6 family resource centers to operate throughout the State and provide an array of services to families.

LD 754 An Act To Allow Physician Assistants To Sign Death Certificates

PUBLIC 56

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A	OTP	

This bill allows a physician assistant to sign death certificates.

Enacted Law Summary

Public Law 2007, chapter 56 allows a physician assistant to sign a death certificate.

Joint Standing Committee on Health and Human Services

**LD 755 Resolve, To Create the Commission To Develop a Strategic Priorities
Plan for Maine's Young Children**

**RESOLVE 136
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH EDMONDS	OTP-AM	H-216

This bill appropriates funds to increase the quality of child care services in Maine by identifying and implementing best practices and by addressing current limits on access to high-quality care based on a parent's ability to pay.

Committee Amendment "A" (H-216)

This amendment changes the legislation from an act to a resolve and makes the resolve emergency legislation. It establishes a 13-member commission that includes 8 Legislators and 3 members of the public representing business, organized labor and child care providers and a 4th public representative with experience as an actuary or economist who has analyzed the relationship between early childhood development and economic development. The commission is charged with: working with experts on the Joint Standing Committee on Education and Cultural Affairs to evaluate existing information from task forces, reports and other scientific data on early childhood and brain development; identifying the current and future economic needs of employers and parents and the links to early child care and education; involving parents, providers of all levels of child care, representatives of business, health experts and economists; evaluating and reviewing, in consultation with the Maine Children's Trust, best practices related to parenting education, coaching and home visit programs; examining the multiple levels of relationship between early childhood brain development and the needs of parents and employers; considering the need for the State to receive its best return on the investment of tax dollars; consulting with people involved in the initiatives "Start ME Right" and "Invest in ME Now!" and considering the recommendations from the Task Force on Early Childhood and from the report entitled "Invest Early in Maine: A Working Plan for Humane Early Childhood Systems." The commission shall develop a 3-year investment strategy that will identify the amount of the investment each year; prioritize programs, both new and existing, to be invested in; identify expected outcomes for children and the economy; develop a timeline for those outcomes; and identify funding sources, including, but not limited to, current resources that need to be shifted, new funds and alternate funding sources that are needed. The commission shall provide a report to the Joint Standing Committee on Health and Human Services, the Joint Standing Committee on Business, Research and Economic Development, the Joint Standing Committee on Taxation, the Joint Standing Committee on Education and Cultural Affairs and the Joint Standing Committee on Appropriations and Financial Affairs, as well as to the Legislative Council. The commission is not authorized to introduce legislation. Following receipt and review of the report, the Joint Standing Committee on Health and Human Services may submit a bill to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Resolve 2007, chapter 136 which is titled to "Resolve, To Create the Commission To Develop a Strategic Priorities Plan for Maine's Young Children" establishes a 13-member commission charged with: working with experts on the Joint Standing Committee on Education and Cultural Affairs to evaluate existing information from task forces, reports and other scientific data on early childhood and brain development; identifying the current and future economic needs of employers and parents and the links to early child care and education; involving parents, providers of all levels of child care, representatives of business, health experts and economists; evaluating and reviewing, in consultation with the Maine Children's Trust, best practices related to parenting education, coaching and home visit programs; examining the multiple levels of relationship between early childhood brain development and the needs of parents and employers; considering the need for the State to receive its best return on the investment of tax dollars; consulting with people involved in the initiatives "Start ME Right" and "Invest in ME Now!" and considering the recommendations from the Task Force on Early Childhood and from the report entitled "Invest Early in Maine: A Working Plan for Humane Early Childhood Systems." The commission shall develop a 3-year investment strategy that will identify the amount of the investment each year; prioritize programs, both new and existing, to be invested in; identify expected outcomes and a timeline for those outcomes; and identify funding

Joint Standing Committee on Health and Human Services

sources. The commission shall provide a report to 5 Joint Standing Committees as well as to the Legislative Council. The Joint Standing Committee on Health and Human Services may submit a bill to the Second Regular Session of the 123rd Legislature.

Resolve 2007, chapter 136 was enacted as an emergency measure effective June 27, 2007.

LD 770 **An Act To Clarify Application of the Medical Marijuana Law BY** **ONTP** **REQUEST**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HARLOW	ONTP	

This bill amends the medical marijuana law to extend it to cover persons suffering from Crohn's disease and agitation from Alzheimer's disease.

See also LD 148.

LD 792 **Resolve, To Direct the Department of Health and Human Services To** **RESOLVE 58** **Review and Report on Efforts Concerning Postpartum Mental Health** **Education**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SULLIVAN	OTP-AM	S-111

This bill requires health care practitioners and facilities to provide information on and screening for prenatal and postpartum mental health issues to pregnant women and mothers of children under one year of age. It also requires them to provide information to the partners, spouses or fathers and family members, as appropriate.

Committee Amendment "A" (S-111)

This amendment changes the legislation to a resolve and requires the Department of Health and Human Services to convene, in coordination with the Maine Primary Care Association, a work group that will review existing efforts in Maine and projects in other states concerning education and screening for postpartum depression. The bill specifies some projects that must be included in the review and requires the work group to report findings and recommendations including legislation by January 15, 2008. The resolve authorizes the Joint Standing Committee on Health and Human Services to submit legislation to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Resolve 2007, chapter 58 requires the Department of Health and Human Services to convene, in coordination with the Maine Primary Care Association, a work group that will review existing efforts in Maine and projects in other states concerning education and screening for postpartum depression. It specifies some projects that must be included in the review and requires the work group to report findings and recommendations including legislation by January 15, 2008. The bill authorizes the Joint Standing Committee on Health and Human Services to submit legislation to the Second Regular Session of the 123rd Legislature.

Joint Standing Committee on Health and Human Services

LD 807 An Act To Prevent Overcharging for Prescription Drug Copayments

PUBLIC 431

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT	OTP-AM MAJ ONTP MIN	H-482 H-593 PERRY A

This bill requires pharmacists to notify patients when the cost of filling a prescription without insurance is less than the patient's insurance copayment and requires the pharmacist to charge the patient the lower amount.

Committee Amendment "A" (H-482)

This amendment replaces the bill. It provides that a pharmacy benefits manager or insurer shall require a contracted pharmacy to charge to an enrollee or insured person the pharmacy's usual and customary price of filling the prescription or the contracted copayment, whichever is less.

House Amendment "A" (H-593)

This amendment adds an application clause and repeals an outdated provision of law.

Enacted Law Summary

Public Law 2007, chapter 431 provides that a pharmacy benefits manager or insurer shall require a contracted pharmacy to charge to an enrollee or insured person the pharmacy's usual and customary price of filling the prescription or the contracted copayment, whichever is less.

LD 808 Resolve, To Establish the Study Group To Examine Strategies for Integrating Nutritional Wellness and Prevention Measures into Maine's Health Care System

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BOLAND	ONTP	

This resolve establishes the Study Group To Examine Strategies for Integrating Nutritional Wellness and Prevention Measures into Maine's Health Care System. The study group will examine and develop strategies for integrating incentives for healthy personal nutrition choices, including dietary supplements that have been shown to be beneficial to wellness, for the purposes of improving dietary intake and general health, supporting strong immune systems to resist disease and reducing the cost and the use of the health care system.

LD 837 An Act To Prevent Infant Exposure to Harmful Hormone-disrupting Substances

ACCEPTED ONTP REPORT

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HINCK DOW	ONTP MAJ OTP-AM MIN	

This bill prohibits the manufacture, sale and distribution of toys and child care products made with the endocrine-disrupting chemicals bisphenol A or di (2-ethylhexyl) phthalate, di butyl phthalate, benzyl butyl phthalate, diisononyl phthalate, diisodecyl phthalate and di-n-octyl phthalate, requires a manufacturer to replace a prohibited chemical with the least toxic alternative not including a likely carcinogenic substance or substance that may cause

Joint Standing Committee on Health and Human Services

birth defects, reproductive or developmental harm and directs the Department of Health and Human Services, Maine Center for Disease Control and Prevention to study ways to eliminate infant exposure to these chemicals and report back to the Legislature by December 15, 2007.

LD 838 An Act Protecting the Confidentiality of Prescription Information

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT	ONTP MAJ OTP-AM MIN	

This bill extends the privacy of prescription drug information from individuals to prescribers and clarifies that privacy applies to certain regulated transactions. In addition it extends the law to cover transfers of information by pharmacies and administrators for health plans. The bill provides exceptions for transfers related to dispensing prescription drugs, patient care, pharmacy reimbursement, utilization review, formulary and prior authorization compliance, care management, changes in pharmacy ownership, the Controlled Substances Prescription Monitoring Program and data that cannot be used to identify the individual or the provider. It removes the exception for disclosures expressly permitted by the Maine Revised Statutes, Title 22, section 1711-C; Title 24; Title 24-A; and the federal Health Insurance Portability and Accountability Act.

See also LD 4, enacted as Public Law 2007, chapter 460.

LD 839 An Act To Establish a Prescription Drug Academic Detailing Program

PUBLIC 327

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT SCHNEIDER	OTP-AM	H-549

This bill establishes within the Department of Health and Human Services the prescription drug academic detailing program to enhance the health of residents of the State, to improve the quality of decisions regarding drug prescribing, to encourage better communication between the department and health care practitioners participating in publicly funded health programs and to reduce the health complications and unnecessary costs associated with inappropriate drug prescribing. The bill requires the department to investigate initially establishing the program collaboratively with the states of New Hampshire and Vermont. The bill requires the department to review and evaluate use of the educational and assessment materials developed by the Commonwealth of Pennsylvania for the prescription drug academic detailing program that involved the cooperative work of that state and Harvard Medical School and to consider adopting the Pennsylvania program as a starting point for the program. The bill coordinates the prescription drug academic detailing program with the department's public education initiative on prescription drug clinical trials and drug safety information and transfers one half of the annual revenues under the Maine Revised Statutes, Title 22, section 2700-A, subsection 4 for the use of the prescription drug academic detailing program.

Committee Amendment "A" (H-549)

This amendment is the majority report of the committee. The amendment clarifies that the basis for academic detailing is peer-reviewed scientific, medical and academic research publications. The amendment adds the requirement that academic detailers observe standards of conduct consistent with certain federal Food and Drug Administration and Office of the Inspector General requirements. The amendment clarifies that the Department of Health and Human Services may adopt routine technical rules to implement the prescription drug academic detailing program. The amendment also adds an appropriations and allocations section.

Joint Standing Committee on Health and Human Services

Enacted Law Summary

Public Law 2007, chapter 327 directs the Department of Health and Human Services to establish a program to provide a scientifically-based drug information program to drug prescribers. The program will be coordinated within the clinical trials and drug safety programs in DHHS.

LD 859 **An Act To Restrict the Smoking Exemption for Tobacco Specialty Stores**

PUBLIC 180

Sponsor(s)

TURNER

Committee Report

OTP

Amendments Adopted

This bill limits the exemption granted to tobacco specialty stores from the public place smoking prohibition. The bill provides that the on-premises service, preparation or consumption of food or drink, if the tobacco specialty store is not licensed for such service or consumption prior to January 1, 2007, is prohibited in such a store. It also provides that smoking a waterpipe or hookah is prohibited in a tobacco specialty store that is newly licensed or that requires a new license after January 1, 2007.

Enacted Law Summary

Public Law 2007, chapter 180 limits the exemption granted to tobacco specialty stores from the public place smoking prohibition. The law provides that the on-premises service, preparation or consumption of food or drink, if the tobacco specialty store is not licensed for such service or consumption prior to January 1, 2007, is prohibited in such a store. It also provides that smoking a waterpipe or hookah is prohibited in a tobacco specialty store that is newly licensed or that requires a new license after January 1, 2007.

LD 880 **An Act To Increase the Amount of Money a Resident in a Nursing Home May Spend on Personal Expenses**

**DIED ON
ADJOURNMENT**

Sponsor(s)

SNOWE-MELLO

Committee Report

OTP-AM

Amendments Adopted

S-39

This bill increases the amount of money a nursing home resident may retain for personal expenses.

Committee Amendment "A" (S-39)

This amendment adds a section to the bill, providing a General Fund appropriation for the state share of MaineCare costs and an allocation for matching federal funds.

This bill died in the Senate on adjournment.

See also LD 652.

LD 883 **An Act To Allow a Self-pay Patient To Choose between Generic and Brand-name Medications**

PUBLIC 85

Sponsor(s)

ROSEN R

Committee Report

OTP-AM

Amendments Adopted

S-40

Joint Standing Committee on Health and Human Services

This bill allows a patient who pays for prescription drugs to choose between a brand-name drug and a generic and therapeutically equivalent drug.

Committee Amendment "A" (S-40)

This amendment retains the provisions of the bill that allow a self-pay patient to purchase prescribed brand-name drugs even if the prescriber has not indicated that the prescription is for brand-name only. The amendment excludes from this provision drugs that are listed as Schedule II drugs on the federal drug schedule.

Enacted Law Summary

Public Law 2007, chapter 85 allows a self-pay patient to choose between generic and brand-name drugs, except in the case of Schedule II drugs. The law requires the generic be dispensed unless the prescriber has indicated that the brand-name must be dispensed.

LD 899 **Resolve, To Establish a Committee To Examine the Impacts of the 1993 Amendments to General Assistance Program Eligibility**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MITCHELL	ONTP	

This resolve directs the Commissioner of Health and Human Services to convene the General Assistance Program Committee to examine the impact that the standard of income eligibility for general assistance, which is based on 110% of the United States Department of Housing and Urban Development Fair Market Rent values, has had on homelessness and poverty in Maine. Members of the committee include general assistance program administrators, advocates of low-income clients, a representative from the Maine Municipal Association and a representative from the Maine Equal Justice Partners. The committee must submit a report of its findings and recommendations to the Joint Standing Committee on Health and Human Services by January 14, 2008.

LD 902 **An Act To Amend the Maine Health Data Organization Laws**

PUBLIC 136

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	OTP-AM	S-59

This bill makes a number of modifications to the laws governing the operation of the Maine Health Data Organization, including adding Medicare prescription drug sponsors, pharmacy benefits managers and nonlicensed carriers to the definition of "payor"; modifying the appointment process for employer representatives on the Board of Directors of the Maine Health Data Organization; expanding the contract authority of the board; and changing the major substantive rule designation for the organization's enforcement and quality data rules to routine technical rulemaking.

Committee Amendment "A" (S-59)

The amendment clarifies that the United States Department of Health and Human Services certifies federally qualified health centers and corrects the name of the Division of Licensing and Regulatory Services within the Department of Health and Human Services. It clarifies that one member of the board must be chosen from a list provided by a statewide chamber of commerce. It removes 2 sections of the bill that would have changed rulemaking related to enforcement and quality data from major substantive to routine technical rules.

Enacted Law Summary

Public Law 2007, chapter 136 makes a number of modifications to the laws governing the operation of the Maine

Joint Standing Committee on Health and Human Services

Health Data Organization, including adding Medicare prescription drug sponsors, pharmacy benefits managers and nonlicensed carriers to the definition of "payor"; modifying the appointment process for employer representatives on the Board of Directors of the Maine Health Data Organization; and expanding the contract authority of the board. It clarifies that the United States Department of Health and Human Services certifies federally qualified health centers and corrects the name of the Division of Licensing and Regulatory Services within the Department of Health and Human Services. It clarifies that one member of the board must be chosen from a list provided by a statewide chamber of commerce.

LD 931 Resolve, To Examine Eligibility for MaineCare Long-term Care Services **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J	ONTP	

This resolve directs the long-term care ombudsman program to examine the eligibility requirements for MaineCare long-term care services and to report back to the Joint Standing Committee on Health and Human Services by December 1, 2007. The Joint Standing Committee on Health and Human Services may submit legislation to the Second Regular Session of the 123rd Legislature.

LD 943 Resolve, To Create a Look-back Rule for Residential Care Facilities **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GOOLEY	ONTP	

This resolve directs the Department of Health and Human Services to amend the MaineCare eligibility manual to provide that the 36-month look-back period for the transfer of assets that applies to residents of nursing homes apply to residents of residential care private nonmedical institutions.

LD 957 An Act To Enact a Five-point Welfare Reform Plan **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LANSLEY SNOWE-MELLO	ONTP	

This bill enacts a five-point welfare reform package that imposes a 90-day residency requirement for general assistance, provides a tax credit for employers hiring recipients of welfare benefits, changes the 20-hour work participation requirement in the ASPIRE-TANF program, adjusts benefits to reflect earned income and imposes a 60-month lifetime limitation on ASPIRE-TANF benefits for adults. This bill specifies that the tax credit applies to tax years beginning on or after January 1, 2008.

LD 970 An Act to Repeal Delayed Estate Recovery **PUBLIC 423**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WEBSTER	OTP-AM	H-325

Joint Standing Committee on Health and Human Services

This bill eliminates the current exemption for estate recovery of MaineCare expenditures for the surviving spouses, children or disabled children over the age of 21. The federal Department of Health and Human Services, Centers for Medicare and Medicaid Services has informed the Department of Health and Human Services, Office of MaineCare Services that this provision is in violation of the Deficit Reduction Act of 2005.

Committee Amendment "A" (H-325)

This amendment changes the title of the bill and eliminates delayed estate recovery of MaineCare benefits.

Enacted Law Summary

Public Law 2007, chapter 423 eliminates delayed estate recovery of MaineCare benefits.

LD 973 An Act To Require the Maine Center for Disease Control and Prevention To Publish Abortion Statistics ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
NASS J	ONTP	

This bill requires the Maine Center for Disease Control and Prevention to republish, update and maintain the State's annual abortion vital statistics and make the vital statistics available on its website. The report must include information on the categories of abortion performed and the number of weeks of gestation.

LD 975 Resolve, To Provide Reimbursement for Residential Care Facilities for Rising Heating Costs and Cost-of-living Adjustments DIED ON ADJOURNMENT

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A	OTP-AM	H-599

This resolve directs the Department of Health and Human Services to amend the rules for reimbursing certain private non-medical institutions to provide for full reimbursement of heating costs in facilities and to provide cost-of-living adjustments in state fiscal years 2007-08 and 2008-09. The rules are designated major substantive rules.

Committee Amendment "A" (H-599)

This amendment changes the reimbursement for heating costs from payment for actual heating costs to a separate cost-of-living adjustment for heating cost reimbursement that is reflected in the overall cap on costs in the routine cost component or the cap on room and board reimbursement. The amendment also adds an appropriations and allocations section.

This bill died on adjournment on the Appropriations Table in the Senate.

LD 977 Resolve, To Address the Funding Needs of Air and Ground Emergency and Critical Care Emergency Medical Services RESOLVE 140

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	OTP-AM	H-249

Joint Standing Committee on Health and Human Services

This bill is a concept draft pursuant to Joint Rule 208.

The purpose of this bill is to address the funding needs for the provision of air and ground emergency medical services in the State to provide for reimbursement of services provided by emergency and critical care emergency medical service providers.

Committee Amendment "A" (H-249)

This amendment replaces the concept draft with a resolve. It directs the Department of Health and Human Services, if outside funding is obtained, to convene a working group to review the costs and revenues and growing gap between costs and revenues of providers of air and ground emergency and critical care emergency medical services. The department is required to report to the Joint Standing Committee on Health and Human Services, which is authorized to submit legislation.

Enacted Law Summary

Resolve 2007, chapter 140 directs the Department of Health and Human Services, if outside funding is obtained, to convene a working group to review the costs and revenues and growing gap between costs and revenues of providers of air and ground emergency and critical care emergency medical services. The department is required to report to the Joint Standing Committee on Health and Human Services, which is authorized to submit legislation.

See also the biennial budget, Public Law 2007, chapter 240, page 722 for a contingent appropriation of \$200,000 in Fiscal Year 2008.

LD 980 An Act To Amend the Laws Governing the Burial or Cremation of Certain Persons

PUBLIC 411

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CROSTHWAITE	OTP-AM	H-366

This bill removes siblings from the list of relatives who are responsible for the burial or cremation costs for a person who was eligible to receive municipal general assistance at the time of that person's death.

Committee Amendment "A" (H-366)

This amendment incorporates a fiscal note.

Enacted Law Summary

Public Law 2007, chapter 411 removes siblings from the list of relatives who are responsible for the burial or cremation costs for a person who was eligible to receive municipal general assistance at the time of that person's death.

LD 981 An Act Concerning the Supervision of Nursing Support Staff

PUBLIC 197

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A	OTP	

This bill allows a certified nurse practitioner to delegate certain activities relating to advanced practice registered nursing to employees or support staff when those activities are carried out by custom and usage and are under the

Joint Standing Committee on Health and Human Services

control of the certified nurse practitioner, who is legally liable for their activities.

Enacted Law Summary

Public Law 2007, chapter 197 allows a certified nurse practitioner to delegate certain activities relating to advanced practice registered nursing to employees or support staff when those activities are carried out by custom and usage and are under the control of the certified nurse practitioner, who is legally liable for their activities.

LD 984 **Resolve, To Evaluate MaineCare Finances**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WOODBURY	ONTP	

This bill makes a one-time General Fund appropriation of \$1,000,000 in fiscal year 2007-08 to provide funds to the Office of Program Evaluation and Government Accountability to commission a study to analyze MaineCare's finances through a subcontract with an independent analyst that has no direct connection to State Government.

LD 987 **An Act To Provide Gambling Addiction Counseling Services through the Office of Substance Abuse**

**PUBLIC 116
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A	OTP-AM	H-110

This bill gives the Department of Health and Human Services, Office of Substance Abuse the authority to establish standards governing the provision of gambling addiction counseling services, as well as to administer contracts with community service providers who meet those standards and are funded with money administered by the office.

Committee Amendment "A" (H-110)

This amendment adds an emergency preamble and emergency clause to the bill.

Enacted Law Summary

Public Law 2007, chapter 116 gives the Department of Health and Human Services, Office of Substance Abuse the authority to establish standards governing the provision of gambling addiction counseling services, as well as to administer contracts with community service providers who meet those standards and are funded with money administered by the office.

Public Law 2007, chapter 116 was enacted as an emergency measure effective May 14, 2007.

LD 990 **An Act To Assist Children Who Are Not Receiving Court-ordered Child Support Payments**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRESSEY	ONTP	

This bill requires the Department of Health and Human Services to exclude unpaid court-ordered child support payments from the calculation of income in determining eligibility for public assistance.

Joint Standing Committee on Health and Human Services

LD 995 An Act To Reduce the Expense of Health Care Treatment and Protect the Health of Maine Citizens by Providing Early Screening, Detection and Prevention of Cancer

PUBLIC 341

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	OTP-AM	S-262

This bill makes ongoing General Fund appropriations for a comprehensive cancer program to augment the reach and success of cancer screening, detection and prevention programs in the State.

Committee Amendment "A" (S-262)

This amendment replaces the bill and provides for the implementation of the comprehensive cancer screening, detection and prevention program, as recommended by the Maine Cancer Consortium for The Maine Comprehensive Cancer Control Plan 2006-2010, contingent upon availability of funding. It establishes the Comprehensive Cancer Screening, Detection and Prevention Fund to finance or assist in funding the comprehensive cancer screening, detection and prevention program and gives the Department of Health and Human Services, Bureau of Health rule-making authority. The amendment also adds an appropriation and allocation section to the bill.

Enacted Law Summary

Public Law 2007, chapter 341 provides for the implementation of the comprehensive cancer screening, detection and prevention program recommended by the Maine Cancer Consortium for the "Maine Comprehensive Cancer Control Plan 2006-2010" contingent upon availability of funding. It establishes the Comprehensive Cancer Screening, Detection and Prevention Fund to fund or assist in funding the comprehensive cancer screening, detection and prevention program and gives the Department of Health and Human Services, Bureau of Health rule-making authority.

LD 996 An Act To Support Medical Practice Protocols in Patient Care

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY J	ONTP	

This bill authorizes the Maine Quality Forum to develop practice protocols in any medical specialty area and permits compliance with those practice protocols to be asserted in medical malpractice actions as a presumption that the applicable standard of care has been met.

The bill also allows an insurer to decline to provide coverage for treatment that is not consistent with those practice protocols and that is not documented as a reasonable deviation from those practice protocols by a health care practitioner or a health care provider.

LD 1016 An Act Regarding Residential Care Facilities for Children

**PUBLIC 320
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN	OTP-AM MAJ ONTP MIN	S-250

Joint Standing Committee on Health and Human Services

This bill authorizes the Department of Health and Human Services to license residential parenting facilities for families in need of supportive and rehabilitative parenting services. The services relate to prenatal and postnatal needs of children and their parents, including nutrition, parenting skills and life skills counseling.

Committee Amendment "A" (S-250)

This amendment replaces the bill. It adds an emergency preamble and clause to the bill. The amendment provides a mechanism for an adult parent to live with a child in a licensed residential child care facility when it is in the best interest of the child and grants the Department of Health and Human Services rule-making authority with regard to child welfare placement exceptions.

Enacted Law Summary

Public Law 2007, chapter 320 provides a mechanism for an adult parent to live with a child in a licensed residential child care facility when it is in the best interest of the child and grants the Department of Health and Human Services rule-making authority with regard to child welfare placement exceptions.

Public Law 2007, chapter 320 was enacted as an emergency measure effective June 19, 2007.

LD 1033 An Act Regarding Involuntary Treatment of Mental Health Patients

PUBLIC 446

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
NUTTING J	OTP-AM	H-620 PERRY A S-332

This bill amends the law with regard to inpatient psychiatric treatment as follows.

1. It ensures that a full District Court hearing is held before a person can be involuntarily committed to a psychiatric hospital. At this hearing the examiners report to the District Court as to whether the person is a mentally ill person or is a person with a serious and persistent mental illness, as appropriate to the proceeding, and as to whether the person poses a likelihood of serious harm and the hospital staff and family are able to testify.
2. It enacts new law on mandatory administration of medication that provides protections for the person through a hearing process that uses a panel of 2 psychiatrists and 1 mental health professional. The process also includes a written decision by the panel and an appeal to the Superior Court under the Maine Administrative Procedure Act.
3. It directs the Department of Health and Human Services to amend its rules entitled "Rights of Recipients of Mental Health Services" to reflect the new law on mandatory administration of medication.

Committee Amendment "A" (S-332)

This amendment replaces the bill. The amendment adds to the court procedure for involuntary commitment the option of a request for involuntary treatment. The amendment amends the law on rules adopted by the Department of Health and Human Services regarding standards for treatment of a client absent informed consent. The amendment requires the department to amend those rules to include a clinical review and decision within 4 days of a request by the primary treating physician by a clinical review panel, to specify that orders for involuntary treatment are for the term of commitment and pending any appeal where appropriate and to require the offer of the assistance of a lay advisor and to amend the rules regarding the rights of recipients of mental health services. The rules, which are designated routine technical rules, must be adopted by January 1, 2008 for use beginning on that date. The amendment provides an effective date of January 1, 2008, except that rulemaking begins prior to that date. This

Joint Standing Committee on Health and Human Services

amendment also adds an appropriations and allocations section.

House Amendment "A" (H-620)

This amendment incorporates changes made to the Maine Revised Statutes, Title 34-B, section 3864, subsection 4 by a recently chaptered law in order to prevent a conflict.

Enacted Law Summary

Public Law 2007, chapter 446 adds to the court procedure for involuntary commitment the option of a request for involuntary treatment. The law amends the law on rules adopted by the Department of Health and Human Services regarding standards for treatment of a client absent informed consent. The law requires the department to amend those rules to include a clinical review and decision within 4 days of a request by the primary treating physician by a clinical review panel, to specify that orders for involuntary treatment are for the term of commitment and pending any appeal where appropriate and to require the offer of the assistance of a lay advisor and to amend the rules regarding the rights of recipients of mental health services. The rules, which are designated routine technical rules, must be adopted by January 1, 2008 for use beginning on that date. The law provides an effective date of January 1, 2008, except that rulemaking begins prior to that date.

See also LD 1855.

LD 1044 An Act To Address Eating Disorders in Maine

P & S 20

Sponsor(s)

TUTTLE

Committee Report

OTP-AM

Amendments Adopted

H-359

This bill requires the Department of Health and Human Services, through the Maine Center for Disease Control and Prevention, to create an initiative to provide education and assistance to residents suffering from eating disorders and submit a report to the Joint Standing Committee on Health and Human Services by May 1, 2008. This bill also provides funding of \$138,000 per year for an eating disorder initiative to provide education and assistance to Maine residents suffering from eating disorders.

Committee Amendment "A" (H-359)

This amendment removes the appropriations and allocations section and instead requires the Department of Health and Human Services to undertake the initiative using existing resources.

Enacted Law Summary

Private and Special Law 2007, chapter 20 requires the Department of Health and Human Services to use existing resources to provide education and assistance on eating disorders. The law requires a report to the Health and Human Services Committee by May 1, 2008.

LD 1110 An Act To Create the Maine Council on Poverty and Economic Security

CARRIED OVER

Sponsor(s)

EDMONDS

Committee Report

Amendments Adopted

This bill creates the Maine Council on Poverty and Economic Security, which is comprised of 11 members including the Commissioner of Health and Human Services and the Commissioner of Labor or the commissioners'; designees and 9 members appointed by the Governor representing the business community,

Joint Standing Committee on Health and Human Services

nonprofit agencies, faith-based organizations and the general public to advise the Governor on ending poverty and providing economic security to disadvantaged citizens in the State.

LD 1118 An Act To Provide Certain Requirements for Rules Related to Rate Setting for Mental Retardation Services

**PUBLIC 237
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	OTP-AM	S-126

This bill requires the Department of Health and Human Services to adopt nonemergency major substantive rules for rate setting for providers of mental retardation community services. The bill requires the department, in implementing the pilot program and subsequent rate setting for all providers under the mental retardation waiver, to establish methodology that includes resource allocation plans based on uniform standards for assessing the service needs of each person receiving services, adjustments for regional housing cost variations, employee-related expenses, operation expenses and transportation costs. It requires the department to adopt nonemergency major substantive rules for implementing managed behavioral health care services.

Committee Amendment "A" (S-126)

The amendment changes the title and removes the section pertaining to a methodology for provider rate setting under the mental retardation waiver as well as the section pertaining to rulemaking for managed behavioral health care services. It retains the section that requires the rules for the standardization of rates for providers of care to persons with mental retardation under the waiver to be major substantive rules and adds an emergency preamble and clause. The amendment removes from the bill the restriction that major substantive rules adopted by the Department of Health and Human Services with regard to rate setting for providers of services to persons with mental retardation be nonemergency rules and authorizes the Department of Health and Human Services to adopt major substantive rules on an emergency basis during calendar year 2007.

Enacted Law Summary

Public Law 2007, chapter 237 requires the rules for the standardization of rates for providers of care to persons with mental retardation under the waiver to be major substantive rules. The law authorizes the Department of Health and Human Services to adopt major substantive rules on an emergency basis during calendar year 2007.

Public Law 2007, chapter 237 was enacted as an emergency measure effective June 6, 2007.

LD 1120 An Act To Amend MaineCare Benefits as Allowed by the Federal Deficit Reduction Act of 2005

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	ONTP	

This bill imposes cost sharing in the form of premiums and copayments for services, items and prescription drugs in the MaineCare program consistent with the provisions of the federal Deficit Reduction Act of 2005.

LD 1130 Resolve, To Increase Fairness in Medical Payments

RESOLVE 48

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J	OTP-AM	H-250

Joint Standing Committee on Health and Human Services

This resolve directs the Department of Health and Human Services to implement a system to pay all hospital MaineCare reimbursements based on the diagnosis-related group, or DRG, method that is used by the federal Medicare system.

Committee Amendment "A" (H-250)

This amendment replaces the resolve. It directs the Department of Health and Human Services, with the Edmund S. Muskie School of Public Service, to proceed with its review of the possibility of basing hospital reimbursement under MaineCare on a methodology derived from the federal diagnosis-related group method. The amendment requires a report to the Joint Standing Committee on Health and Human Services and authorizes the committee to submit legislation.

Enacted Law Summary

Resolve 2007, chapter 48 directs the Department of Health and Human Services, with the Edmund S. Muskie School of Public Service, to proceed with its review of the possibility of basing hospital reimbursement under MaineCare on a methodology derived from the federal diagnosis-related group method. The resolve requires a report to the Joint Standing Committee on Health and Human Services and authorizes the committee to submit legislation.

LD 1137 An Act To Provide Payment for Homeless Respite Care Services through the MaineCare Program

ONTP

Sponsor(s)

DUNN

Committee Report

ONTP

Amendments Adopted

This bill is a concept draft pursuant to Joint Rule 208.

This bill proposes to have the MaineCare program pay for homeless respite care services.

LD 1142 An Act To Enhance the Newborn Hearing Program

PUBLIC 236

Sponsor(s)

MAKAS

Committee Report

OTP

Amendments Adopted

This bill authorizes the Department of Health and Human Services to collect data necessary to evaluate the effectiveness of services provided to newborns and children up to 3 years of age, including all screening, evaluation and diagnoses made for such children with, or at risk of, hearing loss. The bill also makes uniform the references to newborn infants and children up to 3 years of age.

Enacted Law Summary

Public Law 2007, chapter 236 authorizes the Department of Health and Human Services to collect data necessary to evaluate the effectiveness of services provided to newborns and children up to 3 years of age, including all screening, evaluation and diagnoses made for such children with, or at risk of, hearing loss.

Joint Standing Committee on Health and Human Services

LD 1146 An Act To Promote Healthy Practices for MaineCare Members

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J MARTIN	ONTP	

This bill requires increased copayments that are mandatory for the MaineCare program beginning January 1, 2008 for members who smoke tobacco products, who miss appointments with health care practitioners without just cause or who misuse prescription drugs. The copayments are double the normal amount and are mandatory for the member to obtain MaineCare services. The bill requires the Department of Health and Human Services to adopt routine technical rules to impose the new copayments.

LD 1162 An Act To Remove Disparities in the Administration of Emergency Aid

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS	ONTP	

This bill increases the emergency assistance program's allocation from \$750,000 to \$2,250,000 and expands coverage to include childless adults, including seniors and people with disabilities.

LD 1170 An Act To Exempt Nationally Accredited Child Welfare and Behavioral Health Care Organizations from State Licensing Requirements

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
NASS R	ONTP MAJ OTP-AM MIN	

This bill requires the Department of Health and Human Services to approve and license substance abuse treatment, child and adult welfare and behavioral health agencies, programs and facilities that receive and maintain accreditation by nationally recognized accrediting bodies. The department shall include such an agency, program or facility on any list of approved and licensed agencies, programs and facilities maintained by the department. The agencies, programs and facilities that have been approved and licensed are not subject to inspection or examination by the department unless there is a critical incident that warrants investigation. Notwithstanding a substance abuse treatment program's or facility's maintenance of accreditation, the department may revoke the certificate of approval and remove a treatment program or facility from the department's list of approved programs and facilities for failure to provide data, statistics, schedules and other information reasonably required by the department pursuant to the Maine Revised Statutes, Title 5, section 20024. All agencies, programs and facilities may have approval and licensing revoked or modified by the department for findings resulting from the investigation of a critical incident.

Committee Amendment "A" (S-194)

This amendment, which is the minority report, incorporates a fiscal note. This amendment was not adopted.

Joint Standing Committee on Health and Human Services

LD 1176 An Act Regarding MaineCare Prescription Drug and Tobacco Sales BY REQUEST **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINKHAM	ONTP	

This bill prohibits Medicaid drug formulary decisions from being based solely on the amount of the anticipated prescription drug rebate or financial benefits that the State would receive as a result of adding or deleting the drug to the list of drugs subject to reimbursement and coverage under the MaineCare program. It also repeals the restrictions on delivery sales and illegal delivery of tobacco products in the State.

LD 1179 An Act To Provide Regional Coordination and Planning for Public Health Programs and Activities **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BARSTOW	ONTP	

This bill authorizes county commissioners to set up regional public health coordinating councils based on county boundaries. County commissioners may appoint members to the councils, or authorize municipal officers to do so, and must include representatives of the counties, municipalities and the local health community. If county commissioners do not choose to set up councils, then a caucus of municipal officers from at least one-third of the municipalities in a region may do so. If neither county commissioners nor municipal officers set up a council, then the Director of the Maine Center for Disease Control and Prevention within the Department of Health and Human Services shall do so. The councils are responsible for conducting a health needs assessment of the region, developing a health plan for the region and providing annual reports to the county commissioners. The councils are authorized to seek funding sources through grants and may enter into contracts with the State or health-related organizations.

See also LD 1812.

LD 1184 Resolve, To Establish a Commission To Study the Possibility of Implementing the Proposed Healthy Americans Act **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PRIEST	ONTP	

This resolve establishes the Commission to Study the Possibility of Implementing the Healthy Americans Act proposed by Senator Ron Wyden of Oregon, which would establish a centrally financed system of private health insurance for those not covered by Medicare.

LD 1187 An Act To Recoup Health Care Funds through the Maine False Claims Act **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT	ONTP	

Joint Standing Committee on Health and Human Services

This bill enacts the Maine False Claims Act in order to protect the state and federal governments against false and fraudulent claims under the Medicaid program known in the State as the MaineCare program under the Maine Revised Statutes, Title 22, chapter 855. This bill provides authorization for actions, referred to as qui tam actions, brought by a person for the person and for the State in the name of the State. This bill designates the person who brings the qui tam action as the relator. This bill provides protection from discrimination for an employee who participates in a qui tam action in furtherance of the action. This bill provides possible recoveries for the relator in addition to recoveries for the State. This bill establishes the False Claims Act Fund to receive the proceeds payable to the State as a result of false claims litigation.

LD 1198 *Resolve, Regarding the Provision of Over-the-counter Medications in the MaineCare Program*

RESOLVE 75

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	OTP-AM	S-134

This bill discontinues MaineCare coverage for over-the-counter drugs beginning October 1, 2007 and directs the Department of Health and Human Services to amend the rules of the MaineCare program for coverage of medically necessary medication to carry out the provisions of this bill. The rules are designated as routine technical rules.

Committee Amendment "A" (S-134)

This amendment replaces the bill and makes it a resolve. It directs the Department of Health and Human Services, Office of MaineCare Services to undertake an educational initiative for health care practitioners who prescribe medications under the MaineCare program to provide information on prescription medications and any available over-the-counter equivalents and to remind practitioners that MaineCare will reimburse for over-the-counter medications only when they are medically necessary.

Enacted Law Summary

Resolve 2007, chapter 75 directs the Department of Health and Human Services, Office of MaineCare Services to undertake an educational initiative for health care practitioners who prescribe medications under the MaineCare program to provide information on prescription medications and any available over-the-counter equivalents and to remind practitioners that MaineCare will reimburse for over-the-counter medications only when they are medically necessary.

LD 1209 *An Act To License Weekly Housing Programs BY REQUEST*

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROMLEY	ONTP	

This bill is a concept draft pursuant to Joint Rule 208.

This bill proposes to direct the Department of Health and Human Services to adopt rules to license housing programs for weekly tenancies by October 1, 2007. The rules, which must be designated as routine technical rules, must provide for weekly payment of rent and appropriate procedures for the landlord or tenant to give notice to terminate the tenancy.

Joint Standing Committee on Health and Human Services

LD 1217 An Act To Improve Health Standards in Piercing Procedures

PUBLIC 184

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PLOWMAN	OTP-AM	S-104

This bill includes in the laws concerning body piercing the piercing of an ear with a disposable, single-use stud or solid needle that is applied using a mechanical device to force the needle or stud through the ear.

Committee Amendment "A" (S-104)

This amendment replaces the bill. It improves health standards for body piercing by classifying all piercing of the ear except for the earlobe as body piercing.

Enacted Law Summary

Public Law 2007, chapter 184 improves health standards for body piercing by classifying all piercing of the ear except for the earlobe as body piercing.

LD 1239 Resolve, To Establish a Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine

RESOLVE 133
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FARRINGTON	OTP-AM	H-365 H-566 PERRY A

This resolve establishes the Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine. The working group shall submit a report that includes its findings and recommendations, including suggest legislation, to the Second Regular Session of the 123rd Legislature.

Committee Amendment "A" (H-365)

This amendment changes the working group membership, decreasing it from 18 to 13, and strikes the language that allows for an extension to complete the study and the language that allows the working group to seek outside funding.

House Amendment "B" (H-566)

This amendment adds four members to the Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine. It adds back language requiring the working group to seek outside funding that was mistakenly removed by the committee amendment and changes the date that funding must be received from September 15, 2007 to October 1, 2007. It also changes the appropriations and allocations section.

Enacted Law Summary

Resolve 2007, chapter 133 establishes the Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine. The working group shall submit a report that includes its findings and recommendations, including suggest legislation, to the Second Regular Session of the 123rd Legislature. The working group consisting of 17 members, requires outside funding to be secured by October 1, 2007.

Joint Standing Committee on Health and Human Services

Resolve 2007, chapter 133 was passed as an emergency measure effective June 27, 2007.

LD 1250 An Act To Implement an Oral Health Capitation System for Children on MaineCare **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	ONTP	

This bill enacts a capitated comprehensive oral health program for children under the MaineCare program. The program must provide 4 levels of oral health treatment: diagnostic, preventive and disease management services, including health promotion, risk assessment, primary prevention and disease suppression; basic restorative care; advanced restorative care; and catastrophic care, including orthodontia. The program must provide market-based fee-for-service reimbursement for dentists and other providers. The bill requires the Department of Health and Human Services to adopt rules for implementation and designates the rules as routine technical rules.

LD 1252 An Act To Amend State Funding Reimbursement under the General Assistance Program **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ROSEN R	ONTP	

This bill makes two changes to the general assistance state reimbursement system. First, the bill amends the calculation used to trigger 90% state reimbursement for general assistance expenses from .0003% of state valuation to .00025% of state valuation. Second, the bill requires the State to reimburse municipalities 60% of the total direct general assistance related expense, rather than 50% as required by current law.

LD 1280 Resolve, Regarding the Training Curriculum and Skills of Certified Nursing Assistants **RESOLVE 50**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	OTP-AM A OTP-AM B ONTP C	S-108

This bill expands the scope of practice of certified nursing assistants to include the management of feeding tubes, suction machines and cough-assist devices.

Committee Amendment "A" (S-108)

The amendment replaces the bill with a resolve. It directs the State Board of Nursing to review the training curriculum and skills of certified nursing assistants and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008.

Enacted Law Summary

Resolve 2007, chapter 50 directs the State Board of Nursing to review the training curriculum and skills of certified nursing assistants and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008.

Joint Standing Committee on Health and Human Services

LD 1286 An Act To Impose Tighter Controls over Addictive Prescription Drugs

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	ONTP	

This bill amends the law governing the Controlled Substances Prescription Monitoring Program to provide a mechanism for pharmacists and other dispensers of prescription drugs to delay filling a prescription for a controlled substance of a person whose pattern of use exceeds the standards of use, to dispense only part of the prescription or to refuse to dispense any of the prescription. The bill directs the Maine Board of Pharmacy and the Department of Health and Human Services, Office of Substance Abuse to adopt routine technical rules to implement the provisions of the bill.

LD 1288 An Act To Limit Recertification of Nursing Facility Residents to One Regulatory Organization

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	ONTP	

This bill requires the Department of Health and Human Services to accept assessments of eligibility for nursing facility services completed for federal purposes for persons with end-stage diseases and persons who are terminally ill.

LD 1289 An Act To Provide Oversight for Crematoriums

PUBLIC 225

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HANLEY S	OTP-AM	H-276

This bill transfers licensing and regulation responsibility for crematoriums from the Department of Health and Human Services to the Department of Professional and Financial Regulation and allows a licensed funeral home to conduct cremations.

Committee Amendment "A" (H-276)

This amendment removes provisions of the bill that included "cremation" in the definitions of "funeral establishment" and "practice of funeral service." It also maintains the requirement that crematoriums be licensed by the Department of Health and Human Services and requires the payment of a licensing fee. It designates rules adopted pursuant to the law as routine technical rules. It updates the grammar in current law on crematoriums.

Enacted Law Summary

Public Law 2007, chapter 225 requires paying of a licensing fee to the Department of Health and Human Services for a crematorium license and designates the licensing rules as routine technical rules. Also it updates the grammar in the laws on licensing crematoriums.

Joint Standing Committee on Health and Human Services

LD 1308 Resolve, Regarding the Use of Restraints in Nursing Facilities

RESOLVE 60

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
NUTTING J	OTP-AM	S-120

This bill allows a nursing home to place side rails on the bed of a patient upon request of the patient or the patient's family or legal guardian.

Committee Amendment "A" (S-120)

This amendment replaces the bill with a resolve. The amendment requires the Department of Health and Human Services to adopt rules to ensure that prospective residents of nursing facilities and their families or guardians are provided information about restraint policies. The amendment also requires reports from the Department of Health and Human Services to the Health and Human Services Committee once a year for three years regarding the use of bed side rails as restraints.

Enacted Law Summary

Resolve 2007, chapter 60 requires the Department of Health and Human Services to adopt rules to ensure that prospective residents of nursing facilities and their families or guardians are provided information about restraint policies. The resolve also requires reports from the Department of Health and Human Services to the Health and Human Services Committee once a year for three years regarding the use of bed side rails as restraints.

LD 1309 An Act To Provide Equity in Funding for Women's Health Services

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS	ONTP	

This bill provides financial assistance to eligible women for abortion services.

LD 1354 Resolve, To Direct the Department of Health and Human Services To Establish a Physician Specialist Program

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE	ONTP	

This resolve directs the Department of Health and Human Services to evaluate and establish a program that facilitates the process by which physicians further their education to become specialists in a field of medicine.

Joint Standing Committee on Health and Human Services

LD 1361 An Act Concerning Certain Flavored Cigarettes and Flavored Cigars and Hard Snuff

PUBLIC 467

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>	
MILLS P	OTP-AM	H-544	FITTS
		S-180	
		S-230	MILLS P
		S-354	ROTUNDO

This bill prohibits the sale or distribution of certain flavored cigarettes and cigars in the State.

Committee Amendment "A" (S-180)

This amendment removes from the bill the provisions concerning promotional materials and provides a beginning date of July 1, 2009 for the restrictions on selling flavored cigarettes and cigars. The amendment provides a process for certain flavored cigarettes and cigars to be sold, including an exemption granted by the Attorney General. It restricts purchases of flavored cigarettes and cigars by tobacco distributors. It requires the Attorney General to maintain on a publicly accessible website a list of flavored cigarettes and cigars that are authorized for sale in the State. It provides a transition time period for flavored tobacco products held in stock before July 1, 2009. It also bans the sale of the smokeless tobacco product called "hard snuff."

Senate Amendment "A" (S-230)

This amendment requires the Attorney General to verify the statement by the manufacturer that a flavored cigarette or flavored cigar was on the market prior to January 1, 1985. The amendment also requires the Attorney General to establish and administer a process by rule for granting exemptions for flavored cigarettes and flavored cigars that were first on the market after January 1, 1985 based on a determination by the Attorney General that the characterizing flavor and the associated packaging, promotion and brand style do not directly or indirectly target youth or encourage the initiation of smoking. This amendment makes the rules adopted by the Attorney General major substantive rather than routine technical.

House Amendment "A" (H-544)

This amendment requires that the Attorney General adopt rules no later than January 15, 2008 and report to the Joint Standing Committee on Health and Human Services on the preliminary implementation of the law no later than February 1, 2008. This amendment authorizes the committee to report out legislation to the Second Regular Session of the 123rd Legislature.

Senate Amendment "B" (S-354)

This amendment provides for the transfer of funds from the Fund for a Healthy Maine to the General Fund to offset the revenue loss to the General Fund from the prohibition on the sale of certain flavored cigarettes and cigars.

Enacted Law Summary

Public Law 2007, chapter 467 bans the sale of certain flavored cigarettes and cigars beginning January 1, 2009. It provides for adoption of major substantive rules by the Attorney General and a report on preliminary implementation of the law to the Health and Human Services Committee by February 1, 2008. The law authorizes the committee to report out legislation to the Second Regular Session of the 123rd Legislature. The law provides for a transfer of funds from the Fund for a Healthy Maine to offset revenue loss. The law bans the sale of "hard snuff" beginning September 20, 2007.

Joint Standing Committee on Health and Human Services

LD 1369 Resolve, To Promote High-quality Before-school and After-school Programs

RESOLVE 41

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GROSE	OTP-AM	H-200

This resolve, a concept draft pursuant to Joint Rule 208, proposes to create a study group to review and make recommendations for administrative or legislative action, or both, concerning ways to promote high-quality before-school and after-school programs through child care licensing and quality rating if those programs are "custodial" in nature as opposed to special purpose programs, such as a swimming team or other sports teams, which would be exempt from child care licensure under the proposals from the study group. The study group would also explore ways in which the State can maximize the effect of available funding on the broad community needs of school-age children and families to determine whether federal grants administered by the State can be instrumental in meeting the broader needs of children and families in the community, such as the social growth of children and the needs of working families, and effectively promoting cooperation with existing community programs serving school-age children and their families.

Committee Amendment "A" (H-200)

This amendment replaces the concept draft. It requires the Department of Health and Human Services to convene a working group to review information and make recommendations on ways to provide high-quality before-school and after-school programs. It requires the department to invite specific groups and other interested parties to participate in the working group and to appoint a representative of the Maine After School Network as the chair of the working group. It charges the working group with reviewing the rules, standards and policies for the range of before-school and after-school programs for school-age children and making recommendations on standardizations, adjustments and needed collaboration to best serve the broad range of the needs of children and families within existing support systems for children and families.

Enacted Law Summary

Public Law 2007, chapter 41 requires the Department of Health and Human Services to convene a working group to review information and make recommendations on ways to provide high-quality before-school and after-school programs. It requires the department to invite specific groups and other interested parties to participate in the working group and to appoint a representative of the Maine After School Network as the chair of the working group. It charges the working group with reviewing the rules, standards and policies for the range of before-school and after-school programs for school-age children and making recommendations on standardizations, adjustments and needed collaboration to best serve the broad range of the needs of children and families within existing support systems for children and families.

LD 1370 An Act Requiring Public Disclosure of Health Care Prices

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WOODBURY	ONTP MAJ OTP MIN	

This bill requires health care practitioners to provide the same consumer price information required of hospitals and ambulatory surgical centers effective January 1, 2008.

Joint Standing Committee on Health and Human Services

**LD 1371 Resolve, To Study the Impact of Social Services and Corrections Policies
on Homeless People in Maine**

**RESOLVE 131
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DUNN	OTP-AM MAJ ONTP MIN	H-201

This resolve provides funding for emergency homeless shelters. The resolve establishes the Commission To Study the Funding Issues Regarding Emergency Homeless Shelters. The commission shall submit a report to the Joint Standing Committee on Health and Human Services and to the Legislative Council by December 1, 2007. The commission shall examine the issues concerning affordable housing for the homeless, the causes of and solutions for homelessness, how the money designated for homeless shelters is used and whether the funding formula for distributing funds to the homeless shelters should be amended.

Committee Amendment "A" (H-201)

This amendment replaces the resolve and changes the title. It directs the Statewide Homeless Council to coordinate a study of the connection between the increasing numbers of homeless persons in the State and the existing policies and procedures employed by the Department of Health and Human Services and the Department of Corrections that may affect homeless persons. The study must include a review of best practices for homeless shelters and current practices used by social services and corrections agencies and facilities, including discharge practices, the rights and responsibilities of persons with mental illness and co-occurring disorders and best practices for housing and supportive services. The Statewide Homeless Council shall invite the participation of representatives of the Department of Health and Human Services including the Office of Substance Abuse, the Department of Corrections, the Maine State Housing Authority, representatives of hospitals in the State, statewide organizations representing homeless persons, representatives of community mental health provider agencies, homeless service providers and persons with mental illness, persons with substance abuse issues and other interested parties. The Statewide Homeless Council is required to report to the Joint Standing Committee on Health and Human Services by January 15, 2008.

Enacted Law Summary

Resolve 2007, chapter 131, which is entitled "Resolve, To Study the Impact of Social Services and Corrections Policies on Homeless People in Maine," directs the Statewide Homeless Council to coordinate a study of the connection between the increasing numbers of homeless persons in the State and the existing policies and procedures employed by the Department of Health and Human Services and the Department of Corrections. The study must include a review of best practices for homeless shelters and current practices used by social services and corrections agencies and facilities, including discharge practices, the rights and responsibilities of persons with mental illness and co-occurring disorders and best practices for housing and supportive services. The Statewide Homeless Council shall invite the participation of interested parties specified in the resolve. The Statewide Homeless Council is required to report to the Joint Standing Committee on Health and Human Services by January 15, 2008.

Resolve 2007, chapter 131 was passed as an emergency measure effective June 27, 2007.

**LD 1386 An Act To Make Criminal Background Checks and Department of
Health and Human Services Child Protective Substantiation Checks on
Volunteers More Affordable**

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WALCOTT	ONTP MAJ OTP-AM MIN	

Joint Standing Committee on Health and Human Services

This bill limits to \$3 the fee that the Department of Health and Human Services may charge for a check of its records to see if a person is named as substantiated child abuser and that the Department of Public Safety, State Bureau of Identification may charge for a criminal history record check of a person if the requestor is a nonprofit corporation and the person is a volunteer who may be working with a minor for the nonprofit corporation.

Committee Amendment "A" (H-582)

This amendment, which was not adopted, is the minority report and incorporates a fiscal note.

LD 1396 **Resolve, To Provide for an Independent Evaluation of the Procedures and Programs of the Department of Health and Human Services for Promoting Permanency and Safety for Children**

RESOLVE 137

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WESTON	OTP MAJ ONTP MIN	S-119

This resolve requires the Department of Health and Human Services, within existing resources, to contract with an independent expert or organization to study the effects of recent child care program reforms to ensure that each child's best interests are being protected and that adequate provision for each child's safety and well-being is made in the plans developed for each placement, discharge or other transition resulting from a decision made regarding the child by or on behalf of the department. The department is directed to submit its findings and any necessary implementing legislation to the Joint Standing Committee on Health and Human Services.

Committee Amendment "A" (S-119)

This amendment changes the date by which the Department of Health and Human Services must report to the Joint Standing Committee on Health and Human Services from July 15, 2007 to December 1, 2007 and specifies that the committee may submit legislation to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Resolve 2007, chapter 137 requires the Department of Health and Human Services to contract with an independent expert or organization to study the effects of recent child care program reforms to ensure that each child's best interests are being protected and that adequate provision for each child's safety and well-being is made in the plans developed for each placement, discharge or other transition resulting from a decision made regarding the child by or on behalf of the department. The department is directed to submit its findings and any necessary implementing legislation to the Joint Standing Committee on Health and Human Services by December 1, 2007, which is authorized to submit legislation to the Second Session of the 123rd Legislature.

LD 1398 **An Act To Enable Restaurants To Allow Dogs In Outdoor Portions of Those Establishments**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY J	ONTP	

This bill allows a municipality to pass an ordinance to allow an eating establishment to allow a patron to bring a dog into a designated outdoor area of the establishment. The municipal ordinance must require the eating establishment to provide detailed information regarding the designated area and follow rules concerning the handling and conduct of dogs in the designated area, including posting the rules for employees and patrons to see. This bill also provides for cooperation and communication between the municipality and the Department of Health and Human Services.

Joint Standing Committee on Health and Human Services

LD 1418 An Act To Provide Patients with Their Medication

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
STRIMLING	ONTP MAJ OTP-AM MIN	

This bill:

1. Increases the usable amount of marijuana for medical use to up to 12 plants and exempts seeds, stems and roots from the weight limitations;
2. Changes a person who may document the need for a person to use marijuana for medical purposes from a physician to a person who is licensed to prescribe medicine;
3. Directs the Department of Health and Human Services to create a registry system with identification cards for patients eligible to receive marijuana for medical use and their care givers;
4. Immunizes patients eligible to receive marijuana for medical use and their care givers from search, arrest or prosecution or from civil penalty for using marijuana for medical use;
5. Prohibits a law enforcement officer from cooperating with federal authorities in investigating, searching, arresting or prosecuting patients eligible to receive marijuana for medical use and their care givers and registered dispensaries; and
6. Directs the Department of Health and Human Services to create a registry of nonprofit corporations that may become registered dispensaries to acquire, possess, cultivate, manufacture, deliver, transfer, transport, supply or dispense marijuana, marijuana seeds, marijuana cultivation equipment and marijuana-related supplies and educational materials to patients eligible to receive marijuana for medical use and their care givers.

Committee Amendment "A" (S-88)

This amendment is the minority report of the committee. It changes the definition of "usable amount of marijuana for medical use" from 2 1/2 ounces or less to 3 1/2 ounces or less and strikes all other provisions of the bill.

See also LD 770.

LD 1421 Resolve, Regarding Tobacco Cessation and Treatment

RESOLVE 34

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN	OTP-AM MAJ ONTP MIN	S-89

This resolve:

1. Directs the Department of Health and Human Services to adopt rules to implement for MaineCare the best practice treatment as delineated by the United States Department of Health and Human Services, Public Health

Joint Standing Committee on Health and Human Services

Service to reduce the barriers to effective tobacco cessation treatment;

2. Directs the Department of Professional and Financial Regulation, Bureau of Insurance to adopt rules to mandate that an insurer providing health insurance provide a standard insurance benefit for tobacco cessation treatment that is the same as that provided by MaineCare; and
3. Directs the Department of Health and Human Services and the Department of Professional and Financial Regulation, Bureau of Insurance to collaborate with the Maine Center for Disease Control and Prevention, Partnership for a Tobacco-Free Maine to develop a design of a model tobacco cessation treatment program and to ensure the effective implementation of the tobacco cessation treatment insurance benefit.

Committee Amendment "A" (S-89)

This amendment replaces the resolve and substitutes a new title. The amendment directs the Department of Health and Human Services, through the Partnership for a Tobacco-Free Maine, Maine Center for Disease Control and Prevention and the Office of MaineCare Services, to undertake a study of best practice treatment and clinical practice guidelines for tobacco cessation treatment. The amendment requires the department to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 and authorizes the committee to submit legislation.

Enacted Law Summary

Resolve 2007, chapter 34 directs the Department of Health and Human Services, through the Partnership for a Tobacco-Free Maine, Maine Center for Disease Control and Prevention and the Office of MaineCare Services, to undertake a study of best practice treatment and clinical practice guidelines for tobacco cessation treatment. The resolve requires the department to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 and authorizes the committee to submit legislation.

LD 1437 An Act To Review Prescription Drug Prior Authorization under MaineCare

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS P	ONTP	

This bill adds language regarding prior authorization to the MaineCare drug formulary statute and, beginning October 1, 2007, requires an annual review of the drugs subject to prior authorization, the clinical and scientific basis for prior authorization and analysis of the economic implications to the MaineCare program.

LD 1440 An Act To Prohibit the Sale or Distribution of Software That Contains Inappropriate Advertising of Prescription Drugs

PUBLIC 362

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT MARRACHE	OTP-AM MAJ ONTP MIN	H-481

This bill prohibits computer software that assists a health care practitioner in prescribing drugs from influencing the prescribing decision of the health care practitioner through any means, including, but not limited to, advertising, instant messaging and pop-up advertisements.

Committee Amendment "A" (H-481)

This amendment is the majority report of the committee. The amendment adds to the bill a definition of "prescriber," clarifies that the prohibition is on the sale or distribution of certain software, provides a starting date of

Joint Standing Committee on Health and Human Services

January 1, 2008 and provides exceptions for in-house equipment in a hospital and for information provided to a prescriber about prescription drug formulary compliance, patient care management or pharmacy reimbursement.

Enacted Law Summary

Public Law 2007, chapter 362 prohibits the sale or distribution of computer software beginning January 1, 2008, that attempts to influence a prescribing decision of a prescriber. The law includes an exception for hospital systems and for information about formularies, care management and for pharmacy reimbursements.

LD 1446 An Act To Protect Children from Mercury and Thimerosal Toxicity in Immunizing Agents **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BURNS NUTTING J	ONTP	

Beginning January 1, 2008, this bill prohibits the use of more than trace amounts of mercury or thimerosal in any immunizing agent for administration to children under 8 years of age and to pregnant women. It imposes requirements for labeling and written information packaged with the immunizing agent. It provides for an exemption if the Commissioner of Health and Human Services determines that an immunizing agent containing more than a trace amount is necessary due to an actual or potential bioterrorist incident or public health emergency. The bill also directs the department to develop a plan to ensure that all immunizing agents are mercury-free and thimerosal-free, including considering the requirement of the use of single-dose immunizing agents.

LD 1450 An Act To Create Equity in Hospital Charges **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WALCOTT	ONTP	

This bill requires a hospital to apply the same allowance or discount against the medical expenses of a self-pay patient as the hospital would apply to MaineCare or Medicare, whichever is less. A self-pay patient is a patient who does not have insurance coverage and whose family income is less than 400% of the federal poverty guidelines.

LD 1451 An Act To Promote the Health and Safety of Maine Consumers **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRYANT M	ONTP	

This bill requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention to publish on a publicly accessible Internet site the inspection ratings, including violations and fines assessed, of all eating establishments inspected by the Department of Health and Human Services.

LD 1463 An Act To Prevent Elder Prescription Drug Abuse **DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROMLEY	OTP-AM	S-159

Joint Standing Committee on Health and Human Services

This bill makes a one-time General Fund appropriation of \$100,000 in fiscal year 2007-08 to the University of Maine Center on Aging to study and devise an action plan to prevent prescription drug abuse by the elderly and requires the University of Maine Center on Aging to report to the Joint Standing Committee on Health and Human Services no later than September 15, 2008 on the results of the study to prevent prescription drug abuse by the elderly and recommendations for future actions.

Committee Amendment "A" (S-159)

This amendment changes the University of Maine Center on Aging's study to an educational campaign.

This bill died on adjournment on the Appropriations Table.

LD 1501 An Act To Set Standards for Interviewing Children Who Are Subjects of a Child Protective Intervention

PUBLIC 132

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH	OTP-AM MAJ ONTP MIN	H-140

This bill clarifies that the Department of Health and Human Services may interview a child at a school if necessary to carry out the department's child protection activities. It clarifies that school officials must cooperate with the conduct of such an interview under penalty of law.

Committee Amendment "A" (H-140)

The amendment requires a department caseworker to discuss a child's circumstances with school officials as necessary for the provision of emotional support to the child prior to and following a child protective intervention interview. It adds the word "guardian" to the provision of the bill that prohibits school officials from requiring notice or consent from a parent.

Enacted Law Summary

Public Law 2007, chapter 132 clarifies that the Department of Health and Human Services may interview a child at a school if necessary to carry out the department's child protection activities. School officials must cooperate with the conduct of such an interview under penalty of law. It requires a department caseworker to discuss a child's circumstances with school officials as necessary for the provision of emotional support to the child prior to and following a child protective intervention interview. It prohibits school officials from requiring notice be sent to parents or guardians or that consent from a parent or guardian be given before a child is interviewed.

LD 1509 Resolve, To Protect Nursing Facilities

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SCHNEIDER	ONTP	

This resolve directs the Department of Health and Human Services to amend its principles of reimbursement for nursing facilities to provide that a nursing facility that receives reimbursement from MaineCare for more than 70% of its residents must receive an additional 0.5% in reimbursement for each 5% increment that its percentage of MaineCare patients exceeds 70%, rounded to the nearest 5% increment.

Joint Standing Committee on Health and Human Services

LD 1523 An Act Requiring Heavy Metal-free Immunizing Agents

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
COURTNEY	ONTP	

Beginning January 1, 2008, this bill prohibits the use of more than trace amounts of a heavy metal, including mercury or thimerosal, in any immunizing agent for administration to a person in this State. It imposes requirements for labeling and written information packaged with the immunizing agent. It provides for an exemption if the Commissioner of Health and Human Services determines that an immunizing agent containing more than a trace amount is necessary due to an actual or potential bioterrorist incident or public health emergency. The bill also directs the Department of Health and Human Services to develop a plan to ensure that all immunizing agents are free of heavy metals, including mercury and thimerosal, including considering the requirement of the use of single-dose immunizing agents.

LD 1527 An Act To Set Maximum Allowable Television Viewing Hours for State-licensed Child Care Facilities

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TURNER	ONTP	

This bill requires a child care facility that provides day care to not allow any television for a child under 2 years of age and to allow only one hour of television a day for a child 2 to 5 years of age.

LD 1535 Resolve, To Study the Certificate of Need Program

RESOLVE 110

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER	OTP-AM MAJ ONTP MIN	H-519 H-553 PERRY A

This resolve creates the 12-member Work Group to Review and Recommend Improvements for the Certificate of Need Program, which includes 6 members appointed by the President of the Senate and the Speaker of the House, 4 members appointed by the Governor, a nonvoting ex officio member from the Governor's Office of Health Policy and Finance and a nonvoting ex officio member from the Department of Health and Human Services. The work group may hold up to 4 meetings to prioritize and examine some or all of 11 issues that are listed in the resolve and then, based on findings from the examination of the prioritized issues, identify improvements and make recommendations for changes in law or rule. The resolve requires the Department of Health and Human Services to provide a certificate of need background report to the work group no later than 45 days after the effective date of this resolve. The resolve also requires the work group to submit a report that includes its findings and recommendations, including suggested legislation, for presentation to the Second Regular Session of the 123rd Legislature by December 1, 2007 and authorizes the work group to introduce legislation related to its report.

Committee Amendment "A" (H-519)

This amendment is the majority report of the committee. The amendment replaces the resolve, but retains many of the original provisions. In addition, it directs the Department of Health and Human Services to convene a work group on the certificate of need program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008. The amendment authorizes the committee to submit legislation to the Second Regular Session of the 123rd Legislature.

Joint Standing Committee on Health and Human Services

House Amendment "A" (H-553)

This amendment adds 4 members to the work group on the certificate of need program.

Enacted Law Summary

Resolve 2007, chapter 110 directs the Department of Health and Human Services to convene a work group on the certificate of need program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008. The resolve authorizes the committee to submit legislation to the Second Regular Session of the 123rd Legislature.

LD 1536 Resolve, Directing the Department of Health and Human Services To Reform Maine's Noncategorical Medicaid Program

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HOLMAN	ONTP	

This resolve requires the Department of Health and Human Services to make reforms to the state Medicaid program for noncategorical Medicaid recipients that will contain costs until the State can sustain a more generous system. It would require the department to evaluate the program and propose reforms to the Second Regular Session of the 123rd Legislature and any legislation needed to implement reforms. The resolve requires the department to limit the eligibility and benefits for noncategorical Medicaid recipients during fiscal years when the state and local tax burden ranks in the highest 1/3 of all states as determined by the Revenue Forecasting Committee, the State Tax Assessor and nongovernmental organizations that represent differing viewpoints, including the Maine Center for Economic Policy and the Maine Economic Research Institute. It would allow the department to increase benefits only when the state and local tax burden ranks in the middle 1/3 of all states as determined by the Revenue Forecasting Committee, the State Tax Assessor and nongovernmental organizations that represent differing viewpoints.

LD 1537 Resolve, To Review Remote Access Medicine, Hospice and Home Health Care under MaineCare

RESOLVE 111

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	OTP-AM	H-484

This resolve requires the Department of Health and Human Services to adjust the rates for home health agencies providing care under the MaineCare program and to add an annual review and adjustment. The rules, which are designated as routine technical rules, must be amended by October 1, 2007. The resolve also directs the department to assess the impact of providing home care and hospice benefits to MaineCare members enrolled under the noncategorical adult waiver and to report to the Joint Standing Committee on Health and Human Services by December 1, 2007.

Committee Amendment "A" (H-484)

This amendment provides a new title and replaces the resolve. The amendment directs the Department of Health and Human Services to review certain aspects of the MaineCare program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 with recommendations for legislation and rule and funding changes. The aspects that must be reviewed include MaineCare reimbursement for remote access medicine and hospice and home health care benefits for noncategorical adults. The joint standing committee is authorized to submit legislation to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Joint Standing Committee on Health and Human Services

Resolve 2007, chapter 111 directs the Department of Health and Human Services to review certain aspects of the MaineCare program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 with recommendations for legislation and rule and funding changes. The aspects that must be reviewed include MaineCare reimbursement for remote access medicine and hospice and home health care benefits for noncategorical adults. The joint standing committee is authorized to submit legislation to the Second Regular Session of the 123rd Legislature.

**LD 1566 An Act To Allow the State Timely Opportunity To Participate in
Settlement Negotiations for MaineCare Benefits**

PUBLIC 381

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WEBSTER	OTP-AM	S-306 BRANNIGAN

Current Maine law requires recipients or their attorneys to notify the Department of Health and Human Services when they make a claim to recover the medical costs that were paid by MaineCare. The current law does not specify when the notification must be made. A recent U.S. Supreme Court decision, *Arkansas v. Ahlborn*, requires states to further refine their laws to allow states to participate in negotiations in a timely manner. This bill grants the State that authority by requiring that notification be made prior to when settlement negotiations begin.

Senate Amendment "A" (S-306)

This amendment clarifies the obligation to provide notice to the Department of Health and Human Services when a MaineCare recipient has received benefits paid for by the MaineCare program.

Enacted Law Summary

Public Law 2007, chapter 381 clarifies the obligation to notify the Department of Health and Human Services when a MaineCare recipient's claim for medical expenses paid by MaineCare is negotiated to settlement or paid.

**LD 1567 Resolve, To Demonstrate Cost Savings by Preventing the Onset of
Severe Mental Illness in Youth**

CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EBERLE		H-204

This resolve directs the Department of Health and Human Services to initiate a demonstration program to determine whether the methods used by the Portland Identification and Early Referral Program (PIER) can have the effect of preventing a substantial number of new cases of psychosis and psychotic disorders in young people from 12 years of age to 25 years of age. The demonstration program would provide financial resources to PIER to continue to prevent new cases of psychosis and psychotic disorders in the greater Portland area and would provide training and consultation necessary to ensure that a new program developed in the State will be as effective and reliable as PIER.

Committee Amendment "A" (H-204)

This amendment adds a calculation and transfer section allowing the State Budget Officer to distribute costs associated with this program among various accounts within the Department of Health and Human Services and adds an appropriations and allocations section to the resolve.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.

Joint Standing Committee on Health and Human Services

LD 1574 Resolve, To Address Drug Abuse and Addiction

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	ONTP	

This bill directs the Department of Health and Human Services to conduct an objective study of the State's ability to respond to its current drug abuse and addiction crisis and to prepare for future addiction treatment needs.

**LD 1639 Resolve, Directing the Commissioner of Health and Human Services To
Implement Representative Payee and Disability Specialists Programs**

**ACCEPTED ONTP
REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SCHATZ	ONTP MAJ OTP-AM MIN	

This resolve directs the Commissioner of Health and Human Services to create and implement, by July 1, 2008, a representative payee program to provide assistance to recipients of social security or supplemental security income benefits who cannot manage or direct the management of their funds. This resolve also directs the Commissioner of Health and Human Services to create and implement, by July 1, 2008, a disability specialist program to provide assistance to homeless individuals in applying for supplemental security income or social security disability income benefits.

Committee Amendment "A" (H-408)

This amendment, which was not adopted, is the minority report and adds an appropriations and allocations section.

**LD 1660 An Act To Provide One-time Funds To Leverage Private Funds To
Strengthen Children and Families in Maine**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	ONTP	

This bill makes a one-time General Fund appropriation of \$250,000 in fiscal year 2007-08 for Youth Alternatives' family-focused services initiative to provide funds to complete the requirements of a private challenge grant for providing secure space at the former Maine Youth Center.

**LD 1661 Resolve, To Support Community Planning for the Aging of the
Population**

RESOLVE 29

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAMPBELL	OTP-AM	H-160

This resolve directs the Commissioner of Health and Human Services to convene a stakeholders group to study community plans in Maine and to ensure the plans include a component addressing the elder population.

Committee Amendment "A" (H-160)

Joint Standing Committee on Health and Human Services

The amendment changes the resolve to clarify that the Commissioner of Health and Human Services should encourage and promote community planning that includes components addressing the elder population, corrects the name of the Office of Elder Services' Area Agencies on Aging and allows the commissioner to include other interested parties in the group created by this legislation.

Enacted Law Summary

Resolve 2007, chapter 29 directs the Department of Health and Human Services to convene a stakeholders' group to review and encourage planning activities by Maine communities that address the older population. The group must include representatives of the Area Agencies on Aging, the University of Maine Center on Aging, the Maine Municipal State Planning Office and the Public Health Work Group.

LD 1669 An Act To Amend the Laws Governing Reimbursement of Nursing Facilities

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CUMMINGS	OTP-AM MAJ ONTP MIN	H-292

This bill makes ongoing General Fund appropriations of \$6,000,000 in fiscal year 2007-08 and \$12,000,000 in fiscal year 2008-09 and ongoing Federal Expenditure Fund allocations of \$12,000,000 in fiscal year 2007-08 and \$24,000,000 in fiscal year 2008-09 for the costs of rebasing nursing facility costs to a base year determined by audited allowable costs for a facility's fiscal year ending between July 1, 2004 and June 30, 2005.

This bill requires the Department of Health and Human Services to fully reimburse a nursing home's actual heating costs and adjusts the administration and policy-planning ceiling and requires the ceiling to be adjusted quarterly according to inflation. This bill also requires the Department of Health and Human Services to reimburse a nursing facility for actual additional medical director expenses up to \$10,000.

Committee Amendment "A" (H-292)

This amendment replaces the appropriations and allocations section of the bill, decreasing the total General Fund Appropriation to \$7,602,434 in Fiscal Year 2008 and \$7,822,280 in Fiscal Year 2009 and adjusting the matching federal funds.

This bill died on adjournment on the Appropriations Table. Public Law 2007, chapter 240, page 395 includes funding for rebasing of \$1,900,000 in Fiscal Year 2008 and \$6,000,000 in Fiscal Year 2009.

LD 1676 An Act To Ensure the Effective Management of the Behavioral Health Care Services System in Maine

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS	ONTP	

This bill codifies the development of a managed behavioral health care services system pursuant to Public Law 2005, chapter 457, Part PP; Public Law 2005, chapter 519, Part ZZZ; and Resolve 2005, chapter 203. It provides specific information designed to guide the development of the system.

Joint Standing Committee on Health and Human Services

LD 1686 An Act To Reduce Administrative Costs in Programs Delivered to People with Mental Retardation

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ROSEN R	ONTP	

This bill requires the Department of Health and Human Services to eliminate duplicative and unnecessary administrative procedures and practices in the system of care for mentally retarded persons by eliminating duplicate data entry, reducing paperwork, streamlining the survey program, requiring programs to meet one set of state accreditation standards and reducing mailing costs through use of technology and electronic transmission of data. It requires that the department assess the fiscal impact of proposed laws or rules prior to enactment and publish the fiscal analysis on its website. It requires that programs be exempt from certain certified medication staffing requirements and exempts experienced direct support staff from specific employee training under certain circumstances. It limits employee training requirements to those relevant to the condition of individuals served. It requires the department to conduct eligibility assessments and reclassification of clients every 5 years and not earlier than 5 years unless there is a substantial change in the client's abilities, condition and needs. It requires the department to publish an annual document for community rehabilitation programs that describes practices that are acceptable to the department, specific documentation standards for all services required by the federal government or the department and information on current best practices for administering those programs. It requires the department to create an advisory group of providers to provide input into the process of developing a plan and to work with the advisory group to review business practices and requirements and identify additional cost-efficiency practices. It requires that the department identify savings that can be returned to providers to fund additional services and defray business expenses related to regulatory requirements. It requires the department to facilitate the development of residential accommodations for adults with mental retardation by creating a plan that identifies appropriate mechanisms for developing affordable housing, including but not limited to the creation of a nonprofit organization, state bonding and other methods for financing affordable housing.

LD 1687 An Act To Increase Health Insurance Coverage for Front-line Direct Care Workers Providing Long-term Care

CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS		

This bill amends the definition of "eligible business" for the Dirigo Health Program to allow providers of long-term care services with more than 50 employees to participate in the DirigoChoice health insurance plan. The bill also allows uninsured direct care workers who work an average of 10 or more hours per week to participate in the DirigoChoice health insurance plan. The bill directs the Board of Directors of Dirigo Health to develop a marketing and outreach program to enroll those newly eligible direct care workers and to design a targeted DirigoChoice health coverage plan that allows multiple long-term care employers to contribute monthly premium assistance to direct care employees eligible to enroll in Dirigo as an individual. The bill limits the costs to Dirigo Health for subsidies to direct care workers in the targeted DirigoChoice plan to \$400,000.

The bill also requires the Department of Health and Human Services to establish a demonstration project for long-term care providers who provide health insurance coverage to their full-time and part-time employees. The bill requires the department to provide financial assistance to allow those providers to start or expand health care coverage for their direct care employees. The bill limits the funding of the demonstration project to no more than \$500,000.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.

Joint Standing Committee on Health and Human Services

LD 1699 Resolve, To Improve Maine's Homemaker Services Program

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS	OTP-AM	S-299

This resolve directs the Department of Health and Human Services to increase the pay rate of the homemaker services providers who assist lower income senior citizens from \$17.00 to \$18.75 per hour.

Committee Amendment "A" (S-299)

The amendment directs the Department of Health and Human Services, Office of Elder Services to review the services provided in long-term care programs, reimbursement in long-term care programs and training, skills, pay and benefits for persons working in long-term care and to report by January 15, 2008 to the Joint Standing Committee on Health and Human Services. The amendment also adds an appropriations and allocations section.

This bill died on adjournment on the Appropriations Table.

See also the biennial budget, Public Law 2007, chapter 240, page 351 for appropriation of \$279,000 in Fiscal Year 2008 for homemaker program wage increases.

LD 1714 Resolve, To Expand the Maine Registry of Certified Nursing Assistants

RESOLVE 87

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	OTP-AM	H-485

This bill requires that the Department of Health and Human Services develop a plan to improve and expand the Maine Registry of Certified Nursing Assistants, established in the Maine Revised Statutes, Title 22, section 1812-G to include unlicensed assistive personnel, and present the plan to the Joint Standing Committee on Health and Human Services no later than December 1, 2007.

Committee Amendment "A" (H-485)

This amendment clarifies the actions that must be taken by the Department of Health and Human Services in developing a plan to improve and expand the Maine Registry of Certified Nursing Assistants and the issues that must be considered in developing the plan. The amendment requires the department to convene a working group to consider issues that were required to be implemented in the resolve.

Enacted Law Summary

Resolve 2007, chapter 87 requires the Department of Health and Human Services to develop a plan to improve and expand the Maine Registry of Certified Nursing Assistants. The plan must include listing unlicensed assistive personnel. The resolve requires the Department of Health and Human Services to convene a working group and to report to the Health and Human Services Committee by December 1, 2007.

Joint Standing Committee on Health and Human Services

**LD 1745 An Act To Improve Continuity of Care within Maine's
Community-based Mental Health Services**

PUBLIC 286

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	OTP-AM	S-143

This bill clarifies references to the area quality improvement councils in the mental health laws. The bill also renames the local service networks as the community service networks and requires them to be established in each of the geographical areas that were previously covered by area quality improvement councils. The bill requires each community service network to participate in the delivery of mental health services in a system that ensures continuity of care to adults experiencing psychiatric crises. The bill also describes the circumstances when client information can be shared during a crisis situation or when necessary to protect the consumer's health and safety.

Committee Amendment "A" (S-143)

This amendment adds a reporting section to the bill. Under the reporting section, by January 15, 2008 the Department of Health and Human Services must report to the Joint Standing Committee on Health and Human Services regarding the operation of the community service networks in the geographic areas designated in the Maine Revised Statutes, Title 34-B, section 3608, subsection 1-A and the state health regions designated by the Maine Center for Disease Control and Prevention and the possibilities for coordination among the regions or for redesignation.

Enacted Law Summary

Public Law 2007, chapter 286 changes the structure of the community mental health system. It establishes community service networks and maintains quality improvement councils for the two state psychiatric hospitals. The law requires community service networks to participate in the delivery of services and allows limited sharing of client mental health information.

The law requires a report to the Health and Human Services Committee by January 1, 2008, on the operation of the community service networks in the geographic regions, on the state health regions and on the possibilities for coordination among the regions or for redesignation of the regions.

LD 1746 An Act To Improve MaineCare and Promote Employment

PUBLIC 448

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BARTLETT	OTP-AM	S-319

This bill requires the court, hearing officers or applicable administrative agency to consider, when determining new or modified orders for child support, a means to provide support for a child's health care expenses, including but not limited to enrollment in employer-sponsored group health insurance plans, purchase of private health insurance plans, participation in public health insurance plans and cash payments of premiums, copayments, deductibles and routine and extraordinary medical expenses not otherwise covered by health insurance plans. It requires plaintiffs and defendants to provide information related to their ability to provide medical child support including information on employer-sponsored group health insurance and private health insurance available to the plaintiff and defendant as part of the affidavits, medical child support and child support worksheets and other relevant information that the parties are required to file with the court. It requires the court or hearing officer to review the information submitted by the plaintiff and defendant and to determine the amount of medical child support to be contributed by each and how that support is to be payable. The bill

Joint Standing Committee on Health and Human Services

exempts parties with incomes below 200% of the federal poverty guidelines from purchasing employer-sponsored group or private health insurance as part of their medical child support obligation unless such coverage is available at no cost. It allows the court or hearing officers to order parties with incomes between 150% and 200% of the federal poverty guidelines to make payments toward the cost of public insurance based on a sliding scale pursuant to the Maine Revised Statutes, Title 22, section 18 and chapter 855. It requires any amount of medical support payment that a noncustodial parent whose income is above 200% of the federal poverty guidelines is ordered by a court or administrative agency to pay to a custodial parent whose income is below 200% of federal poverty guidelines to first be used by the custodial parent to offset the premium for public health insurance coverage for the child. It requires the Department of Health and Human Services to maximize enrollment in the Private Health Insurance Premium Program pursuant to Title 22, section 18 and allows persons enrolled in the Private Health Insurance Premium Program with children eligible for Medicaid under Title 22, section 3174-G to be eligible for MaineCare benefits not otherwise provided by the private or employer-sponsored group health plan. It requires the Department of Health and Human Services to establish a sliding scale for applicable premiums and cost-sharing amounts that do not exceed the amounts established under Title 22, section 3174-T to the extent that participation in Title 22, section 18 is the result of a medical child support order under Title 19-A, section 2004. It allows people who have received Medicaid for their children for the past 3 months whose income exceeds limits pursuant to Title 22, section 3174-G, subsection 1, paragraph E-1 to purchase coverage for up to 18 months at premiums not to exceed those under the Katie Beckett program and limits contributions toward administrative costs to the maximum amount allowed under COBRA. It makes working disabled persons with unearned income that is equal to or below 150% of the nonfarm income official poverty line and with a combined total earned and unearned income that does not exceed 250% of the nonfarm income official poverty line eligible for Medicaid. It makes young adults who are 19 years of age or 20 years of age when the household income is equal to or below 200% of the nonfarm income official poverty line eligible for Medicaid. It requires the Department of Health and Human Services to ensure that the parents of children eligible for Medicaid under Title 22, section 3174-G provide medical child support as defined in Title 19-A, section 2001, subsection 11 to the extent authorized under Title 19-A, section 2006, to the extent possible through the Private Health Insurance Premium Program pursuant to Title 22, section 18 and in accordance with the guidelines in this section. It prohibits the department from petitioning the court in any new or modified medical child support order to require a parent with an income below 200% of the nonfarm income official poverty line to purchase private health insurance or enroll in an employer-sponsored group health plan unless such enrollment is available at no cost or the parent is eligible for assistance under Title 22, section 18 or from making an administrative determination with the same effect. It prohibits the department from petitioning the court in any new or modified medical child support order to require a parent with an income between 150% and 200% of the nonfarm income official poverty line to include cash medical support or any extraordinary medical expenses as defined at Title 19-A, section 2001 or from making an administrative determination with the same effect. It requires the Department of Health and Human Services to establish a centralized 3rd-party liability unit that will work to maximize the use of private health insurance coverage pursuant to Title 22, section 18 and to adopt routine technical rules.

Committee Amendment "A" (S-319)

This amendment replaces the bill. It enacts provisions of child support law establishing medical support requirements and expands the option of buying into MaineCare coverage for parents and children who lose MaineCare eligibility due to increased income. It incorporates the assignment of rights of recovery and honoring of assignments applicable to members in the MaineCare program as those provisions were enacted in the biennial budget, PL 2007, chapter 240, Part JJJ, sections 1, 2 and 4 and applies them retroactively to the extent authorized by law. It maximizes use of the Private Health Insurance Premium Program in MaineCare. It allows persons eligible for MaineCare and for coverage through an employer to enroll in group health insurance plans and health maintenance organization coverage without waiting for the next open enrollment period.

Enacted Law Summary

Joint Standing Committee on Health and Human Services

Public Law 2007, chapter 448 establishes medical child support, expands MaineCare buy-in, maximizes use of the Private Health Insurance Premium Program, allows enrollment in employer-based coverage without waiting for the open enrollment period for persons eligible for MaineCare and amends assignment of rights of recovery consistent with the biennial budget, applying those rights retroactively as allowed by law.

LD 1751 An Act To Address Smoking in Senior Housing

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SULLIVAN	ONTP	

This bill prohibits smoking in assisted housing or within 100 yards of assisted housing. "Assisted housing" is defined as a facility for senior citizens that is an assisted living program or that is funded, licensed or otherwise regulated by the Department of Health and Human Services. The prohibition takes effect January 1, 2008.

LD 1762 An Act To Increase MaineCare Reimbursement for Speech and Language Therapists and Provide Treatment for Adults with Developmental Disabilities

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN	ONTP	

This bill allows members of MaineCare who are adults with developmental disabilities to receive an initial speech and language therapy evaluation and at least 2 reevaluations per year and be provided with coverage for outpatient therapy. It also directs the Department of Health and Human Services to increase the rate of reimbursement for speech and language therapists used by the MaineCare program by 5%.

LD 1763 An Act To Amend the Maine Certificate of Need Act of 2002

**PUBLIC 440
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER	OTP-AM	H-569

This bill makes the following changes to the Maine Certificate of Need Act of 2002.

1. Current law exempts from review replacement of major medical equipment. This bill requires review when a certificate of need had not been obtained for the equipment that is being replaced.
2. It requires review of an increase in bed complement or bed category of less than 10% if it results in 3rd fiscal year operating costs or capital expenditures in excess of applicable thresholds or results in the addition of a new health service.
3. It allows the aggregation of capital expenditures in determining whether projects are related.
4. It improves the ability of the Department of Health and Human Services to monitor the implementation of projects that were determined not subject to review.
5. It requires that communication between applicants and the Bureau of Insurance goes through the Department of Health and Human Services and becomes part of the official record.

Joint Standing Committee on Health and Human Services

6. It exempts both the Bureau of Insurance assessment of impact and the health assessment impact from the Maine Center for Disease Control and Prevention for nursing facility projects.
7. It clarifies that prior to an application's being certified as complete, the record is not a public document. After it is certified as complete, it is governed by the freedom of access laws.
8. It clarifies when additional time may be taken to complete a review.
9. It prohibits any state agency or other 3rd-party payor from reimbursing a provider or making payments or providing other financial assistance to a provider who fails to meet the conditions established by the Commissioner of Health and Human Services.
10. It allows the Department of Health and Human Services to publish revised thresholds using a specified index without having to adopt new rules.

Committee Amendment "A" (H-569)

This amendment replaces the bill. It amends the certificate of need law with regard to acquisitions of major medical equipment, the funding of new nursing facility beds, nursing facility bed banking, subsequent review of certificate of need projects and determinations of nonapplicability of certificate of need, the description of what constitutes the record in a certificate of need proceeding and the maintenance of the record and the authorization of the Department of Health and Human Services to withhold funds with regard to a project for which a certificate of need was approved.

Enacted Law Summary

Public Law 2007, chapter 440 amends the certificate of need law. It amends the certificate of need law with regard to acquisitions of major medical equipment, the funding of new nursing facility beds, nursing facility bed banking, subsequent review of certificate of need projects and determinations of nonapplicability of certificate of need, the description of what constitutes the record in a certificate of need proceeding and the maintenance of the record and the authorization of the Department of Health and Human Services to withhold funds with regard to a project for which a certificate of need was approved.

Public Law 2007, chapter 440 was enacted as an emergency measure effective June 27, 2007.

LD 1764 An Act To Increase the Wages of Direct Support Professional Staff Based on Increases in the State Minimum Wage

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY J	ONTP	

This bill requires the Department of Health and Human Services to increase the rate of reimbursement for direct support professional staff costs by 3.8% effective October 1, 2007. It also requires the department to increase the wage component for direct support professional staff whenever the State's minimum wage is increased.

Joint Standing Committee on Health and Human Services

LD 1765 An Act To Ensure End-of-life Care for Children with Terminal Illnesses

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WEBSTER	OTP-AM	H-301

This bill makes a one-time General Fund appropriation of \$75,000 in fiscal year 2007-08 to contract with an organization that provides pediatric palliative care statewide to children with life-threatening conditions.

Committee Amendment "A" (H-301)

This amendment incorporates a fiscal note.

This bill died on adjournment on the Appropriations Table.

See also the biennial budget, Public Law 2007, chapter 240, page 421 for appropriation of \$50,000 in Fiscal Year 2008 for pediatric palliative care.

**LD 1774 An Act To Provide Greater Information Pertaining to the Health of
Maine Children**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH	ONTP	

This bill requires the following initiatives with regard to the health of Maine children:

1. A report on the percentage of funding from the Fund for a Healthy Maine that is being used and could be used to effectively address obesity in Maine children and recommendations for increasing funding;
2. A study and report on marketing food to children through on-package marketing;
3. A study to determine the requirements for developing a system to monitor the cardiovascular health of Maine children;
4. A requirement that certain restaurants provide caloric information regarding foods and drinks listed on menus and menu boards; and
5. A requirement for standards for food and beverages sold or distributed on school grounds but outside of school.

LD 1775 An Act To Ensure Safe Drinking Water from Private Wells

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MOORE G	ONTP	

This bill enacts the Private Well Testing Act. The bill requires that a water test be done on a private well before a property may be sold. The bill also designates who may perform the water tests. The bill also requires the

Joint Standing Committee on Health and Human Services

Department of Health and Human Services to provide a copy of a failed test result to the municipality, health agency, local health officer and any other governmental entity in the area that the private well is located. The bill requires a lessor to have a private well tested every 5 years beginning in 2009. The bill also requires the department to establish a public information and education program to inform the public of the enactment of the Private Well Testing Act and the substance of its provisions and requirements. The department is required to submit a report to the joint standing committee of the Legislature having jurisdiction over agriculture matters by January 15, 2012.

LD 1780 *Resolve, To Convene a Working Group To Review Statutory Language and Propose Standards To Ensure the Use of Respectful Language*

RESOLVE 62

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WEBSTER	OTP-AM	H-275

This resolve directs the Maine Developmental Disabilities Council to convene a working group to review the terminology that is currently contained in the Maine Revised Statutes to refer to persons with disabilities and authorizes the council to propose standards to be used prospectively by the Revisor of Statutes when preparing bills that enact or amend legislative language referring to persons with disabilities.

Committee Amendment "A" (H-275)

This amendment incorporates a fiscal note.

Enacted Law Summary

Resolve 2007, Chapter 62 directs the Maine Developmental Disabilities Council to convene a working group to review the terminology that is currently contained in the Maine Revised Statutes to refer to persons with disabilities and authorizes the council to propose standards to be used prospectively by the Revisor of Statutes when preparing bills that enact or amend legislative language referring to persons with disabilities.

LD 1781 *An Act To Prevent Duplication in Certification of Hospitals*

PUBLIC 314

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J	OTP-AM	H-401

This bill exempts a health care facility from Department of Health and Human Services inspection requirements if the health care facility is certified to participate in the federal Medicare program and accredited by a recognized health care accrediting agency. If the health care facility is certified for participation in the Medicare program but not accredited, then the facility must be inspected by the department every 3 years. This bill does not exempt health care facilities from Department of Health and Human Services inspection in response to complaints or suspected violations or by other agencies or municipalities for purposes unrelated to health care facility licensing.

Committee Amendment "A" (H-401)

This amendment narrows the scope of the bill to apply to hospitals only and makes the law effective July 1, 2008.

Enacted Law Summary

Public Law 2007, chapter 314 exempts hospitals from DHHS inspection requirements if the hospital is certified to participate in the federal Medicare program and accredited by a recognized health care accrediting agency. If the hospital is certified for participation in the Medicare program but not accredited, then the hospital must be inspected by the department every 3 years. This bill does not exempt hospitals from Department of Health and Human Services inspection in response to complaints or suspected violations or by other agencies or municipalities for

Joint Standing Committee on Health and Human Services

purposes unrelated to hospital licensing. The law is effective July 1, 2008.

LD 1782 Resolve, To Clarify the Rules of Reimbursement for Personnel Working in Homes Providing Services to Persons with Brain Injuries **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAIN	ONTP	

This resolve provides that, with respect to 6-bed Level III residential care facilities for residents who suffer from brain injury that are not affiliated with a larger or parent organization, administrators are not limited solely to the performance of administrative duties.

LD 1786 An Act To Reduce the Spread of Infectious Disease through Shared Hypodermic Apparatuses **PUBLIC 346**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLER	OTP-AM	H-486

This bill prohibits the Department of Health and Human Services, Maine Center for Disease Control and Prevention from limiting the number of hypodermic apparatuses that a certified hypodermic apparatus program may provide to enrolled participants or the number that enrolled participants may legally possess, transport or exchange. The bill requires the Maine Center for Disease Control and Prevention to adopt rules for measures to discourage the utilization of used hypodermic apparatuses and makes rules adopted or amended routine technical rules. It authorizes persons to lawfully possess, furnish or transport hypodermic apparatuses or residual amounts of scheduled drugs that may be present in the hypodermic apparatuses or a residual amount of any scheduled drug that is contained in one or more hypodermic apparatuses to the extent authorized under the Maine Revised Statutes, Title 22, chapter 252-A. The bill provides an affirmative defense for the furnishing, transporting or possession of hypodermic apparatuses or a residual amount of any scheduled drug that is contained in one or more hypodermic apparatuses by a person enrolled in a hypodermic apparatus exchange program that is certified by the Maine Center for Disease Control and Prevention under Title 22, section 1341 when the person is transporting the hypodermic apparatuses to the certified program.

Committee Amendment "A" (H-486)

This amendment strikes section 2 from Part A of the bill, which attempted to clarify protections for employees of the needle exchange programs with affirmative defenses, but was unnecessary and confusing. The law will stay as it is with regard to employees of needle exchange programs without the removed section.

Enacted Law Summary

Public Law 2007, chapter 346 removes the limit of 10 needles in the needle exchange law. It directs the Department of Health and Human Services to adopt routine technical rules to discourage reuse of used needles. It allows possession of the residual amount of drugs that may be present on used needles.

LD 1797 An Act To Fund Maine's HealthInfoNet Program **CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE		

Joint Standing Committee on Health and Human Services

This bill appropriates \$2,000,000 to Maine's HealthInfoNet program to fund the creation of a health information exchange and to facilitate the use of electronic medical records. See also the biennial budget, Public Law 2007, chapter 240, page 27 that provides \$265,000 in Fiscal Year 2008 for Maine HealthInfo Net.

This bill is carried over to the Second Regular Session of the 123rd Legislature.

LD 1800 An Act To Amend Licensing and Certification Requirements

**PUBLIC 324
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LEWIN	OTP-AM	H-552

This bill makes the following changes to licensing and certification requirements of Department of Health and Human Services. It creates penalties, including injunctive relief, for operating an unregistered personal care agency. The bill creates a cap on civil monetary penalties that the Department of Health and Human Services may impose on unlicensed, uncertified or unregistered entities in response to a decision of the Maine Superior Court in a similar but unrelated case. It creates a maximum 2-year license renewal term for hospitals, nursing facilities, ambulatory surgical facilities and related institutions. It creates penalties, including injunctive relief, for operating without a license or certificate by a long-term care facility, a child care facility, and a family child care provider. It places a time limit on reapplication after denial or revocation of a license for a child care facility or revocation of a certificate for a family child care provider. It defines children in the Department of Health and Human Services laws governing facilities for children and adults as being under 21 years of age to make the provisions consistent with those governing MaineCare, the department's Office of Child and Family Services and special education. It adds to the list of confidential information pursuant to 22 M.R.S.A §7703, sub-§2 information that identifies, directly or indirectly a reference, complainant or reported of suspected licensing violations.

Committee Amendment "A" (H-552)

The amendment defines "placement agency" and "home care services." It requires a placement agency to register with the Department of Health and Human Services. It gives the Department of Health and Human Services the same right of entry and applies the same administrative inspection and license suspension and revocation provisions with respect to placement agencies as apply to personal care agencies. It clarifies that the department's right of entry may extend to any premises and documents of a person, firm, partnership, association, corporation or other entity that the department has reason to believe is operating without a license or a certificate. It clarifies that an owner or person in charge of an unlicensed long-term care facility or child care facility or an uncertified family child care provider may not interfere with or prohibit the interviewing by the department of residents or consumers of services. It clarifies that an owner or operator of an unregistered personal care agency or placement agency may not interfere with, impede or obstruct an investigation by the department, including but not limited to interviewing persons receiving services or persons with knowledge of the agency. It changes the word "subtitle" to "section" and corrects statutory language to clarify that a child care facility license is required before the Department of Education grants approval for a program to contract with one or more Child Development Services System sites.

Enacted Law Summary

Public Law 2007, chapter 324 makes changes to licensing and certification requirements of the Department of Health and Human Services. It requires a placement agency to register with DHHS and defines placement agency and home care services. It creates penalties, including injunctive relief, for operating an unregistered personal care agency or placement agency. The bill creates a cap on civil monetary penalties that the DHHS may impose on unlicensed, uncertified or unregistered entities. The bill creates a maximum 2-year license renewal term for hospitals, nursing facilities, ambulatory surgical facilities and related institutions and allows an initial license to be issued for up to 12 months. It creates penalties, including injunctive relief, for operating without a license or certificate by a long-term care facility, a child care facility, and a family child care provider. The bill places a time limit on reapplication after denial or revocation of a license for a child care facility or revocation of a certificate for

Joint Standing Committee on Health and Human Services

a family child care provider. The bill defines children in laws governing facilities for children and adults as being under 21 years of age to make the provisions consistent with those governing MaineCare, the department's Office of Child and Family Services and special education. It clarifies that the department's right of entry may extend to any premises and documents of a person, firm, partnership, association, corporation or other entity that the department has reason to believe is operating without a license or a certificate. It clarifies that an owner or person in charge of an unlicensed long-term care facility, child care facility, family child care provider, personal care agency or placement agency may not interfere with or prohibit the interviewing by the department of residents or consumers of services.

Public Law, chapter 324 was enacted as an emergency measure effective June 19, 2007.

The bill was reviewed and evaluated by the Joint Standing Committee on Judiciary pursuant to MRSA Title 1, §434, which requires review and evaluation of new exceptions to laws governing public records.

LD 1801 An Act To Clarify the Definition of Autism

PUBLIC 309

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN	OTP-AM	H-381

This bill updates the definition of autism by adopting the most recent version of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders in which "pervasive developmental disorders" are described as including 5 separate conditions and by application of a test to assess the applicant's level of adaptive functional abilities.

Committee Amendment "A" (H-381)

This amendment replaces the bill. The amendment defines autism with respect to adults by reference to the Diagnostic and Statistical Manual of Mental Disorders and by an adaptive behavior score that is at a level of functional impairment as determined by the Department of Health and Human Services.

Enacted Law Summary

Public Law 2007, chapter 309 defines autism with respect to adults by reference to the Diagnostic and Statistical Manual and to an adoptive behavior score that is at a level of functional impairment as determined by the Department of Health and Human Services.

LD 1805 An Act To Preserve Home Care Coordination Services for Long-term Care Consumers Served in the Community

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CAMPBELL	OTP-AM	H-309

This bill appropriates and allocates funds on an ongoing basis for home care coordination services for consumers of state-funded and MaineCare-funded home-based care programs.

Committee Amendment "A" (H-309)

This amendment makes minor technical corrections to the format of the appropriations and allocations section.

This bill died on adjournment on the Appropriations Table.

Joint Standing Committee on Health and Human Services

See also the biennial budget, Public Law 2007, chapter 240, page 376 for appropriations of \$125,273 a year for home care coordination.

LD 1812 Resolve, Regarding the Role of Local Regions in Maine's Emerging Public Health Infrastructure

**RESOLVE 114
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CUMMINGS	OTP-AM	H-458

This resolve directs the Public Health Work Group to establish the Regional Coordinating Councils Subcommittee to develop recommendations for a general framework for Regional Coordinating Councils in the 8 public health regions. The Regional Coordinating Councils Subcommittee is directed to report to the Public Health Work Group, which is directed to transmit the subcommittee's reports to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on State and Local Government. The Joint Standing Committee on Health and Human Services is authorized to submit legislation regarding the Regional Coordinating Councils to the Second Regular Session of the 123rd Legislature. The resolve also requires changes to the membership of the Public Health Work Group.

Committee Amendment "A" (H-458)

This amendment replaces the resolve, which originally established the Regional Coordinating Councils Subcommittee under the Public Health Work Group to make recommendations to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on State and Local Government related to the regional coordinating councils and authorized the Joint Standing Committee on Health and Human Services to report out legislation. The amendment directs the Governor to expand the membership of the Public Health Work Group and specifies the groups that must be represented. It requires representation from the 8 public health regions. It limits the size of the work group to 40. It requires the Public Health Work Group to submit a report to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on State and Local Government by December 1, 2007 that includes current plans for the development of a statewide public health infrastructure, including the status of plans related to regional coordinating councils in the 8 public health regions, recommendations for a statewide public health infrastructure to be developed within existing resources over the next 5 years and necessary changes to public health duties, financing and governance and the roles of public, private, grassroots and nonprofit organizations as well as the scope of functions they perform in the public health system. It also requires the group to submit any draft legislation necessary and authorizes the Public Health Work Group to form subcommittees as necessary to achieve these purposes. It authorizes the Joint Standing Committee on Health and Human Services to submit legislation.

Enacted Law Summary

Resolve 2007, chapter 114 directs the Governor to expand the membership of the Public Health Work Group and specifies the groups that must be represented. It requires representation from the 8 public health regions. It limits the size of the work group to 40. It requires the Public Health Work Group to submit a report to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on State and Local Government by December 1, 2007 that includes current plans for the development of a statewide public health infrastructure, including the status of plans related to regional coordinating councils in the 8 public health regions, recommendations for a statewide public health infrastructure to be developed within existing resources over the next 5 years and necessary changes to public health duties, financing and governance and the roles of public, private, grassroots and nonprofit organizations as well as the scope of functions they perform in the public health system. It also requires the group to submit any draft legislation necessary and authorizes the Public Health Work Group to form subcommittees as necessary to achieve these purposes. It authorizes the Joint Standing Committee on Health and Human Services to submit legislation.

Joint Standing Committee on Health and Human Services

Resolve 2007, chapter 114 was passed as an emergency measure effective June 21, 2007.

See also LD 1179.

LD 1820 An Act To Create a Program To Implement Choice of Health Plans in the MaineCare Program and Amend the MaineCare Program ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WESTON	ONTP	

This bill amends the MaineCare program consistent with the federal Deficit Reduction Act of 2005. The bill expands the operation of the private health insurance premium program, changes the structure of copayment requirements, adds premiums for certain members and establishes the MaineCare Choice program and the enhanced benefits program.

LD 1843 An Act To Improve the Quality of Health Care in Maine CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE		

This bill requires that all commercial health insurance claims for all professional services provided by physicians who are employed by hospital systems or affiliates of hospital systems and other health care facilities be submitted on the standard federal professional paper claim form, CMS 1500, used by noninstitutional providers and suppliers. This requirement ensures that the Department of Health and Human Services, the Maine Quality Forum and the Maine Health Data Organization are able to accurately attribute particular health care services to individual physicians.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.

**LD 1849 An Act To Protect Consumers from Rising Health Care Costs PUBLIC 441
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BARTLETT	OTP-AM	S-237

Part A of this bill establishes, effective September 1, 2008, the Maine Hospital Cost Commission, whose purpose is to appropriately limit the rate increase in the cost of hospital care while protecting the quality and accessibility of care available to the people of the State and without unduly compromising the ability of hospitals to decide how the resources made available to them are to be used.

Part B of this bill establishes the Blue Ribbon Commission To Study the Regulation of Health Care Expenditures and directs the commission to undertake a full scale study of the health care system and recommend the most appropriate form of health care regulation necessary to ensure the provision of quality care, the accessibility to care and the affordability of care. As part of its recommendations, the commission is directed to develop proposed legislation detailing the hospital regulation system to be implemented by the Maine Hospital Cost Commission pursuant to the Maine Revised Statutes, Title 22, chapter 1701. The commission is directed to submit a report that includes its findings and recommendations, including suggested legislation, for presentation to the Joint Standing Committee on Health and Human Services no later than

Joint Standing Committee on Health and Human Services

November 1, 2007. Following receipt and review of the report, the Joint Standing Committee on Health and Human Services may submit legislation to the Second Regular Session of the 123rd Legislature.

Committee Amendment "A" (S-237)

This amendment replaces the bill. Unlike the bill, which proposes establishing the Blue Ribbon Commission To Study the Regulation of Health Care Expenditures, this amendment instead expands the membership and duties of the Advisory Council on Health Systems Development, updates statutory language and authorizes the council to seek grants and other funding to support its work. The amendment also adds an emergency preamble and emergency clause to the bill.

Enacted Law Summary

Public Law 2007, chapter 441 expands the membership and duties of the Advisory Council on Health Systems Development. It authorizes the council to seek outside funding.

Public Law 2007, chapter 441 was enacted as an emergency measure effective June 27, 2007.

LD 1855 An Act To Clarify Involuntary Admissions for Psychiatric Hospitalizations

PUBLIC 319

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
NUTTING J	OTP-AM	S-266

This bill makes the following changes to the Maine Revised Statutes, Title 34-B provisions governing hospitalization of psychiatric patients.

1. It deletes the definition of "hospital," and adds the definition of "psychiatric hospital." The definition of "patient" is also expanded so that it describes not only persons receiving care in inpatient beds, but also persons being assessed in hospital emergency departments.
2. It gives the Commissioner of Health and Human Services power to investigate complaints not only of patients in psychiatric hospitals but also of patients in general hospital emergency rooms who are being evaluated for certification for commitment. It gives the commissioner clear authority to visit nonpsychiatric hospitals that are involved in the certification process in order to review procedures related to the early steps of commitment.
3. It places the phrase "psychiatric hospital" where the word "hospital" was used in the past to retain the meaning under the new definitions.
4. It amends the law concerning a certification outside the hospital emergency room to permit a physician's assistant, certified psychiatric clinical nurse specialist or nurse practitioner, as well as a licensed physician or licensed clinical psychologist, to make the certification.
5. It clarifies that a judicial officer can review a faxed certification. It clarifies that a patient may be held in any hospital for up to 18 hours while a placement and judicial endorsement are being sought. It amends the law so that the person seeking a patient's admission, rather than the law enforcement officer or ambulance service transporting the patient, is responsible for ensuring that the certification is judicially endorsed.
6. It clarifies that a regular hospital may see a person in the emergency room and decide that the person needs to be involuntarily committed to a psychiatric hospital to receive the best care for that person. It clarifies that both kinds of hospitals are involved in this commitment process.
7. It deletes the requirement that an application be dismissed if the 2 examiners report that the person is not

Joint Standing Committee on Health and Human Services

mentally ill or does not pose a likelihood of serious harm. Instead, it provides that a hearing must be held on every application to give others a chance to testify, even if the examiners do not support the application.

Committee Amendment "A" (S-266)

This amendment:

1. Removes the language concerning a certification outside the hospital emergency room permitting a physician's assistant, certified psychiatric clinical nurse specialist or nurse practitioner, as well as a licensed physician or licensed clinical psychologist, to make the certification;
2. Removes the requirement of a hearing in every involuntary commitment proceeding; and
3. Reduces the notice period for continued involuntary hospitalization from 30 days to 21 days.

Enacted Law Summary

Public Law 2007, chapter 319 updates the language in the laws on involuntary mental health commitment. It shortens the notice requirements for continued involuntary commitment from 30 to 21 days. It clarifies that a judicial officer can review a faxed certification. It clarifies that a patient may be held in any hospital for up to 18 hours while a placement and judicial endorsement are being sought. It amends the law so that the person seeking a patient's admission, rather than the law enforcement officer or ambulance service transporting the patient, is responsible for ensuring that the certification is judicially endorsed. It clarifies that a community hospital may see a person in the emergency room and decide that the person needs to be involuntarily committed to a psychiatric hospital to receive the best care for that person. It clarifies that both kinds of hospitals are involved in this commitment process.

See also LD 1033.

LD 1868 **Resolve, To Review Statutes, Rules and Policies Regarding Mental Retardation, Pervasive Developmental Disorders and Other Cognitive and Developmental Disorders**

**RESOLVE 78
EMERGENCY**

Sponsor(s)

GROSE

Committee Report

OTP-AM

Amendments Adopted

H-358

This bill defines "developmental disability" and requires the Department of Health and Human Services to change the criteria that it currently uses to determine the eligibility of persons with a developmental disability for services. It requires the department to use methods that are not based on an intelligence quotient test and include criteria for the assessment of functional abilities. It requires the department to accomplish this goal in a manner that is cost neutral.

Committee Amendment "A" (H-358)

This amendment replaces the bill. The amendment changes the bill to a resolve. It directs the Department of Health and Human Services to convene a working group of stakeholders and other interested parties to undertake a review of current statutes, rules and policies regarding services, definitions, limitations, eligibility and levels of care for adults with mental retardation, pervasive developmental disorders and other cognitive and developmental disorders and to report to the Joint Standing Committee on Health and Human Services. It authorizes the Joint Standing Committee on Health and Human Services to submit legislation related to the recommendations of the working group to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Joint Standing Committee on Health and Human Services

Resolve 2007, chapter 78 directs the Department of Health and Human Services to convene a working group of stakeholders and other interested parties to undertake a review of current statutes, rules and policies regarding services, definitions, limitations, eligibility and levels of care for adults with mental retardation, pervasive developmental disorders and other cognitive and developmental disorders and to report to the Joint Standing Committee on Health and Human Services. It authorizes the Joint Standing Committee on Health and Human Services to submit legislation related to the recommendations of the working group to the Second Regular Session of the 123rd Legislature.

Resolve 2007, chapter 78 was enacted as an emergency measure effective June 14, 2007.

See also LD 1780.

**LD 1874 Resolve, Regarding Legislative Review of Portions of Chapter 270:
Uniform Reporting Systems for Maine Quality Data Sets, a Major
Substantive Rule of the Maine Health Data Organization**

**RESOLVE 77
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
	OTP-AM	H-352

This resolve provides for legislative review of portions of Chapter 270: Uniform Reporting Systems for Maine Quality Data Sets, a major substantive rule of the Maine Health Data Organization.

Committee Amendment "A" (H-352)

This amendment authorizes final adoption of Chapter 270: Uniform Reporting Systems for Maine Quality Data Sets, a provisionally adopted major substantive rule of the Maine Health Data Organization, provided certain changes to the rule are made.

Enacted Law Summary

Resolve 2007, chapter 77 authorizes final adoption of Chapter 270: Uniform Reporting Systems for Maine Quality Data Sets, a provisionally adopted major substantive rule of the Maine Health Data Organization, provided certain changes to the rule are made.

Resolve 2007, chapter 77 was enacted as an emergency measure effective June 12, 2007.

**LD 1880 Resolve, Directing the Department of Health and Human Services To
Adopt Rules Governing the Safety of Children at Day Care Facilities
with Swimming Pools**

RESOLVE 53

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DRISCOLL BRANNIGAN	OTP-AM	H-284

This resolve requires the Department of Health and Human Services to adopt major substantive rules to govern the safety of children at day care facilities that contain swimming pools.

Committee Amendment "A" (H-284)

This amendment adds authorization for the Department of Health and Human Services to adopt major substantive rules on an emergency basis during calendar year 2007 with regard to the use of swimming pools at day care facilities.

Joint Standing Committee on Health and Human Services

Enacted Law Summary

Resolve 2007, chapter 53 requires the Department of Health and Human Services to adopt major substantive rules on an emergency basis during calendar year 2007 to govern the safety of children at day care facilities that contain swimming pools.

**LD 1899 An Act To Include Institutions Providing an Educational Program
among Entities Eligible To Borrow from the Maine Health and Higher
Educational Facilities Authority**

PUBLIC 354

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ADAMS	OTP-AM	H-533

This bill allows eligible institutions providing an educational program that meet underwriting requirements of the Maine Health and Higher Educational Facilities Authority to borrow from the authority.

Committee Amendment "A" (H-533)

This amendment incorporates a fiscal note.

Enacted Law Summary

Public Law 2007, chapter 354 authorizes the use of the Maine Health and Higher Educational Facilities Authority funding for certain nonprofit institutions providing educational programs.

**LD 1907 An Act To Clarify and Affirm the Scope of Services Available to
Persons with Mental Retardation or Autism**

PUBLIC 356

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRANNIGAN	OTP-AM	S-297

This bill incorporates into the Maine Revised Statutes, Title 34-B some of the provisions required for compliance with the consent judgment in *Consumer Advisory Board et al. v. Glover*, No. 91-321-P-C (D. Me., September 28, 1994) by specifying the Department of Health and Human Services' obligation to persons with mental retardation or autism to provide personal planning, case management services, crisis and respite services and quality assurance activities. This bill clarifies the role of the Office of Advocacy within the department and the processes applicable to client grievances and appeals. This bill also sets out the principles guiding delivery of services to persons with mental retardation or autism and establishes the requirement that the ratio of individual support coordinators to clients must be one individual support coordinator to 35 persons with mental retardation or autism. It repeals the Maine Advisory Committee on Mental Retardation and establishes the Maine Developmental Services Oversight and Advisory Board.

Committee Amendment "A" (S-297)

This amendment:

1. Specifies that all members of the Maine Development Services Oversight and Advisory Board are entitled to expenses for attending board meetings and that noncompensated members are entitled to per diem, as specified by board rule or policy;
2. Amends and adds an alternative date for the repeal of the Consumer Advisory Board;

Joint Standing Committee on Health and Human Services

3. Specifies that at least 4 members of the Maine Developmental Services Oversight and Advisory Board must be self-advocates;
4. Clarifies language regarding the referral of individual cases for investigation or action;
5. Specifies that eligibility for services begins upon diagnosis of mental retardation or autism;
6. Provides that the initial appointments to the Maine Developmental Services Oversight and Advisory Board be made by the Consumer Advisory Board and the Maine Advisory Committee on Mental Retardation rather than by the Governor;
7. Provides transition language with regard to the budgets of the Maine Developmental Services Oversight and Advisory Board;
8. Provides effective dates that are connected to the repeal of the Consumer Advisory Board for several specific sections of the bill and a general effective date of November 1, 2007; and
9. Specifies that the Department of Health and Human Services must include in its estimate of expenditure and appropriation requirements funds for the board as a separate line item.

Enacted Law Summary

Public Law 2007, chapter 356 incorporates into the Maine Revised Statutes, Title 34-B some of the provisions required for compliance with the consent judgment in *Consumer Advisory Board et al. v. Glover*, No. 91-321-P-C (D. Me., September 28, 1994) by specifying the Department of Health and Human Services' obligation to persons with mental retardation or autism to provide personal planning, case management services, crisis and respite services and quality assurance activities. This law clarifies the role of the Office of Advocacy within the department and the processes applicable to client grievances and appeals. This law also sets out the principles guiding delivery of services to persons with mental retardation or autism and establishes the requirement that the ratio of individual support coordinators to clients must be one individual support coordinator to 35 persons with mental retardation or autism. It repeals the Maine Advisory Committee on Mental Retardation and establishes the Maine Developmental Services Oversight and Advisory Board.

It provides transition language for the ending of the Consumer Advisory Board and the beginning of the Maine Developmental Services Oversight and Advisory Board. It provides a general effective date of November 1, 2007. It provides specific requirements for budgeting and funding the new board.

LD 1909 An Act To Establish the Acquired Brain Injury Advisory Council

PUBLIC 239

Sponsor(s)

Committee Report

Amendments Adopted

This bill establishes the Acquired Brain Injury Advisory Council to provide oversight and advice and to make recommendations to the Commissioner of Health and Human Services and the Director of the Office of Adults with Cognitive and Physical Disability Services, the Director of the Maine Center for Disease Control and Prevention and the Director of the Office of MaineCare Services within the Department of Health and Human Services.

Enacted Law Summary

Public Law 2007, chapter 237 establishes the Acquired Brain Injury Advisory Council to provide oversight and advice and to make recommendations to the Commissioner of Health and Human Services and the Director of

Joint Standing Committee on Health and Human Services

the Office of Adults with Cognitive and Physical Disability Services, the Director of the Maine Center for Disease Control and Prevention and the Director of the Office of MaineCare Services within the department.

Joint Standing Committee on Health and Human Services

SUBJECT INDEX

Aging and Long-term Care

Enacted

LD 1308	Resolve, Regarding the Use of Restraints in Nursing Facilities	RESOLVE 60
LD 1661	Resolve, To Support Community Planning for the Aging of the Population	RESOLVE 29

Not Enacted

LD 519	An Act To Provide Assistance to Family Members, Friends and Neighbors Who Provide Home Health Care for Senior Citizens	CARRIED OVER
LD 931	Resolve, To Examine Eligibility for MaineCare Long-term Care Services	ONTP
LD 943	Resolve, To Create a Look-back Rule for Residential Care Facilities	ONTP
LD 1699	Resolve, To Improve Maine's Homemaker Services Program	DIED ON ADJOURNMENT
LD 1751	An Act To Address Smoking in Senior Housing	ONTP
LD 1805	An Act To Preserve Home Care Coordination Services for Long-term Care Consumers Served in the Community	DIED ON ADJOURNMENT

Child Care

Enacted

LD 1369	Resolve, To Promote High-quality Before-school and After-school Programs	RESOLVE 41
LD 1880	Resolve, Directing the Department of Health and Human Services To Adopt Rules Governing the Safety of Children at Day Care Facilities with Swimming Pools	RESOLVE 53

Not Enacted

LD 87	Resolve, Directing the Department of Health and Human Services To Provide Printed Informational Handouts on Child Care Guidelines	ONTP
LD 283	An Act To Require Direct Payment to Child Care Centers	ONTP

LD 1527 **An Act To Set Maximum Allowable Television Viewing Hours for State-licensed Child Care Facilities** **ONTP**

Children's Mental Health

Not Enacted

LD 609 **Resolve, To Preserve and Support Community Treatment Options for Children's Behavioral Health Needs** **ONTP**

LD 1567 **Resolve, To Demonstrate Cost Savings by Preventing the Onset of Severe Mental Illness in Youth** **CARRIED OVER**

Children's Services

Enacted

LD 596 **An Act To Repeal the Laws Governing Long-term Foster Care** **PUBLIC 46**

LD 755 **Resolve, To Create the Commission To Develop a Strategic Priorities Plan for Maine's Young Children** **RESOLVE 136
EMERGENCY**

LD 1396 **Resolve, To Provide for an Independent Evaluation of the Procedures and Programs of the Department of Health and Human Services for Promoting Permanency and Safety for Children** **RESOLVE 137**

LD 1501 **An Act To Set Standards for Interviewing Children Who Are Subjects of a Child Protective Intervention** **PUBLIC 132**

Not Enacted

LD 487 **An Act Regarding Children in the Child Welfare System** **ONTP**

LD 753 **Resolve, To Invest in Children and Families through Family Resource Centers** **ONTP**

LD 1660 **An Act To Provide One-time Funds To Leverage Private Funds To Strengthen Children and Families in Maine** **ONTP**

LD 1765 **An Act To Ensure End-of-life Care for Children with Terminal Illnesses** **DIED ON
ADJOURNMENT**

Departmental Organization and Administration

Enacted

LD 615 **An Act To Authorize the Use of the Department of Health and Human Services Staff as Hearing Officers** **PUBLIC 80**

LD 1016 **An Act Regarding Residential Care Facilities for Children** **PUBLIC 320
EMERGENCY**

LD 1289	An Act To Provide Oversight for Crematoriums	PUBLIC 225
LD 1535	Resolve, To Study the Certificate of Need Program	RESOLVE 110
LD 1763	An Act To Amend the Maine Certificate of Need Act of 2002	PUBLIC 440 EMERGENCY
LD 1800	An Act To Amend Licensing and Certification Requirements	PUBLIC 324 EMERGENCY

Not Enacted

LD 1170	An Act To Exempt Nationally Accredited Child Welfare and Behavioral Health Care Organizations from State Licensing Requirements	ACCEPTED ONTP REPORT
LD 1209	An Act To License Weekly Housing Programs BY REQUEST	ONTP
LD 1288	An Act To Limit Recertification of Nursing Facility Residents to One Regulatory Organization	ONTP
LD 1386	An Act To Make Criminal Background Checks and Department of Health and Human Services Child Protective Substantiation Checks on Volunteers More Affordable	ACCEPTED ONTP REPORT
LD 1451	An Act To Promote the Health and Safety of Maine Consumers	ONTP
LD 1686	An Act To Reduce Administrative Costs in Programs Delivered to People with Mental Retardation	ONTP

Disabilities

Enacted

LD 365	Resolve, To Promote Community Integration for Individuals with Brain Injuries	RESOLVE 105
LD 467	An Act Regarding the Protection and Advocacy Agency Advisory Council	PUBLIC 87
LD 1868	Resolve, To Review Statutes, Rules and Policies Regarding Mental Retardation, Pervasive Developmental Disorders and Other Cognitive and Developmental Disorders	RESOLVE 78 EMERGENCY
LD 1909	An Act To Establish the Acquired Brain Injury Advisory Council	PUBLIC 239

Health Care

Enacted

LD 727	An Act To Expand the Definition of Health Care Facility under the Maine Health and Higher Educational Facilities Authority Act	PUBLIC 72 EMERGENCY
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LD 981	An Act Concerning the Supervision of Nursing Support Staff	PUBLIC 197
LD 1280	Resolve, Regarding the Training Curriculum and Skills of Certified Nursing Assistants	RESOLVE 50
LD 1714	Resolve, To Expand the Maine Registry of Certified Nursing Assistants	RESOLVE 87
LD 1849	An Act To Protect Consumers from Rising Health Care Costs	PUBLIC 441 EMERGENCY
LD 1899	An Act To Include Institutions Providing an Educational Program among Entities Eligible To Borrow from the Maine Health and Higher Educational Facilities Authority	PUBLIC 354

Not Enacted

LD 500	An Act To Amend the Definition of Health Care Facility To Include Hospice Facilities	ONTP
LD 770	An Act To Clarify Application of the Medical Marijuana Law BY REQUEST	ONTP
LD 996	An Act To Support Medical Practice Protocols in Patient Care	ONTP
LD 1354	Resolve, To Direct the Department of Health and Human Services To Establish a Physician Specialist Program	ONTP
LD 1370	An Act Requiring Public Disclosure of Health Care Prices	ACCEPTED ONTP REPORT
LD 1418	An Act To Provide Patients with Their Medication	ACCEPTED ONTP REPORT

Health Care Workforce

Not Enacted

LD 1687	An Act To Increase Health Insurance Coverage for Front-line Direct Care Workers Providing Long-term Care	CARRIED OVER
LD 1764	An Act To Increase the Wages of Direct Support Professional Staff Based on Increases in the State Minimum Wage	ONTP

Health Data

Enacted

LD 40	Resolve, Regarding Legislative Review of Portions of Chapter 100: Enforcement Procedures, a Major Substantive Rule of the Maine Health Data Organization	RESOLVE 17 EMERGENCY
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LD 902	An Act To Amend the Maine Health Data Organization Laws	PUBLIC 136
LD 1874	Resolve, Regarding Legislative Review of Portions of Chapter 270: Uniform Reporting Systems for Maine Quality Data Sets, a Major Substantive Rule of the Maine Health Data Organization	RESOLVE 77 EMERGENCY

Not Enacted

LD 1797	An Act To Fund Maine's HealthInfoNet Program	CARRIED OVER
LD 1843	An Act To Improve the Quality of Health Care in Maine	CARRIED OVER

Hospitals

Enacted

LD 436	An Act To Postpone the Expiration of the Required Nonhospital Expenditures Component in the Capital Investment Fund	PUBLIC 94
LD 1781	An Act To Prevent Duplication in Certification of Hospitals	PUBLIC 314

Not Enacted

LD 48	An Act To Exempt Training and Educational Research Costs from the Voluntary Spending Cap	ONTP
LD 1450	An Act To Create Equity in Hospital Charges	ONTP

Medicaid/MaineCare

Enacted

LD 37	Resolve, Regarding Legislative Review of Portions of MaineCare Benefits Manual, Chapter III, Section 50, Principles of Reimbursement for Intermediate Care Facilities for Persons with Mental Retardation, a Major Substantive Rule of the Department of Health and Human Services, Office of MaineCare Services	RESOLVE 44 EMERGENCY
LD 39	Resolve, Regarding Legislative Review of Portions of Regulations Governing the Licensing and Functioning of Intermediate Care Facilities for Persons with Mental Retardation, a Major Substantive Rule of the Department of Health and Human Services	RESOLVE 33 EMERGENCY
LD 306	An Act To Provide Medically Necessary Speech Therapy Services	PUBLIC 71
LD 339	Resolve, To Ensure Proper Levels of Care for the Elderly and the Disabled	RESOLVE 61 EMERGENCY
LD 650	An Act To Equalize MaineCare Reimbursements to Hospitals	P & S 19

LD 704	Resolve, Regarding Legislative Review of Portions of MaineCare Benefits Manual, Chapter III, Section 97, Private Non-medical Institution Services, a Major Substantive Rule of the Department of Health and Human Services	RESOLVE 16 EMERGENCY
LD 723	Resolve, To Promote Chronic Disease Prevention and Care	RESOLVE 36
LD 970	An Act to Repeal Delayed Estate Recovery	PUBLIC 423
LD 1130	Resolve, To Increase Fairness in Medical Payments	RESOLVE 48
LD 1198	Resolve, Regarding the Provision of Over-the-counter Medications in the MaineCare Program	RESOLVE 75
LD 1421	Resolve, Regarding Tobacco Cessation and Treatment	RESOLVE 34
LD 1537	Resolve, To Review Remote Access Medicine, Hospice and Home Health Care under MaineCare	RESOLVE 111
LD 1566	An Act To Allow the State Timely Opportunity To Participate in Settlement Negotiations for MaineCare Benefits	PUBLIC 381
LD 1746	An Act To Improve MaineCare and Promote Employment	PUBLIC 448

Not Enacted

LD 12	An Act To Establish a Residency Requirement for MaineCare Recipients	ONTP
LD 50	Resolve, Regarding Costly Computer Processes at the Department of Health and Human Services	ONTP
LD 72	An Act To Improve MaineCare Members' Access to Information	ONTP
LD 273	An Act To Help Save the Homes of Some Persons Who Enter Nursing Facilities	ONTP
LD 282	An Act To Provide Dental Care for Pregnant Women and New Mothers Receiving MaineCare Benefits	ONTP
LD 405	An Act To Establish Necessary MaineCare Pharmacy Incentives	CARRIED OVER
LD 520	An Act To Ensure Access to MaineCare Services	ONTP
LD 551	An Act To Create the Maine Health Card Program	ACCEPTED ONTP REPORT
LD 651	An Act To Support Small, Local and Efficient Hospitals	ACCEPTED ONTP REPORT

LD 652	Resolve, To Ensure Appropriate Personal Needs Allowances for Persons Residing in Long-term Care Facilities	CARRIED OVER
LD 880	An Act To Increase the Amount of Money a Resident in a Nursing Home May Spend on Personal Expenses	DIED ON ADJOURNMENT
LD 975	Resolve, To Provide Reimbursement for Residential Care Facilities for Rising Heating Costs and Cost-of-living Adjustments	DIED ON ADJOURNMENT
LD 984	Resolve, To Evaluate MaineCare Finances	ONTP
LD 1120	An Act To Amend MaineCare Benefits as Allowed by the Federal Deficit Reduction Act of 2005	ONTP
LD 1137	An Act To Provide Payment for Homeless Respite Care Services through the MaineCare Program	ONTP
LD 1146	An Act To Promote Healthy Practices for MaineCare Members	ONTP
LD 1176	An Act Regarding MaineCare Prescription Drug and Tobacco Sales BY REQUEST	ONTP
LD 1187	An Act To Recoup Health Care Funds through the Maine False Claims Act	ONTP
LD 1250	An Act To Implement an Oral Health Capitation System for Children on MaineCare	ONTP
LD 1437	An Act To Review Prescription Drug Prior Authorization under MaineCare	ONTP
LD 1509	Resolve, To Protect Nursing Facilities	ONTP
LD 1536	Resolve, Directing the Department of Health and Human Services To Reform Maine's Noncategorical Medicaid Program	ONTP
LD 1669	An Act To Amend the Laws Governing Reimbursement of Nursing Facilities	DIED ON ADJOURNMENT
LD 1762	An Act To Increase MaineCare Reimbursement for Speech and Language Therapists and Provide Treatment for Adults with Developmental Disabilities	ONTP
LD 1820	An Act To Create a Program To Implement Choice of Health Plans in the MaineCare Program and Amend the MaineCare Program	ONTP

Mental Health

Enacted

LD 711	An Act Regarding Notice That Must Be Provided by a Psychiatric Facility Concerning Certain Patients	PUBLIC 89
LD 792	Resolve, To Direct the Department of Health and Human Services To Review and Report on Efforts Concerning Postpartum Mental Health Education	RESOLVE 58
LD 1033	An Act Regarding Involuntary Treatment of Mental Health Patients	PUBLIC 446
LD 1745	An Act To Improve Continuity of Care within Maine's Community-based Mental Health Services	PUBLIC 286
LD 1855	An Act To Clarify Involuntary Admissions for Psychiatric Hospitalizations	PUBLIC 319

Not Enacted

LD 1676	An Act To Ensure the Effective Management of the Behavioral Health Care Services System in Maine	ONTP
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Mental Retardation and Developmental Disabilities

Enacted

LD 726	An Act To Provide Services for Adults with Diagnoses of Mental Retardation and Other Developmental Disabilities	PUBLIC 152
LD 1118	An Act To Provide Certain Requirements for Rules Related to Rate Setting for Mental Retardation Services	PUBLIC 237 EMERGENCY
LD 1780	Resolve, To Convene a Working Group To Review Statutory Language and Propose Standards To Ensure the Use of Respectful Language	RESOLVE 62
LD 1801	An Act To Clarify the Definition of Autism	PUBLIC 309
LD 1907	An Act To Clarify and Affirm the Scope of Services Available to Persons with Mental Retardation or Autism	PUBLIC 356

Not Enacted

LD 722	An Act To Create the Acquired Brain Injury Fund	ONTP
LD 1782	Resolve, To Clarify the Rules of Reimbursement for Personnel Working in Homes Providing Services to Persons with Brain Injuries	ONTP

Poverty and Homelessness

Enacted

LD 1371	Resolve, To Study the Impact of Social Services and Corrections Policies on Homeless People in Maine	RESOLVE 131 EMERGENCY
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Not Enacted

LD 1110	An Act To Create the Maine Council on Poverty and Economic Security	CARRIED OVER
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LD 1639	Resolve, Directing the Commissioner of Health and Human Services To Implement Representative Payee and Disability Specialists Programs	ACCEPTED ONTP REPORT
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Prescription Drugs

Enacted

LD 4	An Act To Amend the Prescription Privacy Law	PUBLIC 460
LD 807	An Act To Prevent Overcharging for Prescription Drug Copayments	PUBLIC 431
LD 839	An Act To Establish a Prescription Drug Academic Detailing Program	PUBLIC 327
LD 883	An Act To Allow a Self-pay Patient To Choose between Generic and Brand-name Medications	PUBLIC 85
LD 1440	An Act To Prohibit the Sale or Distribution of Software That Contains Inappropriate Advertising of Prescription Drugs	PUBLIC 362

Not Enacted

LD 22	An Act To Require Health Care Practitioners to Distribute Free Samples of Medication in Certain Circumstances	ONTP
LD 97	An Act Regarding Prescription Drug Expiration Dates	ONTP
LD 364	An Act To Stop Misleading Drug Advertisements	ONTP
LD 386	An Act To Provide for Prescription Monitoring and Protection of Personal Patient Information	ONTP
LD 838	An Act Protecting the Confidentiality of Prescription Information	ACCEPTED ONTP REPORT
LD 1286	An Act To Impose Tighter Controls over Addictive Prescription Drugs	ONTP
LD 1463	An Act To Prevent Elder Prescription Drug Abuse	DIED ON ADJOURNMENT
LD 1523	An Act Requiring Heavy Metal-free Immunizing Agents	ONTP

Public Assistance

Enacted

LD 29	An Act To Amend the Laws Governing Welfare	PUBLIC 282
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LD 168 **Resolve, To End Fraud in Maine's Welfare Benefit Programs** **RESOLVE 31**

Not Enacted

LD 28 **An Act To Establish a Statewide Residency Requirement for General Assistance** **ONTP**

LD 43 **Resolve, To Direct the Department of Health and Human Services To Exclude Veterans Education Assistance from Income in Determining Eligibility for the Food Stamp Program** **ONTP**

LD 724 **Resolve, To Direct the Department of Health and Human Services To Provide Temporary Assistance for Needy Families Benefits to Certain Guardians of Minors** **ONTP**

LD 899 **Resolve, To Establish a Committee To Examine the Impacts of the 1993 Amendments to General Assistance Program Eligibility** **ONTP**

LD 957 **An Act To Enact a Five-point Welfare Reform Plan** **ONTP**

LD 990 **An Act To Assist Children Who Are Not Receiving Court-ordered Child Support Payments** **ONTP**

LD 1162 **An Act To Remove Disparities in the Administration of Emergency Aid** **ONTP**

LD 1252 **An Act To Amend State Funding Reimbursement under the General Assistance Program** **ONTP**

Public Health

Enacted

LD 137 **Resolve, Requiring the Maine Center for Disease Control and Prevention To Report on Activities To Implement the Recommendations of the Task Force To Study Cervical Cancer Prevention, Detection and Education** **RESOLVE 73**

LD 429 **An Act To Improve Access to HIV Testing in Health Care Settings** **PUBLIC 93**

LD 754 **An Act To Allow Physician Assistants To Sign Death Certificates** **PUBLIC 56**

LD 977 **Resolve, To Address the Funding Needs of Air and Ground Emergency and Critical Care Emergency Medical Services** **RESOLVE 140**

LD 980 **An Act To Amend the Laws Governing the Burial or Cremation of Certain Persons** **PUBLIC 411**

LD 995 **An Act To Reduce the Expense of Health Care Treatment and Protect the Health of Maine Citizens by Providing Early Screening, Detection and Prevention of Cancer** **PUBLIC 341**

LD 1044 **An Act To Address Eating Disorders in Maine** **P & S 20**

LD 1142	An Act To Enhance the Newborn Hearing Program	PUBLIC 236
LD 1217	An Act To Improve Health Standards in Piercing Procedures	PUBLIC 184
LD 1239	Resolve, To Establish a Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine	RESOLVE 133 EMERGENCY
LD 1786	An Act To Reduce the Spread of Infectious Disease through Shared Hypodermic Apparatuses	PUBLIC 346
LD 1812	Resolve, Regarding the Role of Local Regions in Maine's Emerging Public Health Infrastructure	RESOLVE 114 EMERGENCY
<u>Not Enacted</u>		
LD 414	An Act To Decrease Cervical Cancer in Maine Girls	ONTP
LD 568	An Act To Conform HIV Testing to the Recommendations of the Federal Centers for Disease Control and Prevention	ONTP
LD 574	An Act To Increase Funding for the State's Immunization Program	ONTP
LD 808	Resolve, To Establish the Study Group To Examine Strategies for Integrating Nutritional Wellness and Prevention Measures into Maine's Health Care System	ONTP
LD 837	An Act To Prevent Infant Exposure to Harmful Hormone-disrupting Substances	ACCEPTED ONTP REPORT
LD 973	An Act To Require the Maine Center for Disease Control and Prevention To Publish Abortion Statistics	ONTP
LD 1179	An Act To Provide Regional Coordination and Planning for Public Health Programs and Activities	ONTP
LD 1184	Resolve, To Establish a Commission To Study the Possibility of Implementing the Proposed Healthy Americans Act	ONTP
LD 1309	An Act To Provide Equity in Funding for Women's Health Services	ONTP
LD 1398	An Act To Enable Restaurants To Allow Dogs In Outdoor Portions of Those Establishments	ONTP
LD 1446	An Act To Protect Children from Mercury and Thimerosal Toxicity in Immunizing Agents	ONTP
LD 1774	An Act To Provide Greater Information Pertaining to the Health of Maine Children	ONTP
LD 1775	An Act To Ensure Safe Drinking Water from Private Wells	ONTP

Substance Abuse

Enacted

LD 987	An Act To Provide Gambling Addiction Counseling Services through the Office of Substance Abuse	PUBLIC 116 EMERGENCY
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Not Enacted

LD 1574	Resolve, To Address Drug Abuse and Addiction	ONTP
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Tax and Match

Not Enacted

LD 703	An Act To Repeal the Tax on Private Nonmedical Institutions	ONTP
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Tobacco Sale and Use

Enacted

LD 38	Resolve, Regarding Legislative Review of Portions of Chapter 250: Rules Relating to Smoking in the Workplace, a Major Substantive Rule of the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Partnership for a Tobacco-free Maine	RESOLVE 4 EMERGENCY
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LD 725	An Act To Ensure Retail Tobacco License Compliance	PUBLIC 172
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LD 859	An Act To Restrict the Smoking Exemption for Tobacco Specialty Stores	PUBLIC 180
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LD 1361	An Act Concerning Certain Flavored Cigarettes and Flavored Cigars and Hard Snuff	PUBLIC 467
---------	--	------------

LD INDEX

LD #		Page #
LD 4	-----	Page 1
LD 12	-----	Page 4
LD 22	-----	Page 4
LD 28	-----	Page 4
LD 29	-----	Page 5
LD 37	-----	Page 5
LD 38	-----	Page 6
LD 39	-----	Page 6
LD 40	-----	Page 6
LD 43	-----	Page 7
LD 48	-----	Page 7
LD 50	-----	Page 7
LD 72	-----	Page 7
LD 87	-----	Page 8
LD 97	-----	Page 8
LD 137	-----	Page 8
LD 168	-----	Page 10
LD 273	-----	Page 10
LD 282	-----	Page 10
LD 283	-----	Page 10
LD 306	-----	Page 11
LD 339	-----	Page 11
LD 364	-----	Page 12
LD 365	-----	Page 12
LD 386	-----	Page 12
LD 405	-----	Page 13
LD 414	-----	Page 13
LD 429	-----	Page 14
LD 436	-----	Page 14
LD 467	-----	Page 14
LD 487	-----	Page 15
LD 500	-----	Page 15
LD 519	-----	Page 15
LD 520	-----	Page 15
LD 551	-----	Page 16
LD 568	-----	Page 16
LD 574	-----	Page 16
LD 596	-----	Page 16
LD 609	-----	Page 17
LD 615	-----	Page 17
LD 650	-----	Page 17
LD 651	-----	Page 18
LD 652	-----	Page 18
LD 703	-----	Page 19
LD 704	-----	Page 19
LD 711	-----	Page 19
LD 722	-----	Page 20
LD 723	-----	Page 20
LD 724	-----	Page 20
LD 725	-----	Page 21
LD 726	-----	Page 21
LD 727	-----	Page 22
LD 753	-----	Page 22
LD 754	-----	Page 22

LD 755	-----	Page 23
LD 770	-----	Page 24
LD 792	-----	Page 24
LD 807	-----	Page 25
LD 808	-----	Page 25
LD 837	-----	Page 25
LD 838	-----	Page 26
LD 839	-----	Page 26
LD 859	-----	Page 27
LD 880	-----	Page 27
LD 883	-----	Page 27
LD 899	-----	Page 28
LD 902	-----	Page 28
LD 931	-----	Page 29
LD 943	-----	Page 29
LD 957	-----	Page 29
LD 970	-----	Page 29
LD 973	-----	Page 30
LD 975	-----	Page 30
LD 977	-----	Page 30
LD 980	-----	Page 31
LD 981	-----	Page 31
LD 984	-----	Page 32
LD 987	-----	Page 32
LD 990	-----	Page 32
LD 995	-----	Page 33
LD 996	-----	Page 33
LD 1016	-----	Page 33
LD 1033	-----	Page 34
LD 1044	-----	Page 35
LD 1110	-----	Page 35
LD 1118	-----	Page 36
LD 1120	-----	Page 36
LD 1130	-----	Page 36
LD 1137	-----	Page 37
LD 1142	-----	Page 37
LD 1146	-----	Page 38
LD 1162	-----	Page 38
LD 1170	-----	Page 38
LD 1176	-----	Page 39
LD 1179	-----	Page 39
LD 1184	-----	Page 39
LD 1187	-----	Page 39
LD 1198	-----	Page 40
LD 1209	-----	Page 40
LD 1217	-----	Page 41
LD 1239	-----	Page 41
LD 1250	-----	Page 42
LD 1252	-----	Page 42
LD 1280	-----	Page 42
LD 1286	-----	Page 43
LD 1288	-----	Page 43
LD 1289	-----	Page 43
LD 1308	-----	Page 44

LD 1309	-----	Page 44
LD 1354	-----	Page 44
LD 1361	-----	Page 45
LD 1369	-----	Page 46
LD 1370	-----	Page 46
LD 1371	-----	Page 47
LD 1386	-----	Page 47
LD 1396	-----	Page 48
LD 1398	-----	Page 48
LD 1418	-----	Page 49
LD 1421	-----	Page 49
LD 1437	-----	Page 50
LD 1440	-----	Page 50
LD 1446	-----	Page 51
LD 1450	-----	Page 51
LD 1451	-----	Page 51
LD 1463	-----	Page 51
LD 1501	-----	Page 52
LD 1509	-----	Page 52
LD 1523	-----	Page 53
LD 1527	-----	Page 53
LD 1535	-----	Page 53
LD 1536	-----	Page 54
LD 1537	-----	Page 54
LD 1566	-----	Page 55
LD 1567	-----	Page 55
LD 1574	-----	Page 56
LD 1639	-----	Page 56
LD 1660	-----	Page 56
LD 1661	-----	Page 56
LD 1669	-----	Page 57
LD 1676	-----	Page 57
LD 1686	-----	Page 58
LD 1687	-----	Page 58
LD 1699	-----	Page 59
LD 1714	-----	Page 59
LD 1745	-----	Page 60
LD 1746	-----	Page 60
LD 1751	-----	Page 62
LD 1762	-----	Page 62
LD 1763	-----	Page 62
LD 1764	-----	Page 63
LD 1765	-----	Page 64
LD 1774	-----	Page 64
LD 1775	-----	Page 64
LD 1780	-----	Page 65
LD 1781	-----	Page 65
LD 1782	-----	Page 66
LD 1786	-----	Page 66
LD 1797	-----	Page 66
LD 1800	-----	Page 67
LD 1801	-----	Page 68
LD 1805	-----	Page 68
LD 1812	-----	Page 69

LD 1820	-----	Page 70
LD 1843	-----	Page 70
LD 1849	-----	Page 70
LD 1855	-----	Page 71
LD 1868	-----	Page 72
LD 1874	-----	Page 73
LD 1880	-----	Page 73
LD 1899	-----	Page 74
LD 1907	-----	Page 74
LD 1909	-----	Page 75