Committee: HHS
Drafter: LRL\SAS

File Name: LD 1693 sponsor amendment

New Title?: No Add Emergency?: No Date: January 28, 2022

Amendment Offered by Representative Talbot Ross to LD 1693, An Act To Advance Health Equity, Improve the Well-being of All Maine People and Create a Health Trust

- 1. Amend Sec. A-1. Re-number 5 MRSA, §12004-G, sub-§14-J as 5 MRSA, §12004-G, sub-§14-K
- 2. Insert new section. **5 MRSA § 93** is established to read:

93.

HumanObesity AdvisoryExpenses/Legislative Per Diem for22 MRSAServicesCouncilNonsalaried Employee Members§1696-J

- 3. Amend Sec. A-4. 22 MRSA §1515, sub-§3, ¶B, sub-¶2 as follows:
 - (2) A person who is an employer with experience recruiting, employing, developing, and retaining a healthy workforce; and
- 4. Amend Sec. A-4. 22 MRSA §1515, sub-\$3, ¶C, sub-¶1, div-a as follows:
 - (a) A person who has clinical expertise or public health experience, or both, in rural primary care, including oral health care, selected from recommendations provided by a statewide organization that represents community health centers in the State; and
- 5. Amend Sec. A-4. 22 MRSA §1515, sub-§11, as follows:
 - 11. Expenses; reimbursement. Trustees are not entitled to compensation for service on the board, except that, in accordance with Title 5, section 12004-G, subsection 14-J 14-K, the trust may reimburse travel and other board-related expenses.
- 6. Amend Sec. A-4. 22 MRSA §1517, sub-§3 as follows:

- 3. Funding disbursement plans. The funding disbursement plan approved by the board pursuant to subsection 1 for fiscal year 2023-24 must disburse an amount equal to 0.30 of the settlement funds projected to be received in fiscal year 2023-24 for the purpose of providing medical care. The funding disbursement plan approved by the board for fiscal year 2024-25 2023-24 and subsequent years may not disburse funds for the purpose of providing medical care. When approving other elements of the funding disbursement plans, the board shall consider funding levels in the most recent fiscal year and disburse funding in amounts that minimize disruption of existing programs and ensure smooth and efficient transitions to the funding levels required under subsection 4.
- 7. Amend Sec. **A-4. 22 MRSA §1517, sub-§4, ¶B, sub-¶1** as follows:
 - (1) Beginning in fiscal year 2023-24, an amount equal to 0.005 0.006 of the settlement funds; and
- 8. Amend Sec. A-4. 22 MRSA §1517, sub-§4, ¶C, sub-¶1 as follows:
 - (1) Beginning in fiscal year 2023-24, an amount equal to 0.003 0.006; and
- 9. Amend **Sec. A-4. 22 MRSA §1517**, **sub-§5**, ¶**A**, **sub-**¶**4** as follows:
 - (4) Supporting the development, expansion, recruitment, retention, and presence of the public health workforce at local, district and state levels, including supporting a robust network of community health workers and government employees in the State dedicated to addressing systemic racism and structural inequity; and
- 10. Amend **Sec. B-1. 22 MRSA §414** as follows:

§414. Office of **Population** Health Equity

- <u>1. Office established.</u> The Office of <u>Population</u> Health Equity is established within the department. The office is staffed by at least one full-time employee.
 - **2. Purpose.** The Office of Population Health Equity shall:
 - A. Upon request, advise the commissioner, the Governor's Office of Policy Innovation and the Future and other state agencies, the Legislature and the Governor on health systems, policies and practices, including intradepartmental and interdepartmental training;
 - B. Provide recommendations to the public and State Government and private and philanthropic partners to advance health equity, as defined in section 1514, subsection 8, in all sectors and settings;
 - C. Produce and update a state health equity plan to:

- (1) Create systems, policies and practices to achieve health equity, as defined in section 1514, subsection 8, in all policies across State Government, including robust surveillance and evaluation; and
- (2) Establish policies to ensure all state contractors and vendors have a health equity plan in place as a criteria for funding; and
- D. Produce an annual report, known as the Maine Health Equity Report Card, which includes health programs and services, outcomes and social determinants of health equity, as defined in section 1514.
- 11. Insert new section **C-1. 22 MRSA Subchapter 5** is established to read:

Subchapter 5: OBESITY ADVISORY COUNCIL

§1696-J. Obesity Advisory Council

- 1. Obesity Advisory Council established. The Obesity Advisory Council is established under Title 5, section 12004-I, subsection 93 to review programming relating to the reduction of unhealthy weight and obesity. The advisory council shall provide advice to the department in carrying out its duties under this section and ensure coordination of the program with relevant nonprofit and community agencies and the Department of Education, and other relevant state agencies.
 - 2. Membership. The advisory council consists of 9 members, appointed as follows:
 - A. Two public health officials, appointed by the Governor;
 - B. Two representatives of nonprofit organizations involved in seeking to reduce unhealthy weight and obesity, with one representative appointed by the President of the Senate and one representative appointed by the Speaker of the House of Representatives;
- <u>C. A person who designs and implements issue-oriented public health media campaigns, appointed by the Governor;</u>
 - D. Two persons involved in designing and implementing community-based education programs for the prevention of unhealthy weight and obesity, one to focus on adults, appointed by the President of the Senate, and one to focus on youth, appointed by the Speaker of the House of Representatives; and

E. Two members of the public, appointed jointly by the President of the Senate and the Speaker of the House of Representatives in consultation with the leaders of the minority political party.

- 3. Appointments. Initial appointments to the advisory council must be made by October 1, 2022. When the appointment of all members is complete, the Governor or the Governor's designee shall convene the first meeting of the advisory council no later than November 1, 2022. Members serve for 3-year terms and may be reappointed. The appointing authority shall fill a vacancy on the advisory council for the remainder of the vacant term.
- <u>4.</u> <u>Chair.</u> The advisory council shall choose a chair from among its members and establish its procedure for reaching decisions.
 - 5. Staff assistance. The department shall provide staff assistance to the advisory council.
- <u>6. Compensation</u> Each member who is not a salaried employee is entitled to compensation as provided in Title 5, section 12004-I, subsection 93 following approval of expenses by the Commissioner of Health and Human Services.
- 12. Renumber Part C sections
- 13. Delete Sec. C-2(3), page 14, lines 36-39.
- 14. Insert the following Section:
- **Sec. X. Transfer; Fund for a Healthy Maine; General Fund.** Notwithstanding any other provision of law, the State Controller shall transfer \$37,860,191 from the Fund for a Healthy Maine to the General Fund unappropriated surplus no later than June 30, 2023.
- 15. Strike and replace **Section E-6 Appropriations and Allocations** as follows:

HEALTH AND HUMAN SERVICES, DEPARTMENT OF

Head Start 0545

Initiative: On-going deallocation of Fund for a Healthy Maine funds from the Head Start program.

FUND FOR A HEALTHY MAINE		2021-22	2022-23
	All Other	\$0	(\$1,354,580)
FUND FOR A HEALTHY MAINE	ГОТАL	\$0	(\$1,354,580)

Head Start 0545

Initiative: On-going appropriation to retain State funding for the Head Start program.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$1,354,580
GENERAL FUND TOTAL		\$0	\$1,354,580

Low-cost Drugs To Maine's Elderly 0202

Initiative: On-going deallocation of Fund for a Healthy Maine funds from the Low-cost Drugs to Maine's Elderly program.

FUND FOR A HEALTHY MAINE		2021-22	2022-23
	All Other	\$0	(\$3,669,038)
FUND FOR A HEALTHY MAINE TO	TAL	\$0	(\$3,669,038)

Low-cost Drugs To Maine's Elderly 0202

Initiative: On-going appropriation to retain State funding for the Low-cost Drugs to Maine's Elderly program.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$3,669,038
GENERAL FUND TOTAL		\$0	\$3,669,038

Maine Center for Disease Control and Prevention 0143

Initiative: Appropriates funds for one Comprehensive Health Planner II position to act as the Obesity Care Coordinator in the Maine Center for Disease Control and Prevention.

GENERAL FUND		2021-22	2022-23
	POSITIONS -	0.000	1.000
	LEGISLATIVE		
	COUNT		
	Personal Services	\$0	\$92,480
	All Other	\$0	\$6,398

GENERAL FUND TOTAL	\$0	\$98,878

Maine Center for Disease Control and Prevention 0143

Initiative: Appropriates funds to implement evidence-based programming relating to the reduction of unhealthy weight and obesity.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$151,000
GENERAL FUND TOTAL			\$151,000

Maine Center for Disease Control and Prevention 0143

Initiative: Appropriates funds for Public Health District, District Improvement Plans.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$900,000
GENERAL FUND TOTAL		\$0	\$900,000

Maine Center for Disease Control and Prevention 0143

Initiative: Appropriates funds to implement data collection and reporting in the Office of Population Health Equity.

GENERAL FUND	All Other	2021-22 \$0	2022-23 \$151,000
GENERAL FUND TOTAL			\$151,000

Medical Care - Payments to Providers 0147

Initiative: On-going deallocation of Fund for a Healthy Maine funds from the Medical Care - Payments to Providers program.

FUND FOR A HEALTHY MAINE		2021-22	2022-23
	All Other	\$0	(\$30,865,455)
FUND FOR A HEALTHY MAINE T	TOTAL	\$0	(\$30,865,455)

Medical Care - Payments to Providers 0147

Initiative: On-going appropriation to retain State funding for the Medical Care - Payments to Providers program.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$30,865,455
GENERAL FUND TOTAL			\$30.865.455

Purchased Social Services 0228

Initiative: On-going deallocation of Fund for a Healthy Maine funds from the Purchased Social Services program.

FUND FOR A HEALTHY MAINE		2021-22	2022-23
	All Other	\$0	(\$1,971,118)
FUND FOR A HEALTHY MAINE T	OTAL	\$0	(\$1,971,118)

Purchased Social Services 0228

Initiative: On-going appropriation to retain State funding for the Purchased Social Services program.

GENERAL FUND		2021-22	2022-23
	All Other	\$0	\$1,971,118
GENERAL FUND TOTAL		\$0	\$1,971,118
HEALTH AND HUMAN SERVICES, DI	EPARTMENT OF		
DEPARTMENT TOTALS		2021-22	2022-23
	GENERAL FUND	\$0	\$39,161,069
	FUND FOR A HEALTHY MAINE	\$0	(\$37,860,191)
DEPARTMENT TOTAL - ALL FUNDS			\$1,300,878

SUMMARY

This amendment:

1. Removes the requirement that one of the council members be an employer, and replaces that with a requirement that the person have experience recruiting, employing, developing, and retaining a healthy workforce;

- 2. Adds experience in oral healthcare to the allowable background requirements for one of the council members;
- 3. Changes to percentage of funds dedicated to administration in the first year from .003 to .006 percent;
- 4. Changes to percentage of funds dedicated to the Attorney General's Office in the first year from .003 to .006 percent;
- 5. Adds development of the public health workforce to the allowable uses of the funds in the health equity and health improvement account;
- 6. Changes the name of the Office of Health Equity to the Office of Population Health Equity;
- 7. Removes the language stating that contingent upon state funding, the department shall make all students, regardless of household income, eligible to receive a breakfast and lunch at the public school free of charge;
- 8. Adds language creating an Obesity Advisory Council within the Department of Health and Human Services;
- 9. Deallocates funding for Head Start, Low-cost Drugs to Maine's Elderly, MaineCare provider payments, and Purchased Social Services from the Fund for a Healthy Maine and adds on-going appropriations to the General Fund to maintain these programs;
- 10. Removes the 2021-22 appropriations.