

# MAINE STATE LEGISLATURE

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**LAWS**  
OF THE  
**STATE OF MAINE**

AS PASSED BY THE

ONE HUNDRED AND NINTH LEGISLATURE

AT THE

**SECOND REGULAR SESSION**

January 2, 1980 to April 3, 1980

AND AT THE

**THIRD SPECIAL SESSION**

May 22, 1980

PUBLISHED BY THE DIRECTOR OF LEGISLATIVE RESEARCH IN  
ACCORDANCE WITH MAINE REVISED STATUTES ANNOTATED,  
TITLE 3, SECTION 164, SUBSECTION 6.

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PRIVATE AND SPECIAL LAWS  
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January 2, 1980 to April 3, 1980

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**Sec. 1. Appropriations and allocations.** There is appropriated from the General Fund the sums of \$114,950 for the fiscal year ending June 30, 1980, and \$147,400 for the fiscal year ending June 30, 1981, and there is allocated from the Highway Fund the sums of \$344,850 for the fiscal year ending June 30, 1980, and \$442,200 for the fiscal year ending June 30, 1981, to implement the compensation benefits agreed to by the State and the Maine State Troopers Association and ratified by the Maine State Troopers Association on December 30, 1979. The breakdown shall be as follows:

	1979-80	1980-81
STATE POLICE COMPENSATION FUND		
General Fund		
All Other	\$114,950	\$147,400
Highway Fund Compensation Fund	344,850	442,200

**Sec. 2. Funding.** The funding provided by this Act shall include retirement costs and be available for all employees covered by the agreement between the State and the Maine State Troopers Association.

**Sec. 3. Special account.** The funding provided shall be segregated in a special account to be made available as needed upon the recommendation of the State Budget Officer with the approval of the Governor.

**Sec. 4. Intent.** Notwithstanding any other provision of law, it is the intent of the Legislature that retired persons receiving benefits under the Revised Statutes, Title 25, chapter 195, shall have their benefits adjusted, effective with the start of the payroll period commencing nearest to January 1, 1980.

**Sec. 5. Carrying clause.** Any balances remaining from previous salary accounts and any balance remaining from salary accounts established by this Act shall not lapse, but shall carry forward to June 30, 1981.

**Emergency clause.** In view of the emergency cited in the preamble, this Act shall take effect when approved.

Effective March 3, 1980

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## CHAPTER 80

S. P. 707 — L. D. 1843

**AN ACT to Amend the Pay Schedule of Physicians to Include Actuaries.**

Be it enacted by the People of the State of Maine, as follows:

**Sec. 1.** P&SL 1975, c. 147, Pt. D, § 3, Schedule I, last ¶, is amended to read:

Any position requiring a licensed physician or actuary shall be assigned to the appropriate grade in the following schedule:

**Sec. 2.** P&SL 1975, c. 147, Pt. D, § 3, Schedule Ia, 2nd line, as repealed and replaced by PL 1977, c. 712, Pt. E, is amended to read:

(Physicians & Actuaries)

**Sec. 3.** P&SL 1975, c. 147, Pt. D, § 3, Schedule Ia, last ¶, as repealed and replaced by PL 1977, c. 712, Pt. E, is amended to read:

Provides an adjustment to the schedule affecting physicians—psychiatrists professionals or actuaries to alleviate a critical recruitment problem in state institutions.

Effective July 3, 1980

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## CHAPTER 81

H. P. 1818 — L. D. 1946

### AN ACT Relating to the Powers of Hospital Administrative District No. 1 in Penobscot County.

**Emergency preamble.** Whereas, Acts of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, the Legislature, by the Private and Special Laws of 1967, chapter 58, established enabling legislation for the creation of a hospital administrative district in Penobscot County; and

Whereas, the Towns of Howland, Enfield, Burlington, Lowell, Lincoln, Springfield, Lee, Passadumkeag, Chester, Winn and Maxfield and the Plantations of Seboeis, Prentiss and Webster, have each by majority vote thereof voted to enter into the hospital administrative district; and

Whereas, there is an immediate and pressing need for the district, through the Penobscot Valley Hospital, to participate in a hospital-shared services organization to provide health related shared services with other hospitals and health services agencies in order to alleviate escalating health-care costs and