

# MAINE STATE LEGISLATURE

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

**AS PASSED BY THE**  
**ONE HUNDRED AND SEVENTEENTH LEGISLATURE**

**FIRST SPECIAL SESSION**  
**November 28, 1995 to December 1, 1995**

**SECOND REGULAR SESSION**  
**January 3, 1996 to April 4, 1996**

**THE GENERAL EFFECTIVE DATE FOR**  
**FIRST REGULAR SESSION**  
**NON-EMERGENCY LAWS IS**  
**JULY 4, 1996**

**PUBLISHED BY THE REVISOR OF STATUTES**  
**IN ACCORDANCE WITH MAINE REVISED STATUTES ANNOTATED,**  
**TITLE 3, SECTION 163-A, SUBSECTION 4.**

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**J.S. McCarthy Company**  
**Augusta, Maine**  
**1995**

## CHAPTER 581

## H.P. 99 - L.D. 134

**An Act to Amend the Laws  
Regarding the Maine Public  
Drinking Water Commission**

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

**Sec. 1. 22 MRSA §2660-C, sub-§1, ¶A**, as enacted by PL 1993, c. 410, Pt. DD, §4, is amended to read:

A. Four of the members must represent the water purveying community and must be ~~employed by~~ associated with public water systems. One of the 4 must be ~~employed by~~ associated with a public water system serving a population of less than 500 people, one must be ~~employed by~~ associated with a public water system serving a population of at least 500 but not more than 3,300 people, one must be ~~employed by~~ associated with a public water system serving a population of at least 3,301 but not more than 10,000 people, and one must be ~~employed by~~ associated with a public water system serving a population greater than 10,000 people.

**Sec. 2. 22 MRSA §2660-C, sub-§4, ¶¶A, E and F**, as enacted by PL 1993, c. 410, Pt. DD, §4, are amended to read:

A. ~~Determine~~ Evaluate the proportion of program effort dedicated to each type of public water system served by the program;

E. Determine an equitable program funding share for each type of public water system that ~~reflects~~ recognizes the level of program effort required for that public water system;

F. Determine fee formulas and collection and transfer schedules for each type of public water system; and

**Sec. 3. 22 MRSA §2660-C, sub-§4, ¶G**, as enacted by PL 1993, c. 410, Pt. DD, §4, is repealed.

**Sec. 4. 22 MRSA §2660-E, sub-§§1 and 2**, as enacted by PL 1993, c. 410, Pt. DD, §4, are amended to read:

**1. Rules.** The department shall establish fee formulas by rules adopted in accordance with the Maine Administrative Procedure Act. The department must consult with and consider the advice of the commission in preparing the rules. Proposed rules issued by the department under this section must include the fee formulas and collection and transfer

schedules developed by the commission. Fee formulas adopted under this section must be equitable. Fees may be based on, but are not limited to, the population served, service connections, volume of water pumped or available seats, campsites, rooms or lots, and may include fixed or graduated fee formulas or combinations of the fee formulas. ~~Fees~~ The base fee may be no ~~less~~ more than \$50 per year per public water system ~~and~~. The base plus per capita fee may be no more than \$30,000 per year per public water system.

**2. Collection and disposition of fees.** Fees adopted under this section cover the period beginning July 1, 1993 and must be collected by each public water system in monthly, quarterly or annual increments. Fees collected by public water systems under this section are state fees ~~and must be enumerated by the public water systems separately from all other charges~~. The department shall establish schedules for the collection and transfer of fees to the State with the advice of the commission. ~~With the advice of the commission, the department shall establish a reasonable percentage of the fees, not to exceed 2%, that may be retained by each public water system as reimbursement for expenses incurred in the collection of the fees.~~

See title page for effective date.

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CHAPTER 582

## S.P. 624 - L.D. 1632

**An Act Relating to the Sale of  
Alcoholic Beverages**

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

**Sec. 1. 28-A MRSA §708, sub-§1**, as repealed and replaced by PL 1987, c. 342, §44, is amended to read:

**1. Certificate of approval holders.** ~~No~~ A certificate of approval holder may not offer to wholesale licensees any special discounts, volume discounts, ~~depletion allowances~~ or other reduced prices or discounts, except bona fide price reductions under section 1408 offered to all wholesale licensees. A certificate of approval holder may offer depletion allowances to wholesale licensees if the depletion allowance is posted in accordance with section 1408. ~~No~~ A certificate of approval holder may not offer any free merchandise, rebate or gift contingent on the purchase of malt liquor or wine.

**Sec. 2. 28-A MRSA §708-A** is enacted to read:

**§708-A. In-pack sweepstakes, contests and games**

Notwithstanding any provision of law to the contrary, a certificate of approval holder, wholesale licensee or retail licensee may offer sweepstakes, games and contests inside packages of alcoholic beverages, if that offer is not contingent on the purchase of an alcoholic beverage.

See title page for effective date.

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**CHAPTER 583**
**S.P. 636 - L.D. 1644**

**An Act to Amend the Hospital  
Cooperation Act of 1992 to Facilitate  
Integrated Health Care Delivery  
Systems by Authorizing and  
Supervising Certain Hospital  
Mergers**

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

**Whereas,** the merger of certain hospitals or their parent organizations in this State can provide opportunities for measurable and substantial improvements in the quality, accessibility and cost-effectiveness of health care delivered to citizens of this State; and

**Whereas,** hospital mergers may provide a foundation for future development of integrated health care delivery systems, which can further improve the quality, accessibility and cost-effectiveness of health care; and

**Whereas,** some mergers of hospitals in this State may involve a substantial percentage of available hospital providers in particular regions of the State and result in undue anticompetitive effects. These mergers should be permitted only if the likely public benefits of the transaction outweigh their likely disadvantages, and governmental supervision of the merging hospitals ensures that any likely benefits to the public from the merger outweigh any likely disadvantages attributable to a reduction in competition from the merger; and

**Whereas,** it is in the public interest to establish an effective system of governmental review of such hospital mergers when proposed and supervision of approved mergers; and

**Whereas,** in the judgment of the Legislature the procedures established by this measure will provide sufficient government review and supervision so as to ensure that only those hospital mergers whose likely

benefits will outweigh their likely disadvantages will receive favorable consideration under this Act; and

**Whereas,** certain hospitals operating in the State or their parent organizations are in the process of planning a merger to provide coordinated hospital care. These hospitals desire to complete all necessary steps to provide hospital services on an integrated basis by January 1, 1997; and

**Whereas,** the process of an initial administrative review established by this Act must begin in mid-1996 in order to be completed in sufficient time to allow a determination whether and under what circumstances such hospital mergers should be approved under the authority of this measure; and

**Whereas,** in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

**Sec. 1. 22 MRSA §1882, sub-§1,** as amended by PL 1995, c. 232, §1, is further amended to read:

**1. Cooperative agreement.** "Cooperative agreement" means an agreement among 2 or more hospitals or nonprofit mental health care providers for the sharing, allocation or referral of patients, personnel, instructional programs, mental health services, support services and facilities or medical, diagnostic or laboratory facilities or procedures or other services traditionally offered by hospitals or nonprofit mental health care providers, or for the coordinated negotiation and contracting with payors or employers or for the merger of 2 or more hospitals.

**Sec. 2. 22 MRSA §1882, sub-§2-A** is enacted to read:

**2-A. Merger.** "Merger" means a transaction by which ownership or control over substantially all of the stock, assets or activities of one or more licensed and operating hospitals is placed under the control of another licensed hospital or hospitals or the parent organization of that hospital or hospitals.

**Sec. 3. 22 MRSA §1883, sub-§2-A** is enacted to read:

**2-A. Letter of intent.** Parties to a hospital merger agreement who intend to file an application for a certificate of public advantage for the merger transaction shall file a letter of intent describing the proposed merger with the department and the