

# MAINE STATE LEGISLATURE

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**STATE OF MAINE  
119TH LEGISLATURE**

**FIRST REGULAR SESSION**

**BILL SUMMARIES  
JOINT STANDING COMMITTEE  
ON  
HEALTH AND HUMAN SERVICES**

**JULY 1999**

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**ONE HUNDRED NINETEENTH LEGISLATURE**  
**FIRST REGULAR SESSION**

**Summary Of Legislation Before The Joint Standing and Select Committees**  
**August 1999**

We are pleased to provide this summary of all bills that were considered by the Joint Standing and Select Committees of the Maine Legislature this past session. The document is a compilation of bill summaries which describe each bill and relevant amendments, as well as the final action taken. Also included are statistical summaries of bill activity this session for the Legislature and each of its joint standing and select committees.

The document is organized for convenient reference to information on bills considered by the committees. It is organized by committees and within committees by bill (LD) number. The committee report(s), prime sponsor for each bill and the lead co-sponsor(s), if designated, are listed below each bill title. All adopted amendments are listed by paper number. Two indices, a subject index and a numerical index by LD number are provided for easy reference to bills. They are located at the back of the document. A separate publication, History and Final Disposition of Legislative Documents, may also be helpful in providing information on the disposition of bills. These bill summaries also are available at the Law and Legislative Reference Library and on the Internet ([www.state.me.us/legis/opla](http://www.state.me.us/legis/opla)).

Final action on each bill is noted to the right of the bill title. The abbreviations used for various categories of final action are as follows:

*CARRIED OVER*.....Bill carried over to Second Regular Session  
*CON RES XXX*..... Chapter # of Constitutional Resolution passed by both Houses  
*CONF CMTE UNABLE TO AGREE*.....Committee of Conference unable to agree; bill died  
*DIED BETWEEN BODIES*.....House & Senate disagree; bill died  
*DIED IN CONCURRENCE*..... One body accepts ONTP report; the other indefinitely postpones the bill  
*DIED ON ADJOURNMENT*.....Action incomplete when session ended; bill died  
*EMERGENCY*..... Enacted law takes effect sooner than 90 days  
*ENACTMENT FAILED*..... Bill failed to get vote required for enactment or final passage  
*NOT PROPERLY BEFORE THE BODY*..... Ruled out of order by the presiding officers; bill died  
*INDEF PP*.....Bill Indefinitely Postponed  
*ONTP*..... Ought Not To Pass report accepted  
*OTP ND*..... Committee report Ought To Pass In New Draft  
*OTP ND/NT*..... Committee report Ought To Pass In New Draft/New Title  
*P&S XXX*..... Chapter # of enacted Private & Special Law  
*PUBLIC XXX*..... Chapter # of enacted Public Law  
*RESOLVE XXX*..... Chapter # of finally passed Resolve  
*UNSIGNED*.....Bill held by Governor  
*VETO SUSTAINED*.....Legislature failed to override Governor's Veto

Please note the effective date for all non-emergency legislation enacted in the First Regular Session (unless otherwise specified in a particular law) is September 18, 1999.

Public Law 1999, chapter 45 allows municipalities to provide emergency assistance under the general assistance program when an emergency is imminent and failure to respond may result in undue hardship and unnecessary costs.

**LD 274**                      **An Act Regarding Persons Who May Draw Blood for Blood Tests**                      **PUBLIC 32**

|                              |  |                                   |  |                                   |
|------------------------------|--|-----------------------------------|--|-----------------------------------|
| <u>Sponsor(s)</u><br>CAMERON |  | <u>Committee Report</u><br>OTP-AM |  | <u>Amendments Adopted</u><br>H-21 |
|------------------------------|--|-----------------------------------|--|-----------------------------------|

LD 274 proposed to add registered lab technicians and certified phlebotomists to the list of persons who may draw blood samples to determine a person's blood-alcohol level or drug concentration.

**Committee Amendment "A" (H-21)** proposed to replace the title and the text of the bill. It proposed to allow persons qualified by professional training to draw blood samples for the purposes of blood-alcohol level or drug concentration tests under the Maine Revised Statutes, Title 29-A.

*Enacted law summary*

Public Law 1999, chapter 32 allows persons qualified by professional training to draw blood samples for the purposes of blood-alcohol level or drug concentration tests under the Maine Revised Statutes, Title 29-A.

**LD 276**                      **An Act to Require Review under the Certificate of Need Law When Health Care Services Are Terminated**                      **ONTP**

|                           |  |                                 |  |                           |
|---------------------------|--|---------------------------------|--|---------------------------|
| <u>Sponsor(s)</u><br>MAYO |  | <u>Committee Report</u><br>ONTP |  | <u>Amendments Adopted</u> |
|---------------------------|--|---------------------------------|--|---------------------------|

LD 276 proposed to make the termination of a health service by a health care facility, including a hospital, subject to the certificate of need law. The bill also proposed to clarify that the termination of a health service includes the relocation of a health care facility to another municipality.

**LD 286**                      **An Act to Amend the Laws Concerning Release of Information on Hospitalized Individuals**                      **ONTP**

|                               |  |                                 |  |                           |
|-------------------------------|--|---------------------------------|--|---------------------------|
| <u>Sponsor(s)</u><br>STANWOOD |  | <u>Committee Report</u><br>ONTP |  | <u>Amendments Adopted</u> |
|-------------------------------|--|---------------------------------|--|---------------------------|

LD 286 proposed to permit limited disclosure of health care information about an individual by a health care facility without a written authorization from the individual, including disclosure of admission and general condition of a patient to family or household members. LD 286 proposed to amend current law to permit any person to receive a statement of the fact of an individual's admission to or discharge from a health care facility. The bill proposed to limit the health care facilities from which this information can be obtained to those providing in-patient health care and that are not home health care providers, hospice programs, pharmacies, state mental health institutes or other named facilities. See also LD 1653.