

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).

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.

LD 1180

An Act to Require Additional Vaccines for Employees of Health Care Facilities

PUBLIC 378

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FULLER	OTP-AM	H-603

LD 1180 proposed to require hospital and designated health care facility employees to be immunized against Hepatitis B. It also proposed to require staff and volunteers of nursing homes and extended care facilities to be immunized annually against influenza.

This bill was submitted on behalf of the Department of Human Services.

Committee Amendment "A" (H-603) proposed to replace the bill. It proposed to clarify that the Hepatitis B immunization requirements apply to all employees in hospitals and designated health facilities that are at risk of direct occupational exposure to blood or body fluids. It proposed to require nursing facilities and licensed assisted living facilities to adopt policies recommending and offering influenza immunizations to direct care personnel.

Enacted law summary

Public Law 1999, chapter 378 provides that the Hepatitis B immunization requirements in Title 22 apply to all employees in hospitals and designated health facilities that are at risk of direct occupational exposure to blood or body fluids. It requires nursing facilities and licensed assisted living facilities to adopt policies recommending and offering influenza immunizations to direct care personnel.

LD 1203

An Act to Increase Access to Prescription Drugs for the Elderly and for Disabled Persons

INDEF PP

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

LD 1203 proposed to expand eligibility for the elderly low-cost drug program to 300%, with persons above 185% paying increased co-payments on a sliding scale depending on family incomes compared with the federal poverty line. It proposed to preserve the provisions that allow eligibility to be determined in part on the cost of prescription drugs. It proposed to expand the prescription drugs available under the program to the same prescription drugs that are offered under the Medicaid program. It also proposed to add eligibility for disabled persons to the Medicaid waiver application for a Medicaid prescription drug program.

See the Part 2 budget, Public Law 1999, chapter 401, Part KKK and Public Law 1999, chapter 531, Part F.