

# MAINE STATE LEGISLATURE

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*State Of Maine  
122nd Legislature*

*First Regular Session and  
First Special Session*

*Bill Summaries*

*Joint Standing Committee  
on  
Health and Human Services*

*August 2005*

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Maine State Legislature

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122nd Legislature
First Regular Session and First Special Session

Summary of Legislation Considered by the Joint Standing Committees
August 2005

Enclosed please find a summary of all bills, resolves, joint study orders, joint resolutions and Constitutional resolutions that were considered by the joint standing 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 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. A subject index for each committee is included immediately before the bill summaries for that committee, and a numerical index by LD number is included 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
FAILED EMERGENCY ENACTMENT/FINAL PASSAGE..... Emergency bill failed to get 2/3 vote
FAILED ENACTMENT/FINAL PASSAGE..... Bill failed to get majority vote
FAILED MANDATE ENACTMENT..... Bill imposing local mandate failed to get 2/3 vote
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 June 29, 2005; and for non-emergency legislation enacted in the First Special Session is September 17, 2005.

*Joint Standing Committee on Health and Human Services*

**LD 480**

**An Act To Reduce Costs Caused by New Procedure Changes for Health Care Providers**

**PUBLIC 241**

<u>Sponsor(s)</u> GLYNN		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> H-341
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LD 480 proposed to provide for a minimum of 6 months between the date of adoption of a rule by the Department of Health and Human Services and the effective date of that rule for health care providers.

***Enacted law summary***

Public Law 2005, chapter 241 provides for a 30 day period during which nonemergency rules adopted by the Department of Health and Human Services pertaining to process or procedural changes for licensed health care providers do not take effect after adoption. The law does not apply to any rule affecting reimbursement rates applicable to those providers.

**LD 481**

**Resolve, To Ensure That Public Assistance Benefits Do Not Exceed Average Wages for a County**

**ONTP**

<u>Sponsor(s)</u> THOMAS DOW		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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LD 481 proposed to direct the Department of Health and Human Services to propose a limit on all forms of public assistance that would be implemented through a cap on public assistance benefits funded from the General Fund in order to encourage adults in families that might otherwise be eligible for benefits to seek employment. The resolve proposed to direct the department to report to the Joint Standing Committee on Health and Human Services by January 1, 2006 on the proposed limit on public assistance.

**LD 482**

**An Act To Ensure Adequate Health Care for Children**

**PUBLIC 373**

<u>Sponsor(s)</u> DUDLEY STRIMLING		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> H-641
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LD 482 proposed to repeal the following provisions of law regarding spiritual health care treatment of children:

1. The defense against criminal prosecution for endangerment of the welfare of a child for a person who provides treatment for a child or dependent person by spiritual means through prayer alone;
2. The exemption for health care practitioners who provide treatment by spiritual means alone from the requirement of health care providers to report to the Department of Health and Human Services regarding treatment of persons with cancer;

## *Joint Standing Committee on Health and Human Services*

3. The provision that treatment solely by spiritual means by an accredited practitioner of a recognized religious organization is not considered child abuse or neglect; and
4. The provision regarding mandatory reporting of abuse or neglect to the medical examiner for postmortem investigation that a child who has been treated solely by spiritual means by an accredited practitioner of a recognized religious organization is not considered child abuse or neglect.

### ***Enacted law summary***

Public Law 2005, chapter 373 balances the right of children to receive necessary health care and the right to spiritual treatment from an accredited practitioner of a recognized religious organization. The law does the following:

1. It adds to the definition of the crime of "endangering the welfare of a child" knowingly depriving a child of necessary health care that places the child in danger of serious harm;
2. It removes the unnecessary word "alone" in the defense to the crime of endangering the welfare of a child or dependent person;
3. It amends the definition of "jeopardy to health or welfare" to a child in the child protective laws to add deprivation of necessary health care that places the child in danger of serious harm; and
4. It repeals an unnecessary and confusing provision regarding reporting to the Medical Examiner under the Maine Revised Statutes, Title 22, section 4013, while leaving in statute the requirement to report a child's death under Title 22, section 3025, subsection 1, paragraph I.

**LD 494**

### **An Act To Establish a Program for the Purchase of Prescription Drugs from out of the Country for the Elderly and Disabled**

**PUBLIC 165**

Sponsor(s)  
CAMPBELL  
MAYO

Committee Report  
OTP-AM

Amendments Adopted  
H-327

LD 494 proposed to require the Department of Health and Human Services to establish a prescription drug program to provide access to drugs from out of the State and out of the country, including Canada, for residents who are elderly or have disabilities. The program proposed to allow access to brand-name drugs in original sealed packaging. The program would not provide access to habit-forming drugs for the alleviation of pain or antibiotics for acute illnesses. The program proposed to require the patient to show evidence of use of a pharmacist licensed in the State to coordinate all prescriptions and prevent harmful drug interactions. The program proposed to include a procedure for random testing. The bill proposed to include authority to adopt rules, which are designated as routine technical rules.

### ***Enacted law summary***