

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

This bill was carried over on the Special Appropriations Table by S.P. 640 to the next special or regular session of the 122nd Legislature.

LD 1228 **An Act To Create Consistency in the Regulation of Small Group Homes** **ONTP**

<u>Sponsor(s)</u> LERMAN		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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LD 1228 proposed to amend the number of beds a residential care facility and a children's home must have for fire safety purposes to make the inspection standards consistent between residential care facilities and children's homes.

LD 1270 **Resolve, To Increase Prospective Interim Payments to Certain Rural Hospitals** **ONTP**

<u>Sponsor(s)</u> DAMON PINGREE		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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LD 1270 proposed to direct the Department of Health and Human Services to study the prospective interim payments payable to hospitals and to increase those payments to rural hospitals that provide high-quality care, implement cost-control initiatives and are adversely affected by new financial policies.

LD 1284 **Resolve, Regarding Increased Reimbursement for Physicians Caring for MaineCare Members** **RESOLVE 104**

<u>Sponsor(s)</u> MARRACHE SNOWE-MELLO		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> H-569
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LD 1284 proposed to require the Department of Health and Human Services to adopt major substantive rules that establish a MaineCare reimbursement schedule that provides a greater rate of MaineCare reimbursement to physicians in private practice who have a high ratio of patients who are MaineCare recipients. The schedule would provide for a higher rate of MaineCare reimbursement if the physician is located in a rural area of the State.

Enacted law summary

Joint Standing Committee on Health and Human Services

Resolve 2005, chapter 104 directs the Department of Health and Human Services to convene a working group to develop standards for the distribution of \$3,000,000 in increased physician incentive payment funding in the MaineCare program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2006.

LD 1302 **Resolve, Establishing The Task Force To Study Cervical Cancer Prevention, Detection and Education** **RESOLVE 121 EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARRACHE PLOWMAN	OTP-AM	H-570 S-325 MAYO S-385 GAGNON

LD 1302 proposed to establish the Task Force to Study Cervical Cancer Prevention, Detection and Education. The purpose of the task force would be to raise public awareness of the causes and nature of cervical cancer, personal risk factors, value of prevention, early detection, options for testing, treatment costs, new technology and medical care reimbursement. The task force would also be charged with several other duties, including, but not limited to, identifying preventive strategies and new technologies, including newly introduced vaccines that are effective in preventing and controlling the risk of cervical cancer. The members of the task force would be appointed by the Governor, the President of the Senate and the Speaker of the House. The task force would submit its final report to the Governor and the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 15, 2007.

Enacted law summary

Resolve 2005, chapter 121 establishes the Task Force to Study Cervical Cancer Prevention, Detection and Education to raise public awareness of the causes and nature of cervical cancer, personal risk factors, value of prevention, early detection, options for testing, treatment costs, new technology and medical care reimbursement. The task force is also charged with several other duties, including, but not limited to, identifying preventive strategies and new technologies, including newly introduced vaccines that are effective in preventing and controlling the risk of cervical cancer. The law requires an initial report by November 15, 2005 and a final report by November 15, 2006 and authorizes the joint standing committee of the Legislature having jurisdiction over health and human services matters to report out legislation. The Task Force to Study Cervical Cancer Prevention, Detection and Education is required to seek outside funds to fully fund all costs of the task force.

Resolve 2005, chapter 121 was finally passed as an emergency measure effective June 21, 2005.

LD 1307 **An Act Requiring Public Disclosure of Health Care Prices** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WOODBURY MAYO	ONTP	