

MAINE STATE LEGISLATURE

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STATE OF MAINE
127TH LEGISLATURE
SECOND REGULAR SESSION



Summaries of bills, adopted amendments and laws enacted or finally passed

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

May 2016

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STATE OF MAINE

127TH LEGISLATURE

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LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contains summaries of all LDs and adopted amendments and all laws enacted or finally passed during the Second Regular Session of the 127th Maine Legislature.

The *Digest* is arranged alphabetically by committee and within each committee by Legislative Document (LD) number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each LD title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. An appendix provides a summary of relevant session statistics.

Final action on each LD is noted to the right of the LD title. The following describes the various final actions.

CARRIED OVER..... *carried over to a subsequent session of the Legislature*
CON RES XXX..... *chapter # of constitutional resolution passed by both houses*
CONF CMTE UNABLE TO AGREE..... *Committee of Conference unable to agree; legislation died*
DIED BETWEEN HOUSES..... *House & Senate disagreed; legislation died*
DIED IN CONCURRENCE..... *defeated in each house, but on different motions; legislation died*
DIED ON ADJOURNMENT..... *action incomplete when session ended; legislation died*
EMERGENCY..... *enacted law takes effect sooner than 90 days after session adjournment*
FAILED, EMERGENCY ENACTMENT or PASSAGE..... *emergency failed to receive required 2/3 vote*
FAILED, ENACTMENT or FINAL PASSAGE..... *failed to receive final majority vote*
FAILED, MANDATE ENACTMENT..... *legislation proposing local mandate failed required 2/3 vote*
HELD BY GOVERNOR..... *Governor has not signed; final disposition to be determined at subsequent session*
LEAVE TO WITHDRAW..... *sponsor's request to withdraw legislation granted*
NOT PROPERLY BEFORE THE BODY..... *ruled out of order by the presiding officer; legislation died*
INDEF PP..... *indefinitely postponed; legislation died*
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X... *ought-not-to-pass report accepted; legislation died*
P&S XXX..... *chapter # of enacted private & special law*
PUBLIC XXX..... *chapter # of enacted public law*
RESOLVE XXX..... *chapter # of finally passed resolve*
VETO SUSTAINED..... *Legislature failed to override Governor's veto*

The effective date for non-emergency legislation enacted in the First Regular Session of the 127th Legislature is July 29, 2016. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

Joint Standing Committee on Health and Human Services

premiums and cost sharing up to a maximum of 5% of the household's income. The amendment provides for termination of coverage for nonpayment of premium without good cause. Good cause must be defined by rules adopted by the Department of Health and Human Services.

3. It authorizes the Department of Health and Human Services to contract with health insurance plans to provide coverage in order to maximize savings and to ensure access to and quality of services.
4. It repeals the expanded coverage if the enhanced federal medical assistance percentage is reduced below that specified in the federal law or if expanded coverage is not reauthorized by the Legislature by June 30, 2019.
5. It requires the Department of Health and Human Services to prepare and submit to the Federal Government any state plan amendments and federal waivers by January 1, 2017 necessary to implement the program.
6. It authorizes the Department of Health and Human Services to apply for and accept private foundation grants to be used to cover the cost of preparing and submitting any waivers and state plan amendments to the Federal Government required as a result of expanding coverage. It requires the department to develop mechanisms to create a seamless system for determining eligibility for the MaineCare program and for premium assistance for those who are already enrolled in a group or individual qualified health plan, using the federally facilitated marketplace to determine eligibility for the MaineCare program and for individuals in a private individual or group qualified health plan if it is determined to be more efficient. The amendment also requires the department, after consultation with a stakeholder group, to file a waiver to test a full continuum of substance use disorder treatment that will, among other things, authorize Medicaid coverage for services provided in inpatient and short-term residential facilities.
7. It requires monthly reporting to the committees of jurisdiction on the status of waiver submission until the disposition of such a waiver is determined, and on the status of implementation of the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph H no later than June 1, 2017 and by April 30, 2017, April 30, 2018 and April 30, 2019 on savings generated for state-funded programs as a result of implementation. It requires the Department of Administrative and Financial Services, Maine Revenue Services to report by April 30, 2017 and April 30, 2018 on revenues generated as a result of expanded coverage. It requires that savings and revenues be verified by the Office of Fiscal and Program Review by May 15, 2017 and May 15, 2018. It transfers any savings to the MaineCare Stabilization Fund prior to the next fiscal year. It requires the Office of Fiscal and Program Review to report its findings to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs and to the joint standing committee of the Legislature having jurisdiction over government oversight matters and authorizes the latter committee to request further review and reporting by the Office of Program Evaluation and Government Accountability on the effectiveness of providing coverage through expanded MaineCare coverage.

LD 661

An Act To Fund HIV, Sexually Transmitted Diseases and Viral Hepatitis Screening, Prevention, Diagnostic and Treatment Services

**Died On
Adjournment**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BURSTEIN C GRATWICK G	OTP-AM ONTP	H-174

This bill was reported out of committee in the prior session and then carried over on the Special Appropriations Committee Table.

This bill provides ongoing General Fund appropriations of \$391,800 per year beginning in fiscal year 2014-15 to provide screening and prevention services and diagnostic and treatment services for individuals throughout the State who are uninsured and without covered access to such services and who are at risk in accordance with criteria established by the program.

Joint Standing Committee on Health and Human Services

Committee Amendment "A" (H-174)

This amendment strikes the fiscal year 2014-15 appropriation from the bill and adds an appropriation of \$391,800 in fiscal year 2016-17.

Senate Amendment "A" To Committee Amendment "A" (S-495)

This amendment strikes from Committee Amendment "A" the fiscal year 2015-16 appropriation and reduces the fiscal year 2016-17 appropriation from \$391,800 to \$195,900.

This amendment was not adopted.

LD 726 An Act To Increase Patient Safety in Maine's Medical Marijuana Program

PUBLIC 475

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SAVIELLO T	OTP-AM	S-451

This bill was carried over from the First Regular Session of the 127th Legislature.

This bill amends the Maine Medical Use of Marijuana Act in the following ways.

1. It increases the amount of excess prepared marijuana a registered primary caregiver may transfer for reasonable compensation in a calendar year from two pounds to five pounds.
2. It specifies that, like registered dispensaries, a primary caregiver's cultivation facility is subject to reasonable inspection by the Department of Health and Human Services at any time, without prior notice.
3. It requires the Department of Health and Human Services to adopt routine technical rules governing the manner in which the department considers an application for and a renewal of a registry identification card for a primary caregiver.
4. It clarifies that the information provided by the Department of Health and Human Services to the Department of Administrative and Financial Services, Bureau of Revenue Services may be used by the bureau to determine whether an applicant for a license or renewal of a license as a registered dispensary has complied with the tax laws.
5. It specifies that the Medical Use of Marijuana Fund may be used by the Department of Health and Human Services for enforcement purposes that are primarily for the protection of public health and safety and for investigations.

Committee Amendment "A" (S-451)

This amendment strikes and replaces the bill. It allows for the operation of marijuana testing facilities. These facilities may possess marijuana regulated under the Maine Medical Use of Marijuana Act.

In addition, this amendment:

1. Creates an immunity provision within the Maine Medical Use of Marijuana Act for marijuana testing facilities;
2. Directs the Department of Health and Human Services to issue registry identification cards to certain individuals at marijuana testing facilities;