

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from electronic originals
(may include minor formatting differences from printed original)

STATE OF MAINE
127TH LEGISLATURE
FIRST REGULAR SESSION



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

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

August 2015

STAFF:

ANNA BROOME, LEGISLATIVE ANALYST
MICHAEL O'BRIEN, LEGISLATIVE ANALYST
OFFICE OF POLICY AND LEGAL ANALYSIS
13 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1670

AND

LUKE LAZURE, LEGISLATIVE ANALYST
OFFICE OF FISCAL AND PROGRAM REVIEW
5 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1635

MEMBERS:

SEN. ERIC L. BRAKEY, CHAIR
SEN. EARLE L. MCCORMICK
SEN. ANNE M. HASKELL

REP. DREW GATTINE, CHAIR
REP. PETER C. STUCKEY
REP. MATTHEW J. PETERSON
REP. SCOTT M. HAMANN
REP. CHRISTINE S. BURSTEIN
REP. PATRICIA HYMANSON
REP. DEBORAH J. SANDERSON
REP. RICHARD S. MALABY
REP. FRANCES M. HEAD
REP. KAREN VACHON

STATE OF MAINE

127TH LEGISLATURE

FIRST REGULAR SESSION



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 First 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.

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

The effective date for non-emergency legislation enacted in the First Regular Session of the 127th Legislature is October 15, 2015. 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

**LD 665 Resolve, Establishing the Commission To Study Services Available on
the Long-term Care Continuum**

**Died On
Adjournment**

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|--------------------|-------------------------|---------------------------|
| POULIOT MILLETT | OTP-AM | H-162 |

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to create well-paying jobs and to reduce the State's costs for avoidable, preventable, high-cost emergency room, hospital and nursing home care by investing \$1,000,000 in a pilot block grant program for nonprofit home health care providers to provide light housekeeping, shopping, cooking, budget and medication management and referral services and assistance with other activities of daily living under the supervision of a primary care physician. Providers would apply via a competitive grant application process.

Committee Amendment "A" (H-162)

This resolve replaces the bill. It establishes the Commission To Study Services Available on the Long-term Care Continuum. The commission is required to examine issues on the long-term care continuum from homemaker services and home-based care to residential and nursing facility care to determine whether these services are being provided efficiently and whether the provision of services allows for individuals to move through the long-term care continuum from one program to another as needs change; review recent recommendations, legislation and policy initiatives; determine future needs in the long-term care continuum; examine direct care workforce issues; and develop strategies to support family members providing free care. The commission must submit its report, including suggested legislation, to the Joint Standing Committee on Health and Human Services no later than December 2, 2015. The committee may report out legislation to the Second Regular Session of the 127th Legislature.

**LD 666 An Act To Allow a Patient To Designate a Caregiver in the Patient's
Medical Record**

PUBLIC 370

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|-------------------|-------------------------|---------------------------|
| GATTINE BRAKEY | OTP-AM OTP-AM | H-432 |

This bill allows a patient admitted to a hospital to designate a caregiver, who may provide aftercare for the patient and whose identifying information must be entered into the patient's medical records at the hospital. If the patient or patient's legal guardian provides written consent to release medical information to the designated caregiver, the hospital is required to notify the caregiver prior to the patient's being discharged or transferred, consult with the caregiver as to the patient's discharge plan and provide the caregiver any necessary instruction in providing aftercare to the patient if the patient is discharged to the patient's residence.

Committee Amendment "A" (H-432)

This amendment makes the following changes to section 6 of the bill.

1. It eliminates the definition of "entry."
2. It eliminates the requirement that the designation of a caregiver needs to be made within the first 24 hours.
3. It changes the notice requirements to caregivers from a requirement to notify to a requirement to make reasonable efforts to notify.

Joint Standing Committee on Health and Human Services

- 4. It eliminates what a discharge plan must include and defers to the hospital's established policy.
- 5. It eliminates the instruction requirements.

Committee Amendment "B" (H-433)

This amendment, which is the minority report, makes the following changes to section 6 of the bill.

- 1. It adds a definition of "hospital" establishing that the provisions apply only to hospitals that receive money under the Maine Revised Statutes, Title 22, chapter 855 provided to Medicaid recipients under the provisions of the United States Social Security Act, Title XIX and successors to it and related rules of the State's Department of Health and Human Services.
- 2. It eliminates the definition of "entry."
- 3. It eliminates the requirement that the designation of a caregiver needs to be made within the first 24 hours.
- 4. It changes the notice requirements to caregivers from a requirement to notify to a requirement to make reasonable efforts to notify.
- 5. It eliminates what a discharge plan must include and defers to the hospital's established policy.
- 6. It eliminates the instruction requirements.

Enacted Law Summary

Public Law 2015, chapter 370 allows a patient admitted to a hospital to designate a lay caregiver, who may provide aftercare for the patient and whose identifying information must be entered into the patient's medical records at the hospital. If the patient or patient's legal guardian provides written consent to release medical information to the designated lay caregiver, the hospital is required to make reasonable efforts to notify the lay caregiver prior to the patient's being discharged or transferred and consult with the lay caregiver as to the patient's discharge plan.

LD 667 Resolve, Directing the Department of Health and Human Services To ONTP
Educate the Public and Department Clients about How To Protect One's
Family from Bisphenol A

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|----------------------|-------------------------|---------------------------|
| BURSTEIN GRATWICK | ONTP | |

This resolve directs the Department of Health and Human Services to update the information it provides on the page on its publicly accessible website entitled "How to Protect Your Family from BPA (Bisphenol A)" to reflect the latest scientific findings and to develop educational outreach materials and a plan to educate members of the public at greatest risk from bisphenol A, including participants in the Special Supplemental Nutrition Program for Women, Infants and Children of the federal Child Nutrition Act of 1966.