MAINE STATE LEGISLATURE

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121st MAINE LEGISLATURE

FIRST REGULAR SESSION-2003

Legislative Document

No. 1593

H.P. 1166

House of Representatives, April 30, 2003

An Act To Amend Laws Relating to Development of Service Plans for Persons with Mental Retardation

Submitted by the Department of Behavioral and Developmental Services pursuant to Joint Rule 204.

Reference to the Committee on Health and Human Services suggested and ordered printed.

Millicent M. Mac, failand MILLICENT M. MacFARLAND Clerk

Presented by Representative WALCOTT of Lewiston.

Cosponsored by Representatives: CAMPBELL of Newfield, CRAVEN of Lewiston, EARLE of Damariscotta, LAVERRIERE-BOUCHER of Biddeford, LEWIN of Eliot, Senator: WESTON of Waldo.

Be	it	enacted	by	the	People	of	the	State	of	Maine	as	follows:
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- Sec. 1. 34-B MRSA §5437, sub-§4, as enacted by PL 1985, c.
 4 486, §2, is amended to read:
- 4. Disbursement not to be approved. No A disbursement for client needs may not be approved for any service or activity not recommended by interdisciplinary a planning team or necessary to comply with regulations. No A disbursement may not be made unless evidence is provided that the expense is not reimbursable by the Medicaid Program. It is the intent of the Legislature that the contingency fund established in this section be the funding source of last resort.
- Sec. 2. 34-B MRSA §5461, sub-§7, as enacted by PL 1983, c.
 16 459, §7, is repealed.
 - Sec. 3. 34-B MRSA §5461, sub-§§8-B and 8-C are enacted to read:
- 20 8-B. Personal planning process. "Personal planning process" means a process of planning with a client for the coordination and delivery of supportive and other services through the development of a personal plan or service plan. The type of plan, participants and agenda at the planning meeting must be selected by the client or guardian.
- 8-C. Planning team. "Planning team" means those persons,
 including at a minimum the client, the client's guardian and the
 client's individual support coordinator and others selected by
 the client or guardian to participate, who develop a personal
 plan or service plan. The planning team may include family,
 friends, service providers, correspondents, advocates and others.
- Sec. 4. 34-B MRSA §5461, sub-§9, as enacted by PL 1983, c. 459, §7, is repealed.
- Sec. 5. 34-B MRSA §5461, sub-§10-A, as enacted by PL 1983, c. 38 580, §13, is amended to read:
- 10-A. Service plan. "Service plan" means an-annual-written one type of plan resulting from the personal planning process for the delivery and coordination of specific services to a client when the-fellowing-conditions-exist:
- A. The client or guardian has waived--the--preseriptive
 program--plan--process chosen this type of plan over a
 personal plan; or

2	BThepreseriptiveprogramplanprocessunnecessarily restricts-the-client's-own-ability-to-make-decisions;
4	CAnother-type-of-formal-written-program-plan-exists;-or
6	D. The client has either a single service need or routine service eeerdination needs.
8	Sec. 6. 34-B MRSA §5462, sub-§1, ¶B, as amended by PL 1983, c.
10	580, §15, is repealed and the following enacted in its place:
12	B. The development of a personal plan or service plan for the delivery and coordination of services to the person
14	through a personal planning process.
16	Sec. 7. 34-B MRSA §5463, as enacted by PL 1983, c. 459, §7, is amended to read:
18	§5463. Notice
20	The commissioner shall provide the client, if he the client
22	is competent; the client's next of kin or guardian, if any exists; and the client's advocate with timely written notice in
24	advance of procedures and actions to be taken with respect to the development, implementation and assessment of preseriptive
26	program personal plans and service plans.
28	Sec. 8. 34-B MRSA §5465, sub-§2, ¶¶A and B, as enacted by PL 1983, c. 459, §7, are amended to read:
30	A. The membership, functions and procedures of the
32	interdisciplinary planning teams;
34	B. The procedures to be used in developing preseriptive pregrams personal plans and service plans and service
36	agreements;
38	Sec. 9. 34-B MRSA §5467, as amended by PL 1995, c. 560, Pt. K, §56, is further amended to read:
40	§5467. Application and preliminary procedures
42	1. Application. An application for mental retardation
44	services, on a form provided by the commissioner, must be initiated at or referred to a regional office of the department.
46	Except for referrals identifying a possible need for adult protective services, the department shall accept only those
48	referrals to which the client or client's guardian has consented.

	2. Preliminary procedures. Within 10 work days from the
2	day of the department's receipt of the application and a
	permission for service form signed by the client or the client's
4	<pre>guardian, the department shall:</pre>
c	A Observe Dakenning when a visit to show the aligns in
6	A. Observe Determine when a visit to observe the client in
•	his the client's current environment or other setting
8	familiar and comfortable to the client will be appropriate
10	and useful;
10	B. Obtain a brief family survey;
12	b. Obtain a biler ramily survey,
1.0	C. Make a preliminary assessment identification of the
14	client's abilities and needs and of the relevant services
	presently available to the client; and
16	presencty available to the critical, and
-0	D. Ensure the client's access to an advocate throughout the
18	process of mental retardation services under sections 5467
-0	to 5474+;
20	
_ •	E. Determine what information is needed to establish
22	eligibility;
24	F. Provide services or referral for services to meet
	singular immediate needs for the client's health and safety;
26	and
28	G. Begin to gather information for a service plan or a
	personal plan.
30	
	Sec. 10. 34-B MRSA §5468, first ¶, as enacted by PL 1983, c.
32	459, §7, is amended to read:
34	After completing the tasks specified in section 5467,
	subsection 2, the commissioner shall ferthwith cause a
36	comprehensive evaluation of the client, including a consideration
	of physical, emotional, social and cognitive factors, to be
38	conducted if a recent comprehensive and informative evaluation is
	not already available to the department.
40	Co. 11 24 D MDCA 85460 cmb 82 MMA and D
4.0	Sec. 11. 34-B MRSA §5469, sub-§2, ¶¶A and B, as enacted by PL
42	1983, c. 580, §20, are amended to read:
44	A. The department, through the regional office, shall
7.7	determine the client's case management status and develop a
46	preseriptive-pregram personal plan or service plan, -er-beth;
-10	and
48	unu .
-10	B. If-a-prescriptive-program-plan-is-to-be-developed, -the
50	The department, through the interdiseiplinary planning team,
J	TWO debat ement, entough the interface partners branking comit

	shall develop and-begin-to-implement a preseriptive-pregram
2	personal plan or service plan for the client within-60-days
	of-the-application-made-under-section-5467 within 45 days of
4	the date of the determination of eligibility. Implementation of the plan is governed by section 5471,
6	subsection 4.
U	Subsection 4.
8	Sec. 12. 34-B MRSA §5469, sub-§3, as amended by PL 1995, c. 560, Pt. K, §57, is further amended to read:
10	
	3. Preschool child. If the report of the comprehensive
12	evaluation concludes that a child, aged 0 to 5 years, is
	developmentally delayed and is in need of infant development
14	services or other early intervention services:
16	A. The department, through the regional office, shall
	develop a preseriptivepregram personal plan or service
18	plan, or both; and
20	B. If a preseriptivepregram personal plan is to be
22	developed, the department, through the interdisciplinary planning team, shall develop and begin to implement a
22	preseriptive-program personal plan for the client within 60
24	days of the application made under section 5467.
26	Sec. 13. 34-B MRSA §5470, as amended by PL 1983, c. 580, §21,
20	is repealed.
28	15 1000104.
_ ,	Sec. 14. 34-B MRSA §5470-A is enacted to read:
30	·
	§5470-A. Personal planning process
32	
	1. Process. The personal planning process must:
34	
2.5	A. Be understandable to the client and in plain language,
36	and if the client is deaf or nonverbal, uses sign language
38	or speaks another language, the process must include qualified interpreters;
30	dualitied interpreters,
40	B. Focus on the client's choice;
42	C. Reflect and be supportive of the client's goals and
	aspirations:
44	
	D. Be developed at the direction of the client and include
46	people whom the client chooses to participate;
48	E. Be flexible enough to change as new opportunities arise;

2	F. Be reviewed according to a specified schedule and by a
	<pre>person designated for monitoring;</pre>
4	
	G. Include all of the needs and desires of the client
6	without respect to whether those desires are reasonably
	achievable or the needs are presently capable of being
8	addressed; and
U	addressed; and
10	H. Include a provision for ensuring the client's
	satisfaction with the quality of the plan and the supports
12	that the client receives.
14	Sec. 15. 34-B MRSA §5471, as amended by PL 1995, c. 560, Pt.
	K, §58, is further amended to read:
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10	Frazi Camina announts
	§5471. Service agreements
18	
	1. Service agreement required. Each preseriptive-program
20	personal plan or service plan shall must be carried out pursuant
	to a written service agreement.
22	
	2. Signatures. Each service agreement shall must be signed
24	and dated by at least:
44	and dated by at least:
26	A. The client, if he the client is able;
28	B. The client's guardian or next of kin, if that person
	exists and is available;
30	
	C. A client advocate, if the client has no guardian;
32	c. A circuit advocate, if the circuit has no quartitan,
34	D mb individual common also consult and inches of the
	D. The individual program-plan support coordinator of the
34	interdisciplinary planning team which that developed the
	individualprogram personal plan or service plan for the
36	client;
38	E. The regional director or designee of the appropriate
	regional office, if a client is being admitted to or
40	discharged from a facility or if a client is under the
40	-
	supervision of the regional office;
42	
	F. The chief administrative officer of the facility or his
44	the chief administrative officer's agent, if a client is
	being admitted to, treated in or discharged from a facility;
46	and
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48	G. The chief administrative officer, or his the chief
	administrative officer's agent, of other public or private

agencies or groups which that agree to provide services to 2 the client. Each service agreement-shall agreement must Contents. include at least the following information. It shall must specify the respective responsibilities, 8 where applicable, of the client, the family or guardian of the client, the regional office, the facility, and each public and private agency which that intends to provide 10 services to the client. 12 It shall must identify by job classification or other description each individual who is responsible for carrying 14 out each part of the preseriptive-program service plan or personal plan. 16 18 C.--It--shall-specify-the-date-on-which-the-review-required in-subsection-5-shall-eccur-20 Implementation of service plan or personal Implementation of a preseriptive-pregram service plan or personal 22 plan is governed as follows. 24 No part of a preseriptive--pregram service plan or personal plan may be implemented until each person required 26 to sign the service agreement under subsection 2 has signed 28 it, except that if a client is to be admitted to a facility, the service agreement need not be completed until 5 days after the date of admission. 30 32 Any existing preseriptive -- program service plan or personal plan is considered to be in effect until all persons required to sign under subsection 2 have signed the 34 new service agreement. 36 No-preseriptive-program A service plan or personal plan 38 may not be in effect longer than one year and 2 weeks from the day on which the last person signed the 40 agreement for the plan. 42 5. -- Review. -- At-least-30-days-prior-to-the-termination-of-a service-agreement, - an-interdisciplinary-team-shall-meet-to-assess 44 the-present-preseriptive-program-plan-and,-if-further-services are-recommended,-to-prepare-a-new-plan+

6. Amendment. Any major changes in a client's prescriptive pregram service plan or personal plan may occur only after the service agreement has been amended and signed by the persons specified in subsection 2.

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2	Sec. 16. 34-A MRSA §5473, sub-§1, as amended by PL 1995, c.
	560, Pt. K, §59, is further amended to read:
4	1. Respite care. Respite care may be provided to any
6	client by a facility without full compliance with the procedures
8	for admission by judicial certification under section 5475, if it is recommended by aninterdisciplinary a planning team and a
	service agreement has been completed.
10	A. The purpose of the respite care is for evaluation,
12	diagnosis or other clearly stated and broadly defined
	therapeutic purposes of the client or his the client's
14	family.
16	B. Respite care may be provided, upon application to the
	regional office of the department by the client, guardian or
18	parent, for not more than 21 days at a time and not more than 60 days during any 12-month period.
20	
2.2	C. Continuing placement in the facility beyond the time
22	periods stated in paragraph B, if indicated, may be accomplished only upon full compliance with procedures
24	described by this chapter.
26	Sec. 17. 34-B MRSA §5473, sub-§2, ¶C, as enacted by PL 1983, c. 459, §7, is amended to read:
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	C. An initial preseriptive-program-plan personal planning
30	process has been developed according-to-section-5470.
32	Sec. 18. 34-B MRSA §5475, sub-§2, ¶C, as amended by PL 1983, c. 580, §22, is further amended to read:
34	c. 500, y22, is further amended to read:
-	C. Unless waived by a client and his the client's counsel,
36	cause the client who is the subject of the proceeding to be examined by a professional.
38	
	(1) The client or his the client's counsel may choose
40	the professional, if the professional he <u>the client</u> chooses is reasonably available.
42	•
	(2) The professional may not be the same one who
44	performed any part of the evaluation required under section 5468 or who participated in the development of
46	the preseriptive-program personal plan or service plan.
48	(3) Upon completion of the examination, the
50	professional shall report to the court his the professional's opinion whether the client is mentally

	retarded and therefere requires treatment, stating his
2	the professional's reasons for his the professional's opinion;
4	O 10 24 D MDCA SPARK ST 4 St
6	Sec. 19. 34-B MRSA §5476, first ¶, as repealed and replaced by PL 1983, c. 580, §23, is amended to read:
8	Any client recommended for admission to a mental retardation facility pursuant-to-section-5470 may be admitted by judicial
10	commitment according to the following procedures.
12	Sec. 20. 34-B MRSA §5478, sub-§3, ¶A, as enacted by PL 1983, c. 580, §26, is amended to read:
14	A. A preseriptive-pregram personal plan or service plan,-as
16	provided in section 5470, has been agreed to by the superintendent chief administrative officer of the facility
18	and the guardian;
20	Sec. 21. 34-B MRSA §5479, as enacted by PL 1983, c. 459, §7, is amended to read:
22	Season and the season
24	§5479. Post-admission responsibilities of the department
26	 Provision of care and treatment. Post-admission care and treatment in a facility is governed as follows.
28	A. An initial service agreement for services to be received in the facility shall must be executed within 5 days of
30	admission and shall must include a date, within 30 days of the client's admission to the facility, for a meeting of the
32	persons who signed the agreement to assess and, if necessary, refine the client's preseriptive-pregram personal
34	plan or service plan.
36	B. While residing in the facility, the client shall must receive care, treatment and services only according to the
38	procedures set forth in this section and in seetions-5470 and section 5471.
40	
42	2. Preparation for discharge. Preparation for a client's discharge from a facility is governed as follows.
44	A. When an-interdisciplinary a planning team finds that the client may be ready for discharge and determines that
4 6	temporary placement of the client in the community is
48	required to assist in its evaluation of the client, the team may recommend that placement and shall develop a preseriptivepregram personal plan or service plan and

2	service agreement which-shall that must include provisions to ensure that:
4	(1) The client's money is adequately managed;
6	(2) The client has a legal representative, if
8	required;
10	(3) The client receives needed services in the community; and
12	(4) The client's parent or guardian, if available, continues to be involved with the client.
14	
16	B. The chief administrative officer of the facility may release the client pursuant to such a recommendation for community placement through the regional office.
18	
20	3. Role of the regional office. The role of the regional office under this section is as follows.
22	A. The regional office which that will have responsibility for the client shall must be included in the preparation of
24	the preseriptive-program personal plan or service plan and service agreement specified in subsection 2.
26	B. The regional office shallbe <u>is</u> responsible for
28	implementing the client's release.
30	C. The regional office shall, along with the other members of the interdisciplinary planning team, evaluate the success
32	of the client's reintegration into the community and shall assist in obtaining the client's discharge when assured that
34	the provisions of the preseriptive-pregram personal plan or service plan and service agreement have been met.
36	Sec. 22. 34-B MRSA §5480, sub-§2, as enacted by PL 1983, c.
38	459, §7, is amended to read:
40	2. Discharge. When a judicially certified client is prepared for discharge, under section 5479, subsection 2, he
42	shall the client must be discharged if the regional office and the interdisciplinary planning team so recommend.
44	
46	Sec. 23. MRSA §5609, sub-§1, as amended by PL 1995, c. 560, Pt. K, §60, is further amended to read:
48	1. Habilitation services. The department and the
F.0	Department of Labor, through the Office of Rehabilitation
50	Services, shall provide, to the extent of the resources

- available, for those habilitation and vocational rehabilitation services, defined in Title 26, section 1411-A, subsection 6, and any other service, including, but not limited to, supported employment, including work in rehabilitation facilities and work centers, as defined in Title 5, chapter 155, subchapter II 2; job coaching; transportation, recreational and leisure services; and respite or day programs designed in consultation with an interdiseiplinary a planning team in order to make available to persons receiving services those services that are otherwise not obtainable, in the following order of priority:
 - A. Those persons receiving services who are living at home or in unsubsidized foster care who are between 20 and 26 years of age and are not receiving any day program; and

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- B. All other persons receiving services who are between 20 and 26 years of age and are not receiving an appropriate day program.
- All persons receiving services who are served under this program prior to their 26th birthday must be allowed to continue to receive services through the voucher system established by subsection 2.

For purposes of this section, an-interdisciplinary a planning team includes the person receiving services and a member of the person's family or the guardian of the person receiving services.

Sec. 24. 34-B MRSA §5609, sub-§2, as amended by PL 1995, c. 560, Pt. K, §61, is further amended to read:

- 2. Payment for service. The department shall establish a voucher system to allow the interdisciplinary planning team to incorporate only those services determined critical and otherwise unavailable into a program, including work, habilitation and other services designated in subsection 1, when appropriate. The department shall establish a limit on the amount of transitional services available to persons receiving services eligible for services under this section.
- Sec. 25. 34-B MRSA §6252, sub-§4, ¶A, as enacted by PL 1985, c. 503, §12, is amended to read:
- A. When considered necessary by an--interdisciplinary a planning team and with the consent of the director, persons may be admitted to the Elizabeth Levinson Center short-term evaluation program for a period of 40 program days, excluding weekends, without certification.

SUMMARY

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4 This bill amends the laws relating to development of service plans for persons with mental retardation.

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