

M Solo		L.D. 1614
4	DATE: 2-15-06	(Filing No. S-455)
6	HEALTH AND HUMAN SERVICES	
8	Reported by:	
10	Reproduced and distributed under the of the Senate.	direction of the Secretary
12		
14	STATE OF MAINE SENATE 122ND LEGISLATURE	
16	SECOND REGULAR	
18	committee amendment " A " to s.p.	506 I D 1614 Bill "An
20	Act To Sustain and Strengthen Community Health Coalitions"	
22	Amend the bill by striking out the following:	the title and substituting
24	-	write Hoalth Coalitions'
- 26	'Resolve, Regarding Comprehensive Community Health Coalitions'	
28	Further amend the bill by striki title and before the summary and i following:	
30		
32	'Emergency preamble. Whereas, Legislature do not become effect: adjournment unless enacted as emergenc	ive until 90 days after
34	¥771	
36	Whereas, the development of core performance standards for compre coalitions before the end of 2006 is	hensive community health
38	of Maine's public health system; and	important to the operation
40	Whereas, inventorying resources integrate some funding sources to	
42	functions identified in the State H important to Maine's public health sys	-
44		
46	Whereas, in the judgment of the create an emergency within the mean Maine and require the following	ing of the Constitution of
48	necessary for the preservation of the safety; now, therefore, be it	ne public peace, health and

1

Page 1-LR0173(2)

COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "A" to S.P. 596, L.D. 1614

5- (**R**

12

Sec. 1. Comprehensive community health coalitions. Resolved: 2 That the Department of Health and Human Services shall recognize and partner with comprehensive community health coalitions to 4 provide public health assessment, education and services. б Comprehensive community health coalition functions may include, but are not limited to, needs assessment; development of a 8 community action plan; leveraging and coordinating resources, funding and programs; monitoring quality of life indicators; communication; technical assistance; and evaluation of health 10 initiatives; and be it further

ſ

Sec. 2. Public Health Work Group. Resolved: That the Public Health Work Group created under the State Health Plan shall establish 2 subcommittees, the Coalition Core Competencies Subcommittee and the Interdepartmental Subcommittee, and appoint the members of those subcommittees in compliance with the following:

 1. The Coalition Core Competencies Subcommittee must be cochaired by the member of the Maine Network of Healthy
Communities and the member of the Maine Center for Public Health that sit on the Public Health Work Group. The subcommittee shall develop core competencies, functions and performance standards for comprehensive community health coalitions. The subcommittee
shall report on its work to the Public Health Work Group and to the Joint Standing Committee on Health and Human Services by August 30, 2006; and

30 The Interdepartmental Subcommittee members must include 2. representatives of Communities for Children, the Governor's 32 Office of Health Policy and Finance, the Department of Health and Human Services and that department's Office of Substance Abuse and Maine Center for Disease Control and Prevention, 34 the Department of Education, the Department of Corrections, the Department of Conservation and the Department of Transportation. 36 The subcommittee shall inventory resources and develop a plan to integrate some funding sources to support the public health 38 priorities and functions identified in the State Health Plan. Each state agency member of the subcommittee shall determine how 40 to integrate the core competencies, functions and performance standards into the work and funding decisions of that member's 42 agency. The subcommittee shall report on its work to the Public Health Work Group and to the Joint Standing Committee on Health 44 and Human Services by October 30, 2006. 46

By January 1, 2007, the Public Health Work Group shall 48 report to the Joint Standing Committee on Health and Human

Page 2-LR0173(2)

COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "A " to S.P. 596, L.D. 1614

Services on any action that it has taken with regard to core competencies, functions and performance standards for comprehensive community health coalitions and the resource inventory and integration of funding sources. The report must also include identification of administrative units and regions for the purposes of administration, funding and the effective and efficient delivery of public health services.

Emergency clause. In view of the emergency cited in the preamble, this resolve takes effect when approved.'

12

14

8

SUMMARY

This amendment replaces the bill and changes it to a The amendment adds emergency language to the resolve. 16 resolve. The amendment requires the Department of Health and Human Services to recognize and partner with comprehensive community 18 health coalitions. The amendment directs the Public Health Work 20 Group created under the State Health Plan to form 2 subcommittees to work on core competencies, functions and performance standards for comprehensive community health coalitions and to inventory 22 resources and develop a plan to integrate some funding sources to 24 support the public health priorities and functions identified in the State Health Plan. The amendment requires state agency 26 members of one subcommittee to determine how to integrate the core competencies, functions and performance standards into the 28 work and funding decisions of their agencies. The amendment requires reporting to the Joint Standing Committee on Health and 30 Human Services and the Public Health Work Group by the subcommittees. It requires the Public Health Work Group to 32 report to the Joint Standing Committee on Health and Human Services by January 1, 2007.

FISCAL NOTE REQUIRED (See attached)

Page 3-LR0173(2)





1

122nd MAINE LEGISLATURE

LD 1614

LR 0173(02)

An Act To Sustain and Strengthen Community Health Coalitions

Fiscal Note for Bill as Amended by Committee Amendment 'A'' Committee: Health and Human Services Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

Any additional costs to the Department of Health and Human Services in implementing this bill can be absorbed by the Department utilizing existing budgeted resources. Any additional costs to departments or agencies designated for representation on the Interdepartmental Subcommittee of the Public Health Work Group are assumed to be minor.