

# MAINE STATE LEGISLATURE

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# 123rd MAINE LEGISLATURE

## FIRST REGULAR SESSION-2007

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Legislative Document

No. 1676

S.P. 581

March 22, 2007

**An Act To Ensure the Effective Management of the Behavioral  
Health Care Services System in Maine**

(EMERGENCY)

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

A handwritten signature in cursive script that reads "Joy J. O'Brien".

JOY J. O'BRIEN  
Secretary of the Senate

Presented by President EDMONDS of Cumberland.  
Cosponsored by Representative: PINGREE of North Haven.

1       **Emergency preamble. Whereas,** acts and resolves of the Legislature do not  
2 become effective until 90 days after adjournment unless enacted as emergencies; and

3       **Whereas,** it is imperative that a managed behavioral health care system be  
4 established as soon as possible to ensure and protect public health and welfare; and

5       **Whereas,** in the judgment of the Legislature, these facts create an emergency within  
6 the meaning of the Constitution of Maine and require the following legislation as  
7 immediately necessary for the preservation of the public peace, health and safety; now,  
8 therefore,

9       **Be it enacted by the People of the State of Maine as follows:**

10       **Sec. 1. 34-B MRSA §3001,** as amended by PL 1995, c. 560, Pt. K, §31 and  
11 affected by §83; amended by PL 2001, c. 354, §3; and amended by PL 2003, c. 689, Pt.  
12 B, §6, is further amended to read:

13       **§3001. General**

14       The Department of Health and Human Services is responsible for the direction of the  
15 mental health programs in the state institutions and for the promotion and guidance of  
16 mental health programs within the communities of the State including establishing a  
17 managed behavioral health care services system as required by Public Law 2005, chapter  
18 457, Part PP; Public Law 2005, chapter 519, Part ZZZ; and Resolve 2005, chapter 203.

19       **1. Managed behavioral health care services system.** In developing and  
20 implementing a managed behavioral health care services system, the department shall:

21       A. Contract with an experienced behavioral health care company to provide  
22 management functions, including, but not limited to, provider enrollment; quality  
23 improvement; rate setting that applies to all providers, including the State and private  
24 and public hospitals; network development; utilization review; level of care  
25 determination; best practices guidelines; claims management; information processing;  
26 provider credentialing; consent decree compliance; and elimination of system  
27 redundancy;

28       B. Develop contract specifications that include a model that limits risks, provides  
29 incentives for performance, incorporates full parity for mental health services,  
30 focuses on prevention, early intervention and recovery and specifies contractual,  
31 financial and service outcomes;

32       C. Be responsible for the policy development, financing, leadership and evaluation  
33 of quality of the system and for system improvements while eliminating state  
34 duplication of private and community services and programs;

35       D. Develop a system that focuses on the whole person and the person's environment,  
36 including but not limited to transportation, housing and vocational and social needs;

37       E. Develop a stakeholders' group to advise the department on the development of the  
38 system while promoting and supporting the highest level of community inclusion;  
39 and

1 F. Ensure that the system is equitable and person-centered, provides consumer  
2 choice, is easy to understand and is accessible through multiple avenues, including,  
3 but not limited to, referrals from physicians or social service agencies, and is free of  
4 logistical, geographical and bureaucratic barriers.

5 **Sec. 2. 34-B MRSA §3003, sub-§2, ¶K**, as amended by PL 1987, c. 246, §1, is  
6 further amended to read:

7 K. Provisions for a fair, timely and impartial grievance procedure for the purpose of  
8 ensuring appropriate administrative resolution of grievances with respect to  
9 infringement of rights; ~~and~~

10 **Sec. 3. 34-B MRSA §3003, sub-§2, ¶L**, as enacted by PL 1987, c. 246, §2, is  
11 amended to read:

12 L. To the extent that state and community resources are available, establishment of  
13 the rights of long-term mentally ill clients containing the following requirements:

14 (1) The right to a service system ~~which that~~ that employs culturally normative and  
15 valued methods and settings;

16 (2) The right to coordination of the disparate components of the community  
17 service system;

18 (3) The right to individualized developmental programming which recognizes  
19 that each long-term mentally ill individual is capable of growth or slowing of  
20 deterioration;

21 (4) The right to a continuum of community services allowing a gradual transition  
22 from a more intense level of service; ~~and~~

23 (5) The right to the maintenance of natural support systems, such as family and  
24 friends of the long-term mentally ill individual and formal and informal networks  
25 of mutual and self-help; ~~and~~

26 **Sec. 4. 34-B MRSA §3003, sub-§2, ¶M** is enacted to read:

27 M. Establishment of a managed behavioral health care services system as required  
28 by Public Law 2005, chapter 457, Part PP; Public Law 2005, chapter 519, Part ZZZ;  
29 and Resolve 2005, chapter 203 in accordance with section 3001, subsection 1.

30 **Emergency clause.** In view of the emergency cited in the preamble, this  
31 legislation takes effect when approved.

32 **SUMMARY**

33 This bill codifies the development of a managed behavioral health care services  
34 system pursuant to Public Law 2005, chapter 457, Part PP; Public Law 2005, chapter 519,  
35 Part ZZZ; and Resolve 2005, chapter 203. It provides specific information designed to  
36 guide the development of the system.