MAINE STATE LEGISLATURE

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MINORITY

Date: 5-12-11

(Filing No. S- 106)

3	HEALTH AND HUMAN SERVICES
4	Reproduced and distributed under the direction of the Secretary of the Senate.
5	STATE OF MAINE
6	SENATE
7	125TH LEGISLATURE
8	FIRST REGULAR SESSION
9 10	COMMITTEE AMENDMENT " A " to S.P. 287, L.D. 941, Bill, "An Act To Prohibit Mandatory Immunizations"
11	Amend the bill by inserting after section 10 the following:
12 13	'Sec. 11. 22 MRSA §454-A, sub-§2, ¶C, as enacted by PL 2007, c. 598, §7, is amended to read:
14 15 16 17	C. During a declared health emergency, as defined in section 802, subsections subsection 2 and 2 A, report to the commissioner or the commissioner's designee facts regarding potential notifiable diseases and cases that directly relate to the declared health emergency, as the rules of the department require;
18 19	Sec. 12. 22 MRSA §801, sub-§4-A, as enacted by PL 2001, c. 694, Pt. B, §1 and affected by PL 2005, c. 383, §24, is repealed.
20 21	Sec. 13. 22 MRSA §801, sub-§8-A, as enacted by PL 2001, c. 694, Pt. B, §2 and affected by PL 2005, c. 383, §24, is amended to read:
22 23 24	8-A. Prescribed care. "Prescribed care" means isolation, quarantine, examination, vaccination, or medical care or treatment ordered by the department or a court pursuant to section 820.
25 26	Sec. 14. 22 MRSA §802, sub-§2-A, as enacted by PL 2001, c. 694, Pt. B, §3 and affected by PL 2005, c. 383, §24, is repealed.
27 28	Sec. 15. 22 MRSA §802, sub-§3, as amended by PL 2005, c. 383, §8 and affected by §24, is repealed.
29 30	Sec. 16. 22 MRSA §816, sub-§1, as amended by PL 2003, c. 438, §1, is further amended to read:
31 32 33 34	1. For private institutions. Any private institution, its employees or agents are immune from civil liability to the extent provided in Title 14, chapter 741, as if that institution were a state agency and its employees and agents were state employees, for any acts taken to provide for the confinement or restraint of a person committed pursuant

prescribed care within the meaning of this chapter in support of the State's response teleplared extreme public health emergency in accordance with the provisions of teleplared extreme public health emergency in accordance with the provisions of teleplared. Sec. 17. 22 MRSA §816, sub-§1-A, as enacted by PL 2005, c. 630, §1. repealed. Sec. 18. 22 MRSA §817, as amended by PL 2007, c. 359, §1, is further amend to read: §817. Discharge An individual committed to a hospital, facility or private home pursuant to sect \$12 or section \$13 or subject to a prescribed care order of the department or a cell pursuant to section \$20 may be discharged when the physician responsible for individual's treatment and the department determine that the individual may discharged without danger to other individuals. The department shall immediately repeated the commitment. If an individual committed to a hospital, facility or private home pursuant to sect \$12 or section \$13 or subject to a prescribed care order of the department or a cell pursuant to section \$20 violates the commitment prior to discharge in accordance we this section, the hospital or physician responsible for treatment shall immediately repeated the tothe department. An arrest warrant must be issued upon application by department to the District Court or Superior Court. Sec. 19. 22 MRSA c. 250, sub-c. 2-A, as amended, is repealed.' Amend the bill by striking out all of section 12 and inserting the following: Sec. 12. 24 MRSA §2904, sub-§1, ¶A, as enacted by PL 2003, c. 438, §2 amended to read: A. A licensed health care practitioner who voluntarily, without the expectation receipt of monetary or other compensation either directly or indirectly, proviprofessional services within the scope of that health care practitioner's licensure: (1) To a nonprofit organization; (2) To an agency of the State or any political subdivision of the State; (3) To members or recipients of services of a nonprofit organization or state local agency; (4) To support the State's res		
Sec. 18. 22 MRSA §817, as amended by PL 2007, c. 359, §1, is further amend to read: §817. Discharge An individual committed to a hospital, facility or private home pursuant to sect 812 or section 813 or subject to a prescribed care order of the department or a consumption of the discharged when the physician responsible for the discharged without danger to other individuals. The department shall immediately reproduced without danger to other individuals. The department shall immediately reproduced the commitment. If an individual committed to a hospital, facility or private home pursuant to section 813 or subject to a prescribed care order of the department or a consumption of the section 813 or subject to a prescribed care order of the department or a consumption of the section 820 violates the commitment prior to discharge in accordance within section, the hospital or physician responsible for treatment shall immediately reproduced the consumption of the state of the department or a consumption of the state of the department or a consumption of the state of the department or a consumption of the state of the department or a consumption of the discharge in accordance within section, the hospital or physician responsible for treatment shall immediately reproduced to the department. An arrest warrant must be issued upon application by department to the District Court or Superior Court. Sec. 19. 22 MRSA c. 250, sub-c. 2-A, as amended, is repealed. Amend the bill by striking out all of section 12 and inserting the following: Sec. 12. 24 MRSA §2904, sub-§1, ¶A, as enacted by PL 2003, c. 438, §2 amended to read: A. A licensed health care practitioner who voluntarily, without the expectation receipt of monetary or other compensation either directly or indirectly, proviporessional services within the scope of that health care practitioner's licensure: (1) To a nonprofit organization; (2) To an agency of the State or any political subdivision of the State; (3) To members or recipients of services of a nonprof	2 3	to this chapter or for participating in reporting under this chapter, or for engaging in any prescribed care within the meaning of this chapter in support of the State's response to a declared extreme public health emergency in accordance with the provisions of this chapter and Title 37-B, chapter 13, subchapter 2.
to read: \$817. Discharge An individual committed to a hospital, facility or private home pursuant to sect 812 or section 813 or subject to a prescribed care order of the department or a ce pursuant to section 820 may be discharged when the physician responsible for to individual's treatment and the department determine that the individual may discharged without danger to other individuals. The department shall immediately report the discharge, with a full statement of the reasons for the discharge, to the court to ordered the commitment. If an individual committed to a hospital, facility or private home pursuant to sect 812 or section 813 or subject to a prescribed care order of the department or a ce pursuant to section, 820 violates the commitment prior to discharge in accordance withis section, the hospital or physician responsible for treatment shall immediately report this to the department. An arrest warrant must be issued upon application by department to the District Court or Superior Court. Sec. 19. 22 MRSA c. 250, sub-c. 2-A, as amended, is repealed.' Amend the bill by striking out all of section 12 and inserting the following: 'Sec. 12. 24 MRSA §2904, sub-§1, ¶A, as enacted by PL 2003, c. 438, §2 amended to read: A. A licensed health care practitioner who voluntarily, without the expectation receipt of monetary or other compensation either directly or indirectly, proviprofessional services within the scope of that health care practitioner's licensure: (1) To a nonprofit organization; (2) To an agency of the State or any political subdivision of the State; (3) To members or recipients of services of a nonprofit organization or state local agency; (4) To support the State's response to a public health threat as defined in Title section 801, subsection 10; or (5) To support the State's response to an extreme public health emergency	_	Sec. 17. 22 MRSA §816, sub-§1-A, as enacted by PL 2005, c. 630, §1, is repealed.
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(2) To an agency of the State or any political subdivision of the State; (3) To members or recipients of services of a nonprofit organization or state local agency; (4) To support the State's response to a public health threat as defined in Title section 801, subsection 10; or (5) To support the State's response to an extreme public health emergency	28	A. A licensed health care practitioner who voluntarily, without the expectation or receipt of monetary or other compensation either directly or indirectly, provides professional services within the scope of that health care practitioner's licensure:
(3) To members or recipients of services of a nonprofit organization or state local agency; (4) To support the State's response to a public health threat as defined in Title section 801, subsection 10; or (5) To support the State's response to an extreme public health emergency	30	(1) To a nonprofit organization;
local agency; (4) To support the State's response to a public health threat as defined in Title section 801, subsection 10; or (5) To support the State's response to an extreme public health emergency	31	(2) To an agency of the State or any political subdivision of the State;
section 801, subsection 10; <u>or</u> (5) To support the State's response to an extreme public health emergency		(3) To members or recipients of services of a nonprofit organization or state or local agency;
		(4) To support the State's response to a public health threat as defined in Title 22 section 801, subsection 10; or
		(5) To support the State's response to an extreme public health emergency as defined in Title 22, section 801, subsection 4-A; or

(6) To support the State's response to a disaster as defined in Title 37-B, section

38 39

703, subsection 2; or

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section number to read consecutively.

2 amended to read: 3 B. An emergency medical services person who voluntarily, without the expectation or receipt of monetary or other compensation either directly or indirectly, provides 4 emergency medical services within the scope of that person's licensure: 5 6 (1) To support the State's response to a public health threat as defined in Title 22, 7 section 801, subsection 10; or 8 (2) To support the State's response to an extreme public health emergency as 9 defined in Title 22, section 801, subsection 4 A; or 10 (3) To support the State's response to a disaster as defined in Title 37-B, section 11 703, subsection 2. 12 Sec. 14. 24 MRSA §2904, sub-§2, ¶D, as enacted by PL 2003, c. 438, §2, is 13 amended to read: 14 D. To support the State's response to a public health threat as defined in Title 22, 15 section 801, subsection 10; or 16 Sec. 15. 24 MRSA §2904, sub-§2, ¶E, as enacted by PL 2003, c. 438, §2, is 17 repealed. 18 Sec. 16. 26 MRSA c. 7, sub-c. 10, as amended, is repealed. 19 Sec. 17. 30-A MRSA §1560, sub-§1-A, as enacted by PL 2007, c. 359, §2, is 20 amended to read: 21 1-A. Transportation; medical care. A person detained or committed to a jail or 22 correctional facility as a consequence of a violation of a public health measure pursuant 23 to Title 22, section 812 or section 813 or as a consequence of a violation of a prescribed 24 care order pursuant to Title 22, section 820 may be transported by the sheriff or 25 superintendent of the correctional facility for medical care if a court orders the transport. 26 The Department of Health and Human Services shall bear the costs of transportation and 27 the per diem compensation for the accompanying officers. 28 Sec. 18. 37-B MRSA §703, sub-§2, as amended by PL 2001, c. 694, Pt. B, §5 29 and affected by PL 2005, c. 383, §24, is further amended to read: 30 2. Disaster. "Disaster" means the occurrence or imminent threat of widespread or 31 severe damage, injury or loss of life or property resulting from any natural or man-made 32 cause, including, but not limited to, fire, flood, earthquake, wind, storm, wave action, oil 33 spill or other water contamination requiring emergency action to avert danger or damage, 34 epidemic, extreme public health emergency pursuant to Title 22, section 802, subsection 35 2-A, air contamination, blight, drought, critical material shortage, infestation, explosion, 36 riot or hostile military or paramilitary action.'

Sec. 13. 24 MRSA §2904, sub-§1, ¶B, as corrected by RR 2005, c. 2, §19, is

Amend the bill by relettering or renumbering any nonconsecutive Part letter or

1	SUMMARY
2	This amendment, which is the minority report of the committee, removes from the
3	bill the section that relates to emergency rescue and public safety workers undergoing
4	immunization for certain diseases. The amendment also repeals the authority of the
5	Governor to declare an extreme public health emergency.

FISCAL NOTE REQUIRED (See attached)



125th MAINE LEGISLATURE

LD 941

LR 1977(02)

An Act To Prohibit Mandatory Immunizations

Fiscal Note for Bill as Amended by Committee Amendment "A" S-106
Committee: Health and Human Services
Fiscal Note Required: Yes

Fiscal Note

Minor savings - General Fund Minor revenue decrease - General Fund

Fiscal Detail and Notes

Repealing the law that provided employment leave for caregivers and persons affected by extreme public health emergencies may result in General Fund savings to the Bureau of Labor Standards within the Department of Labor due to the Bureau no longer having to investigate complaints of violations. Repealing the penalties assessed for violations of the law may result in a decrease in General Fund revenue. Neither the amount of savings to the Bureau nor the amount of revenue lost is expected to be significant.

Additional costs to the Department of Education and the Department of Health and Human Services associated with rulemaking can be absorbed within existing budgeted resources.