

MAINE STATE LEGISLATURE

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L.D. 105

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Date: 3-12-18

(Filing No. H-645)

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STATE AND LOCAL GOVERNMENT

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STATE OF MAINE

6

HOUSE OF REPRESENTATIVES

7

128TH LEGISLATURE

8

SECOND REGULAR SESSION

9

COMMITTEE AMENDMENT "A" to H.P. 73, L.D. 105, Bill, "An Act To Create a Centralized Authority To Combat Opiate Addiction in Maine"

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Amend the bill by striking out the title and substituting the following:

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'An Act To Create the Substance Use Disorders Cabinet'

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Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

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'Sec. 1. 5 MRSA c. 441 is enacted to read:

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CHAPTER 441

17

SUBSTANCE USE DISORDERS CABINET

18

§19151. Substance Use Disorders Cabinet

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1. Establishment. The Substance Use Disorders Cabinet, referred to in this chapter as "the cabinet," is established to promote interdepartmental collaboration on policy development and program implementation and to support the delivery of services for prevention, harm reduction and treatment of substance use disorders for citizens of the State that are planned, managed and delivered in an integrated manner.

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2. Membership. The cabinet consists of the following members:

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A. The Commissioner of Corrections or the commissioner's designee;

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B. The Commissioner of Education or the commissioner's designee;

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C. The Commissioner of Health and Human Services or the commissioner's designee;

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D. The Commissioner of Labor or the commissioner's designee;

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E. The Commissioner of Public Safety or the commissioner's designee;

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F. The Chief Justice of the Supreme Judicial Court or the Chief Justice's designee; and

G. At the discretion of the Governor, a member of the public, appointed by the Governor.

3. Chair. The Governor shall appoint one of the members to serve as chair of the cabinet. The term of the chair is 2 years.

§19152. Duties of the cabinet

Within existing resources, the cabinet shall collaborate to create, manage and promote coordinated policies, programs and service delivery systems that address prevention, harm reduction and treatment of substance use disorders consistent with the purposes of this chapter. To accomplish these purposes, the cabinet shall:

1. Regional cabinets. Appoint regional cabinets to ensure that the purposes of this chapter are implemented at the regional and local levels;

2. Subcommittees. Appoint subcommittees, which may include members from any public or private agency, advisory committee or any citizen, who has appropriate interest and expertise, as may be necessary to carry out the work of the cabinet;

3. Coordinate funding; collaboration. Coordinate funding and budgets among the departments represented in the cabinet related to services for prevention, harm reduction and treatment of substance use disorders in order to carry out the purpose of this chapter, collaborate to share funding resources and remove barriers between departments;

4. Planning and policy development. Conduct long-term planning and policy development to create a more effective public and private service delivery system;

5. Service delivery. Coordinate the delivery of residential and community-based services for prevention, harm reduction and treatment of substance use disorders among the departments represented in the cabinet;

6. Assessment of resources. Assess resource capacity and resource allocation;

7. Policy and program review. Improve policies and programs through the review of specific case examples; and

8. Communication. Broadly communicate the work of the cabinet to the departments represented in the cabinet and to the public.

§19153. Implementation and oversight

Within existing resources, the cabinet shall initiate, implement and oversee programs, policies and services consistent with the purposes of this chapter, which may include but are not limited to:

1. Community resources. Supporting a collaborative effort between communities and State Government in order to effectively address the problem of substance use disorders facing the State's citizens by organizing and combining the resources of State Government with resources and leadership at the community level;

1 **2. Effectiveness indicators.** Identifying indicators to measure progress in
 2 prevention, harm reduction and treatment of substance use disorders to be used by policy
 3 makers at the state and local levels;

4 **3. Reducing overdose.** Reducing the incidence of drug overdose among citizens of
 5 the State and improving access to appropriate services for prevention, harm reduction and
 6 treatment of substance use disorders;

7 **4. Access to information and referral.** Ensuring easy access to information and
 8 referral for services for treatment of substance use disorders;

9 **5. Service coordination and access.** Coordinating services for prevention, harm
 10 reduction and treatment of substance use disorders as an integrated whole and facilitating
 11 access to services; and

12 **6. Pooled funds.** Providing services for prevention, harm reduction and treatment of
 13 substance use disorders using appropriate funds pooled from each department represented
 14 in the cabinet.

15 **§19154. Funds**

16 The cabinet is authorized to solicit, receive and pool funds from the Federal
 17 Government, any political subdivision of the State or any individual, foundation or
 18 corporation and may expend those funds for purposes that are consistent with this
 19 chapter.

20 **§19155. Annual report**

21 No later than January 31st of each year, the cabinet shall, within existing resources,
 22 provide an annual report to the joint standing committees of the Legislature having
 23 jurisdiction over appropriations and financial affairs, criminal justice and public safety
 24 matters, education and cultural affairs, health and human services matters, judiciary
 25 matters, labor matters and state and local government matters. The cabinet shall make the
 26 report available to the public on the Department of Health and Human Services' publicly
 27 accessible website.

28 **§19156. Repeal**

29 This chapter is repealed June 30, 2022.

30 **Sec. 2. Initial chair of the cabinet.** Notwithstanding Title 5, section 19151,
 31 subsection 3, the Commissioner of Health and Human Services, or the commissioner's
 32 designee, is the chair of the Substance Use Disorders Cabinet for the first 2-year term.'

33 **SUMMARY**

34 This amendment replaces the bill and changes the title. The amendment establishes
 35 the Substance Use Disorders Cabinet for a time-limited period, with a sunset date of June
 36 30, 2022. The cabinet consists of the commissioners of Corrections, Education, Health
 37 and Human Services, Labor and Public Safety; the Chief Justice of the Supreme Judicial
 38 Court; and, at the discretion of the Governor, one member of the public. The initial chair
 39 of the cabinet is the Commissioner of Health and Human Services or the commissioner's

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1 designee. The cabinet is established to promote interdepartmental collaboration on
2 substance use disorders policy development, program implementation and service
3 delivery in an integrated manner. The duties of the cabinet include coordinating funding,
4 conducting long-term planning and policy development, coordinating service delivery,
5 assessing resource capacity, reviewing programs and policies and communicating the
6 work of the cabinet. The cabinet is authorized to solicit, receive and pool funds from the
7 Federal Government, subdivisions of the State or individuals, foundations or
8 corporations. The cabinet is required to submit an annual report to the joint standing
9 committees of the Legislature having jurisdiction over appropriations and financial
10 affairs, criminal justice and public safety matters, education and cultural affairs, health
11 and human services matters, judiciary matters, labor matters and state and local
12 government matters and to make the report available to the public. The cabinet is
13 required to carry out its duties within existing resources.

14 **FISCAL NOTE REQUIRED**

15 (See attached)



128th MAINE LEGISLATURE

LD 105

LR 524(02)

An Act To Create a Centralized Authority To Combat Opiate Addiction in Maine

Fiscal Note for Bill as Amended by Committee Amendment *Aⁿ (H645)*

Committee: State and Local Government

Fiscal Note Required: Yes

Fiscal Note

Current biennium cost increase - General Fund

Fiscal Detail and Notes

This bill establishes the Substance Use Disorders Cabinet. State participation in cabinet activities includes the Department of Health and Human Services, the Department of Corrections, the Department of Education, the Department of Labor, the Department of Public Safety and the Judicial Branch. It is expected that some duties required in the bill, such as organizing and combining resources, improving access to appropriate services, coordinating services and facilitating services will require additional funding. The bill requires funds be pooled from each department represented in the cabinet and requires that duties be carried out within existing budgeted resources. The cabinet is authorized to solicit and receive funds from various sources. Because no funding was provided in the bill, the impact on other programs and services cannot be determined.