

# MAINE STATE LEGISLATURE

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Date: 4/3/18

L.D. 1430

(Filing No. H-715)

Majority

**HEALTH AND HUMAN SERVICES**

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**STATE OF MAINE  
HOUSE OF REPRESENTATIVES  
128TH LEGISLATURE  
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 984, L.D. 1430, Bill, "An Act To Develop a Statewide Resource and Referral Center and Develop Hub-and-spoke Models To Improve Access, Treatment and Recovery for Those with Substance Use Disorder"

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

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

**Whereas,** Maine is in the midst of an epidemic of opioid use disorder in which over 2,100 Maine individuals have died as a result of opioid overdoses since 2009; and

**Whereas,** individuals in Maine suffering from opioid and other substance use disorder lack access to treatment and support; and

**Whereas,** individuals can successfully recover from opioid and other substance use disorder with appropriate treatment and support; and

**Whereas,** this legislation seeks to address this urgent issue by requiring the Department of Health and Human Services to oversee and provide funding to support a statewide comprehensive system of services that provides access to integrated medication-assisted treatment; and

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

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

**PART A**

**Sec. A-1. 5 MRSA §20003, sub-§13-A** is enacted to read:

**COMMITTEE AMENDMENT**

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13-A. Hub. "Hub" means an organization licensed by the department that provides timely access to comprehensive, integrated assessment, treatment and recovery support for individuals with substance use disorder, including but not limited to opioid use disorders. Hub services may be provided by licensed behavioral health organizations, community mental health centers, methadone clinics, hospitals and federally qualified health centers.

**Sec. A-2. 5 MRSA §20003, sub-§15-A** is enacted to read:

15-A. Integrated medication-assisted treatment. "Integrated medication-assisted treatment" means a treatment method that combines medication approved by the federal Food and Drug Administration for the treatment of substance use disorder with counseling, urine drug screening and behavioral therapy that has proven effective in treating substance use disorder.

**Sec. A-3. 5 MRSA §20003, sub-§16-A** is enacted to read:

16-A. Levels of care. "Levels of care" means the continuum of recovery-oriented services that reflect an individual's risks, needs, strengths, resources and skills as determined by an assessment with standardized placement criteria conducted by a qualified clinician.

**Sec. A-4. 5 MRSA §20003, sub-§19-A** is enacted to read:

19-A. Recovery support services. "Recovery support services" means services that recognize recovery is a process of change through which individuals improve their health and wellness, live self-directed lives and strive to reach their full potential, including, but not limited to, safe housing, transportation, peer mentoring and coaching and assistance with and access to employment services. "Recovery support services" may include services provided in an integrated medication-assisted treatment setting or in a separate facility that is staffed by individuals in recovery and that provides services such as mentoring, education and resource provision.

**Sec. A-5. 5 MRSA §20003, sub-§19-B** is enacted to read:

19-B. Spoke. "Spoke" means a community-based provider, including, but not limited to, a primary care provider, that provides integrated medication-assisted treatment and behavioral health treatment and recovery support services to patients with substance use disorder, including, but not limited to, opioid use disorder, or refers those patients to such treatments or services.

**Sec. A-6. 5 MRSA §20054** is enacted to read:

**§20054. Hub-and-spoke model**

No later than October 1, 2018, the department shall ensure that a continuum of evidence-based treatment and recovery support services for opioid use disorder is accessible to all people in this State through contracts with hubs and spokes. Hub providers may refer patients to spokes when clinically appropriate, and spokes may refer patients to hubs when clinically appropriate. The department shall provide funds to hubs and spokes to support the development of treatment capacity. The department shall also provide funds to hubs and spokes for treatment, including medication, for individuals who lack insurance or the ability to pay for treatment. The department shall provide

1 funds to support recovery support services for individuals receiving treatment from hubs  
2 and spokes. The department shall ensure that individuals have access to the appropriate  
3 levels of care that meet the individuals' need, as determined by an assessment by a  
4 treating clinician. A hub is eligible to receive funding under this section only if the hub  
5 has the capacity to assess and treat or refer patients with multiple behavioral health  
6 diagnoses. A hub shall provide or contract for comprehensive services including  
7 intensive outpatient programs and integrated medication assisted treatment for individuals  
8 with acute needs. A hub shall provide or coordinate with recovery support services.

9 **PART B**

10 **Sec. B-1. Department of Health and Human Services to seek federal**  
11 **funding.** The Department of Health and Human Services, referred to in this Part as "the  
12 department," shall assess federal funding opportunities to support integrated medication-  
13 assisted treatment and a hub-and-spoke model of delivery of services for opioid and  
14 substance use disorder as described in the Maine Revised Statutes, Title 5, section 20054  
15 and distribute resources to hubs and spokes based on identified needs.

16 **Sec. B-2. Development of grant funding for education.** The department shall  
17 provide grant funding, when available, to hubs or other qualified entities to provide  
18 assistance with the development of hub-and-spoke infrastructure, as well as initial  
19 training and ongoing education to hub-and-spoke providers across the State. Qualified  
20 entities may include providers that deliver health care services to meet the health needs of  
21 target populations.

22 **Sec. B-3. Provide treatment to uninsured individuals seeking treatment.**  
23 The department shall provide funds to support treatment for uninsured individuals  
24 seeking integrated medication-assisted treatment.

25 **Sec. B-4. Evaluation and assessment.** The department shall develop  
26 assessment measures for performance evaluation of the hub-and-spoke model.  
27 Assessment measures must include statistics regarding referrals of individuals seeking  
28 substance use disorder treatment; treatment for substance use disorder; success rates,  
29 including recovery engagement, adherence to medication-assisted treatment protocols,  
30 stability and workplace participation; wait time for services; and any other relevant  
31 measures.

32 **Sec. B-5. 211 Maine information.** The department shall support the  
33 development of a plan to create a statewide resource and referral center for substance use  
34 disorder treatment and recovery resources that uses the existing 211 Maine service and  
35 links it with comprehensive, statewide information on available treatment and recovery  
36 resources. The department shall work collaboratively with the United Ways of Maine  
37 and 211 Maine to develop this plan, as well as with substance use disorder treatment  
38 providers and individuals from the substance use disorder recovery community.

39 **Sec. B-6. Report.** No later than February 1, 2019, the department shall report to  
40 the joint standing committee of the Legislature having jurisdiction over health and human  
41 services matters on the progress and implementation of the hub-and-spoke model, federal  
42 funding, grants dispersed, evaluation and assessment measures and improvement of the

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1 211 Maine service. The joint standing committee of the Legislature having jurisdiction  
2 over health and human services matters is authorized to report out legislation to the First  
3 Regular Session of the 129th Legislature related to the report.

4 **PART C**

5 **Sec. C-1. Appropriations and allocations.** The following appropriations and  
6 allocations are made.

7 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF**

8 **Office of Substance Abuse and Mental Health Services Z199**

9 Initiative: Provides funding beginning in fiscal year 2018-19 to hubs and spokes to cover  
10 costs of intensive, intermediate and long-term treatment, including, but not limited to, the  
11 cost of medication, screening, behavioral health treatment, urine drug screens, office  
12 visits and recovery support services for individuals with opioid use disorder, including  
13 those who are uninsured. The department may use a portion of the funds to support  
14 training and education of hubs and spokes.

15	<b>GENERAL FUND</b>	<b>2017-18</b>	<b>2018-19</b>
16	All Other	\$0	\$6,663,000
17			
18	<b>GENERAL FUND TOTAL</b>	<u>\$0</u>	<u>\$6,663,000</u>

19 **Emergency clause.** In view of the emergency cited in the preamble, this  
20 legislation takes effect when approved.'

21 **SUMMARY**

22 This amendment, which is the majority report of the committee, replaces the bill. It  
23 establishes the hub-and-spoke system in statute. It establishes definitions for "hub,"  
24 "spoke," "levels of care," "integrated medication-assisted treatment" and "recovery  
25 support services." It requires the Department of Health and Human Services to support a  
26 hub-and-spoke system. It clarifies that the department must assess opportunities for  
27 federal funding and provide grants for training when funding is available. It requires the  
28 department to support the development of a plan to create a statewide resource and  
29 referral center for substance use disorder treatment that uses 211 Maine and links it with  
30 comprehensive statewide information on available treatment and recovery resources. It  
31 requires a report from the department to the joint standing committee of the Legislature  
32 having jurisdiction over health and human services matters by February 1, 2019. It  
33 includes an appropriations and allocations section. It also adds an emergency preamble  
34 and emergency clause.

35 **FISCAL NOTE REQUIRED**

36 (See attached)



# 128th MAINE LEGISLATURE

LD 1430

LR 1701(02)

An Act To Develop a Statewide Resource and Referral Center and Develop Hub-and-spoke Models To Improve Access, Treatment and Recovery for Those with Substance Use Disorder

Fiscal Note for Bill as Amended by Committee Amendment  
 Committee: Health and Human Services

*A (H-715)*

Fiscal Note Required: Yes

## Fiscal Note

	FY 2017-18	FY 2018-19	Projections FY 2019-20	Projections FY 2020-21
<b>Net Cost (Savings)</b>				
General Fund	\$0	\$6,663,000	\$6,663,000	\$6,663,000
<b>Appropriations/Allocations</b>				
General Fund	\$0	\$6,663,000	\$6,663,000	\$6,663,000

### Fiscal Detail and Notes

The bill includes an ongoing General Fund appropriation to the Department of Health and Human Services of \$6,663,000 beginning in fiscal year 2018-19 to hubs and spokes to cover costs of intensive, intermediate and long-term treatment, including, but not limited to, the cost of medication, screening, behavioral health treatment, urine drug screens, office visits and recovery support services for individuals with opioid use disorder, including those who are uninsured. The department may use a portion of these funds to support training and education of hubs and spokes.