

MAINE STATE LEGISLATURE

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L.D. 297

Date: 4/23/19

(Filing No. H-134)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
129TH LEGISLATURE
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 221, L.D. 297, Bill, "An Act To Strengthen Brain Injury Resources for Underserved Populations, Including Opioid Overdose Brain Injury Survivors"

Amend the bill in section 1 in §3088-A in the first paragraph in the 6th line (page 1, line 9 in L.D.) by inserting after the following: "veterans," the following: 'who are victims of domestic violence.'

Amend the bill in section 1 in §3088-A in the first paragraph in the 3rd line from the end (page 1, line 14 in L.D.) by striking out the following: "shall" and inserting the following: 'may'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

This amendment adds victims of domestic violence to the list of underserved populations of individuals with an acquired brain injury. It also clarifies that the Department of Health and Human Services may adopt rules rather than being required to adopt rules.

FISCAL NOTE REQUIRED

(See attached)

COMMITTEE AMENDMENT



129th MAINE LEGISLATURE

LD 297

LR 811(02)

An Act To Strengthen Brain Injury Resources for Underserved Populations, Including Opioid Overdose Brain Injury Survivors

Fiscal Note for Bill as Amended by Committee Amendment

A(H-134)

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Potential current biennium cost increase - General Fund

Fiscal Detail and Notes

This bill states the Department of Health and Human Services (DHHS) may enter into contracts with organizations representing individuals with a brain injury and their families, bringing together state and national expertise to provide core brain injury support for underserved populations of individuals with an acquired brain injury. These new contracts, if entered into by the DHHS, must be provided within the limits of available DHHS resources, so no new appropriations will be made to the DHHS. However, any new contracts will reduce the resources of the DHHS which could lead to other current services receiving less funding.