

# MAINE STATE LEGISLATURE

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# 130th MAINE LEGISLATURE

## SECOND REGULAR SESSION-2022

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Legislative Document

No. 1848

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H.P. 1369

House of Representatives, December 22, 2021

### **An Act To Increase the Availability of Assertive Community Treatment Services**

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Submitted by the Department of Health and Human Services pursuant to Joint Rule 203.  
Received by the Clerk of the House on December 20, 2021. Referred to the Committee on  
Health and Human Services pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint  
Rule 401.

A handwritten signature in cursive script that reads "R B. Hunt".

ROBERT B. HUNT  
Clerk

Presented by Representative MADIGAN of Waterville.

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

2 **Sec. 1. 34-B MRSA §3801, sub-§7-C** is enacted to read:

3 **7-C. Prescriber.** "Prescriber" means a licensed health care provider with authority to  
4 prescribe, including a licensed physician, certified nurse practitioner or licensed physician  
5 assistant who has training or experience in psychopharmacology.

6 **Sec. 2. 34-B MRSA §3801, sub-§11,** as amended by PL 2017, c. 407, Pt. A, §159,  
7 is further amended to read:

8 **11. Assertive community treatment.** "Assertive community treatment" or "ACT"  
9 means a self-contained service with a fixed point of responsibility for providing treatment,  
10 rehabilitation and support services to persons with mental illness for whom other  
11 community-based treatment approaches have been unsuccessful. Assertive community  
12 treatment uses clinical and rehabilitative staff to address symptom stability; relapse  
13 prevention; maintenance of safe, affordable housing in normative settings that promote  
14 well-being; establishment of natural support networks to combat isolation and withdrawal;  
15 the minimizing of involvement with the criminal justice system; individual recovery  
16 education; and services to enable the person to function at a work site. Assertive community  
17 treatment is provided by multidisciplinary teams who are on duty 24 hours per day, 7 days  
18 per week; teams must include a ~~psychiatrist~~ prescriber, registered nurse or licensed  
19 practical nurse, certified rehabilitation counselor or certified employment specialist, a peer  
20 recovery specialist and a substance use disorder counselor and may include an occupational  
21 therapist, community-based mental health rehabilitation technician, psychologist, licensed  
22 clinical social worker or licensed clinical professional counselor. A licensed practical nurse  
23 may be included on an ACT team in lieu of a registered nurse if the prescriber is not a  
24 certified nurse practitioner. An ACT team member who is a state employee is, while in  
25 good faith performing a function as a member of an ACT team, performing a discretionary  
26 function within the meaning of Title 14, section 8104-B, subsection 3.

27 **SUMMARY**

28 This bill amends the behavioral and developmental services law regarding mental  
29 health hospitalization to add the definition of "prescriber," which is defined to mean a  
30 licensed health care provider with authority to prescribe, including a licensed physician,  
31 certified nurse practitioner or licensed physician assistant who has training or experience  
32 in psychopharmacology. It also amends the definition of "assertive community treatment"  
33 to change the composition of the multidisciplinary team that provides assertive community  
34 treatment by removing reference to the term "psychiatrist" and replacing it with the term  
35 "prescriber" and by providing that a licensed practical nurse may be a member of the team  
36 in lieu of a registered nurse if the prescriber is not a certified nurse practitioner.