

MAINE STATE LEGISLATURE

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131st MAINE LEGISLATURE

FIRST SPECIAL SESSION-2023

Legislative Document

No. 1863

H.P. 1193

House of Representatives, May 2, 2023

An Act to Facilitate the Provision of Medically Appropriate Levels of Care for Clients of Correctional Facilities

Reference to the Committee on Criminal Justice and Public Safety suggested and ordered printed.

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

ROBERT B. HUNT
Clerk

Presented by Representative SACHS of Freeport.
Cosponsored by Senator BEEBE-CENTER of Knox and
Representatives: GATTINE of Westbrook, HASENFUS of Readfield, LOOKNER of Portland,
MATHIESON of Kittery, MILLIKEN of Blue Hill, SALISBURY of Westbrook, Speaker
TALBOT ROSS of Portland, Senator: LaFOUNTAIN of Kennebec.

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

2 **Sec. 1. 34-A MRSA §1402, sub-§14** is enacted to read:

3 **14. Long-term care services.** The commissioner shall facilitate the provision of
4 medically appropriate levels of care for clients. This subsection governs application for
5 services, eligibility determination, appropriate placement and the provision of medically
6 appropriate services.

7 A. The commissioner shall develop procedures to provide information to staff, clients
8 and clients' friends and family regarding services available under this subsection,
9 including, but not limited to, assisted living, nursing care, hospice and home health
10 care services.

11 B. Upon request or as medically indicated, the commissioner shall assist clients, their
12 families and correctional facilities staff in applying for assessment of long-term care
13 medical and social needs using the Medicaid eligibility assessment provided under
14 Title 22, section 3174-I. The commissioner shall ensure that each client receives the
15 services determined to be needed and is placed in a facility appropriate for the level of
16 care required within 30 working days of a request.

17 C. The commissioner may establish and maintain licensed assisted living units and
18 nursing facility units within correctional facilities to serve the needs of clients and shall
19 place clients in those units as appropriate to each client.

20 D. If the commissioner is unable to provide licensed assisted living units and nursing
21 facility units in correctional facilities to serve the needs of clients determined to be
22 eligible under paragraph B, the commissioner shall develop or contract for assisted
23 living facility and nursing facility levels of care in licensed facilities in the community
24 and shall place clients in those facilities as appropriate to each client.

25 E. The commissioner shall work with the Department of Health and Human Services
26 to develop licensed assisted living units and nursing facility units in correctional
27 facilities under paragraph C or develop or contract for assisted living facility and
28 nursing facility levels of care in licensed facilities in the community under paragraph
29 D and to encourage licensed facilities in the community to accept clients as residents.
30 The department shall provide training to licensed facilities in the community regarding
31 the specific needs of clients.

32 F. If the commissioner is unable to develop licensed assisted living units and nursing
33 facility units or to partner with an assisted living facility or nursing facility as described
34 in paragraph D, the commissioner shall work with the client and the client's chosen
35 partners in the community to allow the client to receive hospice services from an entity
36 licensed pursuant to Title 22, chapter 1681, subchapter 1 or other care services provided
37 by an entity approved by the commissioner or the commissioner's designee and, subject
38 to approval by the commissioner or the commissioner's designee, the client may live at
39 home while receiving these services under the supervision of the department.

40 G. The department shall collect data and report weekly on the number of clients using
41 services under this subsection including applications for medical evaluations and
42 applications for placement; acceptance or denial for services; type and number of
43 placements; and associated demographic data, including, but not limited to, race,

