# MAINE STATE LEGISLATURE

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# **LAWS**

# **OF THE**

# **STATE OF MAINE**

AS PASSED BY THE

ONE HUNDRED AND NINETEENTH LEGISLATURE

SECOND REGULAR SESSION January 5, 2000 to May 12, 2000

THE GENERAL EFFECTIVE DATE FOR SECOND REGULAR SESSION NON-EMERGENCY LAWS IS AUGUST 11, 2000

PUBLISHED BY THE REVISOR OF STATUTES IN ACCORDANCE WITH MAINE REVISED STATUTES ANNOTATED, TITLE 3, SECTION 163-A, SUBSECTION 4.

> J.S. McCarthy Company Augusta, Maine 2000

Allocates funds for one Executive Analyst position and general operating funds.

DEPARTMENT OF ENVIRONMENTAL PROTECTION TOTAL

\$64,745

See title page for effective date.

#### **CHAPTER 785**

S.P. 1076 - L.D. 2679

An Act to Establish the Council on Children and Families and to Ensure the Continuation of the Governor's Children's Cabinet

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

Whereas, a statewide system of coordinated educational and social systems is necessary to respond to the current needs of children and families; 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:

Sec. 1. 5 MRSA §12004-L, sub-§12 is enacted to read:

12. Council on<br/>Children and FamiliesLegislative<br/>Per Diem<br/>and<br/>Expenses5 MRSA<br/>19121

Sec. 2. 5 MRSA c. 437, as amended, is repealed.

Sec. 3. 5 MRSA cc. 438 and 439 are enacted to read:

#### **CHAPTER 438**

# **COUNCIL ON CHILDREN AND FAMILIES**

# §19121. Council on Children and Families

- **1. Establishment.** The Council on Children and Families, as established by section 12004-L, subsection 12, is referred to in this chapter as the "council."
- 2. Membership. The council is composed of the following members: the Commissioner of Corrections; the Commissioner of Education; the Commissioner of Human Services; the Commissioner of Mental Health, Mental Retardation and Substance Abuse Services; the Commissioner of Public Safety; and 7 Legislators, who are each appointed for a 2-year term as follows:
  - A. The President of the Senate shall appoint 3 members from the Senate. When making the appointments, the President of the Senate shall give preference to members from the joint standing committees of the Legislature having jurisdiction over criminal justice matters, education and cultural affairs and health and human services matters; and
  - B. The Speaker of the House shall appoint 4 members from the House of Representatives. When making the appointments, the Speaker of the House shall give preference to members from the joint standing committees of the Legislature having jurisdiction over criminal justice matters, appropriations and financial affairs, education and cultural affairs and health and human services matters.

The council shall ask the Chief Justice of the Supreme Judicial Court to serve as a member of the council.

<u>Terms of appointment for Legislators must be for the legislative term of office of the person appointed.</u>

3. Chair. At the first meeting each year, the members shall elect a person from among the membership to serve as chair for a term of one year. The chair may not serve more than 2 terms consecutively.

#### §19122. Purposes of the council; goals

The purposes of the council are to receive reports from and advise and make policy recommendations to the Governor, the Children's Cabinet, the Legislature and the judiciary regarding the following goals:

1. Encourage coordinated system. To encourage a statewide system of coordinated education and social services, including health, mental health, juvenile justice and public safety services, that is responsive to the current needs of children and families and that is delivered by a partnership of schools and public and private agencies; and to promote access to these services, including coordination of these services among departments and provider agencies, for all children and their families who are in need of these services;

- 2. Promote coordinated budgets and policy. To promote a comprehensive and coordinated approach to departmental budgets and policy affecting education and social services, including health, mental health, juvenile justice and public safety services, to children and their families;
- 3. Evaluate allocation of resources. To evaluate on a continuing basis the allocation of resources to ensure the availability of quality education and social services, including health, mental health, juvenile justice and public safety services, delivered in a coordinated and efficient manner that is consistent with the needs of children and their families;
- 4. Evaluate program effectiveness. To evaluate on a continuing basis the effectiveness of programs to ensure that resources are used in accordance with subsections 1 to 3 and to promote the well-being of children and their families in the State; and
- 5. Promote plan for information exchange. To promote a plan for the informal exchange of information among schools, service providers and local criminal justice agencies concerning children receiving education and social services, including health, mental health, juvenile justice and public safety services, provided that such a plan respects the confidentiality of information and the privacy interests of children and their families.

# §19123. Duties

The council shall meet at least 3 times a year and shall report by December 31st of each year to the Governor, the Children's Cabinet established in chapter 439, the Legislature and the judiciary on its review of the progress made in meeting the goals cited in section 19122 and its policy recommendations and other proposals for meeting those goals in the forthcoming year. A copy of the report must be submitted to the joint standing committees of the Legislature having jurisdiction over appropriations and financial affairs, criminal justice matters, education and cultural affairs and health and human services matters. A copy of the report must be made available to the public.

#### §19124. Staffing; administration

Staffing assistance for the council must be coordinated by the Office of the Governor. The council may request additional staffing assistance from the Legislative Council. Staffing assistance provided by the Legislative Council must be secondary to the staffing coordinated by the Office of the Governor. All funds received by and appropriated for the council must be coordinated by the Office of the Governor.

# **CHAPTER 439**

#### CHILDREN'S CABINET

#### §19131. Children's Cabinet

- 1. Establishment. The Children's Cabinet, referred to in this chapter as the "cabinet," is established to promote interdepartmental collaboration on children's policy development and program implementation and to support the provision of services for Maine families and children that are planned, managed and delivered in a holistic and integrated manner to improve their self-sufficiency, safety, economic stability, health and quality of life.
- **2. Membership.** The cabinet consists of the following members:
  - A. The Commissioner of Corrections:
  - B. The Commissioner of Education;
  - C. The Commissioner of Human Services;
  - D. The Commissioner of Mental Health, Mental Retardation and Substance Abuse Services; and
  - E. The Commissioner of Public Safety.
- **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.

# §19132. Duties of the cabinet

The cabinet shall collaborate to create, manage and promote coordinated policies, programs and service delivery systems that support children, families and communities consistent with the purposes of this chapter. To accomplish these purposes, the cabinet shall carry out the following duties:

- 1. Regional children's cabinets. Appoint regional children's 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 of the cabinet related to child and family services in order to carry out the purpose of this chapter, collaborate to share resources, remove barriers and support initiatives that prevent health and behavioral problems in children;

- **4.** Planning and policy development. Conduct long-range planning and policy development leading to a more effective public and private service delivery system;
- 5. Coordinated service delivery. Coordinate the delivery of residential and community-based children's services among the departments;
- <u>6. Assessment.</u> Assess resource capacity and allocations;
- 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.

#### §19133. Program implementation and oversight

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. Communities for Children. Supporting a collaborative effort between communities and State Government, known as Communities for Children, to effectively address problems facing the State's children and families by mobilizing the resources of State Government with resources and leadership at the community level;
- **2.** Effectiveness indicators. Identifying indicators to measure child well-being to be used by Maine policy makers;
- 3. Safe homes. Working to ensure that all children have a safe and permanent home;
- 4. Civil and caring school environments. Providing civil and caring school environments in which violence is eliminated and the health needs of students are provided for:
- 5. Supportive communities. Focusing community members and resources to support goal-setting, counseling and mentoring for every child;
- **6. Reducing suicide.** Reducing the incidence of suicide among Maine youth and improving access to appropriate prevention and intervention services;
- 7. Access to information and referral. Ensuring easy access to information and referral services regarding child and family services;
- **8. Service coordination.** Coordinating social services to children and their families as an integrated whole and facilitating access to all services needed by family members;

- **9. Ensuring services.** Ensuring coordination of services to parents of children birth to 5 years of age; and
- 10. Local case review and resolution; pooled funds. Providing services to children with multiple needs within the child's community by supporting case review and resolution at the local level using appropriate funds pooled from each department of the cabinet.

#### §19134. Funds

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

#### §19135. Annual report

The cabinet shall provide an annual report to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs, the joint standing committee of the Legislature having jurisdiction over criminal justice matters, the joint standing committee of the Legislature having jurisdiction over education and cultural affairs and the joint standing committee of the Legislature having jurisdiction over health and human services matters, the Chief Justice of the Supreme Court and the Council on Children and Families. A copy of the report must be made available to the public.

- **Sec. 4. Guiding principles.** Consistent with the purposes of the Children's Cabinet established under this Act and recognizing that children's needs are best met within the context of relationships within the child's family and community, the child and family serving system must ensure that:
  - A. Every child has the opportunity to be a child and has access to the education, resources and support to become a healthy and productive adult:
  - B. Every family recognizes the responsibilities and rewards of raising children and is provided the support necessary to fulfill the family role;
  - C. Supporting children to reach their full potential is a shared community responsibility that includes establishing and modeling clear standards of behavior; and
  - D. State agencies collaboratively support families and communities, keeping family and children at the center of all decisions.
- **Sec. 5. Appropriation.** The following funds are appropriated from the General Fund to carry out the purposes of this Act.

#### 2000-01

#### **LEGISLATURE**

# Legislature

Personal Services \$1,155 All Other 1,050

Provides funds for the per diem and expenses of legislative members of the Council on Children and Families.

# LEGISLATURE TOTAL

\$2,205

**Emergency clause.** In view of the emergency cited in the preamble, this Act takes effect when approved.

Effective May 10, 2000.

#### **CHAPTER 786**

S.P. 1026 - L.D. 2599

An Act to Establish Fairer Pricing for Prescription Drugs

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

# PART A

Sec. A-1. 5 MRSA §12004-I, sub-§47-E is enacted to read:

<u>4</u> ′	7-E.
Human	l
Service	s

Prescription
Drug
Advisory
Commission

Expenses/ Legislative Per Diem for Nonsala-

22 MRSA §2692, sub-§6

ried or Nonpaid Public Members

**Sec. A-2. 22 MRSA §254-B,** as enacted by PL 1999, c. 431, §1, is repealed.

Sec. A-3. 22 MRSA c. 603 is enacted to read:

### **CHAPTER 603**

#### PRESCRIPTION DRUG ACCESS

#### **SUBCHAPTER I**

# MAINE RX PROGRAM

#### §2681. Maine Rx Program established

The Maine Rx Program, referred to in this subchapter as the "program," is established to reduce prescription drug prices for residents of the State. The program is designed for the State to utilize manufacturer rebates and pharmacy discounts to reduce prescription drug prices. In implementing the program, the State shall serve as a pharmacy benefit manager in establishing rebates and discounts on behalf of qualified residents.

- 1. Program goals. The Legislature finds that affordability is critical in providing access to prescription drugs for Maine residents. This subchapter is enacted by the Legislature to enable the State to act as a pharmacy benefit manager in order to make prescription drugs more affordable for qualified Maine residents, thereby increasing the overall health of Maine residents, promoting healthy communities and protecting the public health and welfare. It is not the intention of the State to discourage employers from offering or paying for prescription drug benefits for their employees or to replace employer-sponsored prescription drug benefit plans that provide benefits comparable to those made available to qualified Maine residents under this subchapter.
- **2. Definitions.** As used in this subchapter, unless the context otherwise indicates, the following terms have the following meanings.
  - A. "Average wholesale price" means the wholesale price charged on a specific commodity that is assigned by the drug manufacturer and is listed in a nationally recognized drug pricing file.
  - B. "Initial discounted price" means a price that is less than or equal to the average wholesale price, minus 6%, plus the dispensing fee provided under the Medicaid program under this Title.
  - C. "Labeler" means an entity or person that receives prescription drugs from a manufacturer or wholesaler and repackages those drugs for later retail sale and that has a labeler code from the federal Food and Drug Administration under 21 Code of Federal Regulations, 207.20 (1999).
  - D. "Participating retail pharmacy" or "retail pharmacy" means a retail pharmacy located in this State, or another business licensed to dispense prescription drugs in this State, that participates in the program and that provides discounted prices to residents as provided in subsection 5.