

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from electronic originals
(may include minor formatting differences from printed original)

LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SECOND LEGISLATURE

FIRST REGULAR SESSION
December 1, 2004 to March 30, 2005

FIRST SPECIAL SESSION
April 4, 2005 to June 18, 2005

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
JUNE 29, 2005

THE GENERAL EFFECTIVE DATE FOR
FIRST SPECIAL SESSION
NON-EMERGENCY LAWS IS
SEPTEMBER 17, 2005

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

Penmor Lithographers
Lewiston, Maine
2005

includes reasonable repackaging for more convenient legitimate medical use.

See title page for effective date.

CHAPTER 253

H.P. 942 - L.D. 1359

An Act To Amend the Maine Health Data Organization Statutes and To Extend the Operation of the Maine Health Data Processing Center

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

Whereas, the statute authorizing the Maine Health Data Processing Center will be repealed September 1, 2005 unless this bill takes effect prior to September 1, 2005; and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. 10 MRSA §691, as enacted by PL 2001, c. 456, §1, is amended to read:

§691. Repeal

This chapter is repealed September 1, ~~2005~~ 2009.

Sec. 2. 22 MRSA §8702, sub-§4, as amended by PL 2003, c. 469, Pt. C, §17 and c. 689, Pt. B, §6, is further amended to read:

4. Health care facility. "Health care facility" means a public or private, proprietary or not-for-profit entity or institution providing health services, including, but not limited to, a radiological facility licensed under chapter 160, a health care facility licensed under chapter 405 or certified under chapter 405-D, an independent radiological service center, a federally qualified health center, rural health clinic or rehabilitation agency certified or otherwise approved by the Division of Licensing and Certification within the Department of Health and Human Services, a home health care provider licensed under chapter 419, an assisted living program or a residential care facility licensed under chapter 464 1663, a hospice provider licensed under chapter 1681, a retail store drug outlet licensed under Title 32, chapter 117, a state institution

as defined under Title 34-B, chapter 1 and a mental health facility licensed under Title 34-B, chapter 1.

Sec. 3. 22 MRSA §8703, sub-§2, ¶A, as amended by PL 2003, c. 264, §1, is further amended to read:

A. The Governor shall appoint 18 board members in accordance with the following requirements. Appointments by the Governor are not subject to review or confirmation.

(1) Four members must represent consumers. For the purposes of this section, "consumer" means a person who is not affiliated with or employed by a 3rd-party payor, a provider or an association representing those providers or those 3rd-party payors.

(2) Three members must represent employers. One member must be chosen from a list provided by a health management coalition in this State.

(3) Two members must represent 3rd-party payors chosen from a list provided by a statewide organization representing 3rd-party payors.

(4) Nine members must represent providers. Two provider members must represent hospitals chosen from a list of ~~at least 5 current hospital representatives~~ provided by the Maine Hospital Association. Two provider members must be physicians or representatives of physicians, one chosen from a list of ~~at least 5 nominees~~ provided jointly by the Maine Medical Association and one chosen from a list provided by the Maine Osteopathic Association. One provider member must be a ~~chiropractor~~ doctor of chiropractic chosen from a list provided by a statewide chiropractic association. One provider member must be a representative, chosen from a list provided by the Maine Primary Care Association, of a federally qualified health center. One provider member must be a pharmacist chosen from a list provided by the Maine Pharmacy Association. One provider member must be a mental health provider chosen from a list provided by the Maine Association of Mental Health Services. One provider member must represent a home health care company.

Sec. 4. 22 MRSA §8703, sub-§3, as amended by PL 2001, c. 457, §6, is further amended to read:

3. Terms of office. The terms of office of board members are determined under this subsection.

A. The terms of board members appointed by the Governor are determined as follows.

(1) Initial terms are staggered. One consumer, one employer, one 3rd-party payor and 3 providers shall serve one-year terms. Two consumers, one employer, one 3rd-party payor and 3 providers shall serve 2-year terms.

(2) After the initial terms, members appointed by the Governor shall serve full ~~2-year~~ 3-year terms and shall continue to serve until their successors have been appointed.

(3) Board members may serve 3 full terms consecutively.

B. The terms of departmental board members are ~~2-year~~ 3-year terms. Departmental board members may serve an unlimited number of terms.

Sec. 5. 22 MRSA §8704, sub-§7, as amended by PL 2003, c. 469, Pt. C, §25, is further amended to read:

7. Annual report. The board shall prepare and submit an annual report on the operation of the organization and the Maine Health Data Processing Center as authorized in Title 10, section 681, including any activity contracted for by the organization, ~~and on health care trends~~ to the Governor and the joint standing committee of the Legislature having jurisdiction over health and human services matters no later than February 1st of each year. The report must include an annual accounting of all revenue received and expenditures incurred in the previous year and all revenue and expenditures planned for the next year. The report must include a list of persons or entities that requested data from the organization in the preceding year with a brief summary of the stated purpose of the request.

Sec. 6. 22 MRSA §8706, sub-§2, ¶B, as repealed and replaced by PL 1997, c. 525, §3, is amended to read:

B. Reasonable user fees must be charged on a sliding scale for the right to access and use the health data and information available from the organization. Fees may be charged for services provided to the department on a contractual basis. ~~Fees must be waived for the Bureau of Insurance.~~ Fees may be reduced or waived for users that demonstrate a plan to use the data or information in research of general value to the

public health or inability to pay the scheduled fees, as provided by rules adopted by the board.

Sec. 7. 22 MRSA §8711, sub-§2, as amended by PL 1999, c. 353, §16, is repealed.

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

Effective May 31, 2005.

CHAPTER 254

S.P. 469 - L.D. 1342

An Act Reducing Oversight Expense for Decommissioning Nuclear Power Plants To Benefit Electric Ratepayers

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

PART A

Sec. A-1. 35-A MRSA c. 43, sub-c. 2, as amended, is repealed.

Sec. A-2. 35-A MRSA c. 43, sub-c. 6 is enacted to read:

SUBCHAPTER 6

POST-DECOMMISSIONING OVERSIGHT

FEES

§4395. State assessment

Any licensee operating an interim spent fuel storage facility in this State shall pay a fixed annual fee to cover all present and reasonably foreseeable future state fees, costs and assessments with respect to the licensee, including, but not limited to: the costs of any commission investigation; the commission's participation in wholesale rate proceedings; safety, radiation and environmental monitoring; and security oversight-related costs. This annual fee consolidates the various fees and assessments imposed by the State on the licensee. The amount of the fixed payment is as follows:

1. September 1, 2005 to December 31, 2005. September 1, 2005 to December 31, 2005, \$90,000;

2. Calendar years 2006 and 2007. Calendar years 2006 and 2007, \$360,000 per year;

3. Calendar year 2008. Calendar year 2008, \$296,667; and