

MAINE STATE LEGISLATURE

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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

2. A representative of an association of licensed veterinarians;
3. A medical specialist in infectious diseases;
4. A pediatrician;
5. A medical pharmacologist with expertise in antibiotics use;
6. An animal husbandry specialist from the University of Maine or the University of Maine Cooperative Extension;
7. A representative of a group of citizens or scientists concerned with the continued efficacy of antibiotics; and
8. The Director of the Division of Purchases within the Department of Administrative and Financial Services or the director's designee.

The commissioner and the director shall consult with the study group in preparing a report and developing recommendations; and be it further

Sec. 2. Report. Resolved: That, no later than January 15, 2006, the commissioner and director shall report to the Joint Standing Committee on Agriculture, Conservation and Forestry and the Joint Standing Committee on Health and Human Services. In their report, the commissioner and director shall summarize the discussions of the study group and present any recommendations for policy statements or actions by the State to address the issue of the efficacy of antibiotics in human medicine as it may be affected by the use of antibiotics in animal agriculture; and be it further

Sec. 3. Authority to report out legislation. Resolved: That the Joint Standing Committee on Agriculture, Conservation and Forestry may report out legislation to the Second Regular Session of the 122nd Legislature pertaining to the use of antibiotics in animal agriculture. The Joint Standing Committee on Health and Human Services may report out legislation to the Second Regular Session of the 122nd Legislature pertaining to the use of antibiotics in human medicine.

See title page for effective date.

CHAPTER 83

H.P. 437 - L.D. 604

Resolve, Directing the Department of Health and Human Services To Study Initiatives for Local Pharmacies Participating in the MaineCare Program

Sec. 1. Study of initiatives for local pharmacies. Resolved: That the Department of Health and Human Services shall study access to drugs in state-sponsored programs and study initiatives for local pharmacies participating in the MaineCare program. The department shall involve interested parties, advocates and providers. The study of initiatives must include a study of telepharmacy in rural areas, copayments in the MaineCare program, MaineCare dispensing fees in local pharmacies, MaineCare shipping and handling requirements for specialty pharmacies and MaineCare policies for mail order and using local pharmacies with regard to maintenance medications, review and maximization of the rural pharmacy incentive program, first-time dispensing of medications, refill policies and 90-day dispensing of medications. The Department of Health and Human Services shall report to the Joint Standing Committee on Health and Human Services by September 15, 2005 on the telepharmacy initiative and by January 15, 2006 on all initiatives.

See title page for effective date.

CHAPTER 84

H.P. 972 - L.D. 1408

Resolve, Directing the Air Toxics Advisory Committee To Review the Status of Toxic Emissions from Waste-to-energy Facilities in the State and Recommend Actions Aimed at Reducing and Monitoring These Emissions

Sec. 1. Provide emissions data. Resolved: That the Department of Environmental Protection shall provide emissions data to the Air Toxics Advisory Committee that include information on emissions of hazardous air pollutants from Maine's 4 waste-to-energy facilities; and be it further

Sec. 2. Subcommittee formed. Resolved: That the Department of Environmental Protection shall form a subcommittee of the Air Toxics Advisory Committee to consider the toxic and other emissions

from waste-to-energy facilities. The subcommittee must be composed of representatives of differing viewpoints on the State's policy regarding waste-to-energy facilities; and be it further

Sec. 3. Funding. Resolved: That the Department of Environmental Protection may also receive funds from other sources to assist in funding the costs of the subcommittee; and be it further

Sec. 4. Reporting date established. Resolved: That the Commissioner of Environmental Protection shall report to the Joint Standing Committee on Natural Resources by February 15, 2006 on the recommendations made by the Air Toxics Advisory Committee regarding toxic air emissions and the Department of Environmental Protection's next steps planned to address toxic air emissions.

See title page for effective date.

CHAPTER 85

H.P. 1060 - L.D. 1515

Resolve, To Establish a Responsive, Community-based, Cost-effective and Comprehensive Adult Mental Health System

Sec. 1. AMHI Consent Decree Plan and system transformation plan. Resolved: That the Department of Health and Human Services shall ensure that the plan presented for court approval to achieve compliance with the Augusta Mental Health Institute Consent Decree Plan and that the system transformation plan as referenced in Public Law 2005, chapter 12, Part XXX are consumer-directed, community-based and comprehensive. Any plan development must be done in collaboration with a working group inclusive of consumers, families, providers and advocates. The plan must address, at a minimum, service delivery structures, service options, financing of those services, quality assurance and quality improvement strategies to be reflected as part of the management of the system. The plan must also address the development of a local system to ensure continuity of care and to identify utilization management strategies for all components of the mental health system as referenced in section 3; and be it further

Sec. 2. System values and standards. Resolved: That the system for adult mental health services must be based on those values and standards already adopted by this State so that:

1. All services and support promote recovery and resiliency;

2. Planning and services are consumer-driven, holistic, flexible and strength-based;

3. The system is stigma-reducing and promotes a positive image of mental health care and treatment and consumers of mental health care;

4. Services are based in research or evaluation of efficacy;

5. Performance improvement decisions are based on data;

6. The system works in collaboration with public and private partners;

7. The system is culturally and linguistically competent and includes respect and inclusion for all consumers regardless of race, ethnicity, disability, sexual orientation or economic challenges;

8. The system is outcome-based and demands cost effectiveness, accountability, standards and best practices;

9. Grievance procedures are readily accessible and transparent;

10. Services are locally responsive and promote an individual's integration into community life;

11. System care is integrated with primary health care; and

12. Consumers have a choice of providers and services; and be it further

Sec. 3. Service reform and improvement. Resolved: That the mental health system must reflect at a minimum the following components:

1. Urgent care, including crisis services;

2. Inpatient services;

3. Outpatient clinical and medication management services;

4. Community support services;

5. Housing;

6. Residential support services;

7. Evidence-based practices, including, but not limited to, those currently identified by the federal Substance Abuse and Mental Health Services Administration;

8. Peer counseling and peer support services;

9. Vocational supports;