

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SIXTH LEGISLATURE

FIRST REGULAR SESSION
December 5, 2012 to July 10, 2013

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
OCTOBER 9, 2013

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

Augusta, Maine
2013

**CHAPTER 24
H.P. 12 - L.D. 8**

Resolve, Directing the Department of Health and Human Services To Provide Coverage under the MaineCare Program for Home Support Services for Adults with Intellectual Disabilities or Autistic Disorder

Sec. 1. Coverage for home support under the MaineCare program. Resolved: That the Department of Health and Human Services shall request approval from the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to amend the Centers for Medicare and Medicaid Services waiver to allow the Department of Health and Human Services to amend the rules on the MaineCare program in Chapter 101, MaineCare Benefits Manual, Chapter II, Section 29 and Chapter III, Section 29 to add home support as a covered service. For the purposes of the waiver application, home support is direct support provided to a member in the member's home by a direct support professional to improve and maintain the member's ability to live as independently as possible in the member's home and primarily consists of habilitative training and assistance with self-care, personal development and well-being; and be it further

Sec. 2. Rulemaking. Resolved: Upon approval of a waiver amendment pursuant to section 1, the Department of Health and Human Services shall adopt rules to amend the rules on the MaineCare program in Chapter 101, MaineCare Benefits Manual, Chapter II, Section 29 and Chapter III, Section 29 to add home support as a covered service. Rules adopted pursuant to this section must maintain the cap for services at an annual aggregate amount of \$23,771 after the addition of home support as a covered service. Rules adopted pursuant to this section to amend Chapter II, Section 29 are routine technical rules as defined in the Maine Revised Statutes, Title 5, chapter 375, subchapter 2-A. Rules adopted pursuant to this section to amend Chapter III, Section 29 are major substantive rules as defined in Title 5, chapter 375, subchapter 2-A.

See title page for effective date.

**CHAPTER 25
H.P. 263 - L.D. 388**

Resolve, To Improve the Participation Rate of Prescribers in the Controlled Substances Prescription Monitoring Program

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

Whereas, prescription drug abuse is a serious and increasing problem in this State; and

Whereas, the Controlled Substances Prescription Monitoring Program is an important tool in reducing the incidence of prescription drug addiction, and the work of developing a process to increase the registration of prescribers in the program must begin as soon as possible; 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

Sec. 1. Substance Abuse Services Commission to develop process to increase prescriber participation and promote use. Resolved: That the Substance Abuse Services Commission, established in the Maine Revised Statutes, Title 5, section 12004-G, subsection 13-C and referred to in this resolve as "the commission," shall develop a process to increase prescriber participation in the Controlled Substances Prescription Monitoring Program, established in Title 22, section 7248 and referred to in this resolve as "the program," through professional licensing boards. The commission shall consult with the licensing boards of prescribers of controlled substances, the Department of Health and Human Services, Office of Substance Abuse and any other interested parties to develop a system that automatically enrolls prescribers in the program at the time of licensing or renewal of a license. The commission shall also develop strategies to promote the use of the program by prescribers; and be it further

Sec. 2. Report. Resolved: That the commission shall report its findings and recommendations pursuant to section 1, along with any suggested legislation, to the Joint Standing Committee on Health and Human Services by January 1, 2014.