

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

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Augusta, Maine 2013

B. One person representing a statewide organization of medical professionals, one person representing a statewide voluntary nonprofit health organization that represents cancer patients, one person who possesses expertise in cancer research or epidemiology and one person who possesses expertise in the subject matter of the study; and

3. The Director of the Maine Center for Disease Control and Prevention within the Department of Health and Human Services or the director's designee; and be it further

Sec. 3. Chairs. Resolved: That the firstnamed Senate member is the Senate chair and the firstnamed House of Representatives member is the House chair of the commission; and be it further

Sec. 4. Appointments; convening of commission. Resolved: That all appointments must be made no later than 10 days following the effective date of this resolve. The appointing authorities shall notify the Executive Director of the Legislative Council once all appointments have been made. The chairs of the commission shall call and convene the first meeting of the commission within 15 days of the effective date of this resolve. If a majority of but not all appointments have been made within 10 days of the effective date of this resolve, the chairs may request authority and the Legislative Council may grant authority for the commission to meet and conduct its business; and be it further

Sec. 5. Meetings. Resolved: That the commission is authorized to meet up to 4 times to accomplish its duties; and be it further

Sec. 6. Duties. Resolved: That the commission shall review the State's above-average rates of cancer incidence and mortality and the State's current cancer prevention, detection and treatment goals and priorities.

The commission shall gather information and data from public and private entities as necessary to:

1. Identify or review the State's current priorities and goals to reduce the incidence of and mortality from cancer;

2. Identify the types of cancer with the highest incidence and mortality in the State, including the types of cancer whose incidence and mortality rates differ the most from national averages;

3. Identify the risk factors, including preventable lifestyle risk factors such as tobacco use, diet, exercise and obesity, related to high relative rates of the incidence of and mortality from cancer;

4. Identify the extent to which barriers to health care in the State contribute to cancer mortality;

5. Make recommendations for legislative strategies to reduce the State's cancer incidence and mortality; and

6. Make recommendations for how current state programs could further assist citizens through education and cancer prevention programs; and be it further

Sec. 7. Cooperation. Resolved: That the Commissioner of Health and Human Services and the Director of the Maine Center for Disease Control and Prevention within the Department of Health and Human Services, the Commissioner of Administrative and Financial Services and the Commissioner of Education, and any other relevant department, shall provide information and data to the commission as necessary for its work, within existing resources; and be it further

Sec. 8. Staff assistance. Resolved: That the Legislative Council may provide necessary staffing services to the commission; and be it further

Sec. 9. Report. Resolved: That, no later than December 4, 2013, the commission shall submit a report that includes its findings and recommendations, including suggested legislation, to the Joint Standing Committee on Health and Human Services in the Second Regular Session of the 126th Legislature; and be it further

Sec. 10. Outside funding. Resolved: That the commission shall seek funding contributions to fund 50% of the costs of the study. All funding is subject to approval by the Legislative Council in accordance with its policies. If sufficient contributions to fund 50% of the study have not been received within 30 days after the effective date of this resolve, no meetings are authorized and no expenses of any kind may be incurred or reimbursed.

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

Effective July 16, 2013.

CHAPTER 78

S.P. 331 - L.D. 986

Resolve, To Establish the Commission To Study Long-term Care Facilities

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

Whereas, it is necessary that this legislation take effect immediately in order to allow sufficient time for the Commission To Study Long-term Care Facilities to conduct its work; 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. Commission To Study Long-term Care Facilities established. Resolved: That, notwithstanding Joint Rule 353, the Commission To Study Long-term Care Facilities, referred to in this resolve as "the commission," is established; and be it further

Sec. 2. Commission membership. Resolved: That the commission consists of 11 members appointed as follows:

1. Two members of the Senate appointed by the President of the Senate, including members from each of the 2 parties holding the largest number of seats in the Legislature;

2. Three members of the House of Representatives appointed by the Speaker of the House, including members from each of the 2 parties holding the largest number of seats in the Legislature; and

3. Six members appointed by the Governor who possess expertise in the subject matter of the study, as follows:

A. The director of a long-term care ombudsman program described under the Maine Revised Statutes, Title 22, section 5106, subsection 11-C;

B. The director of a statewide association representing long-term care facilities and one representative of a 2nd association of owners of long-term care facilities;

C. A person who serves as a city manager of a municipality in the State;

D. A person who serves as a director or who is an owner or administrator of a nursing facility in the State; and

E. A representative of the Governor's office or the Governor's administration; and be it further

Sec. 3. Chairs; subcommittees. Resolved: That the first-named Senate member is the Senate chair and the first-named House of Representatives member is the House chair of the commission. The chairs of the commission are authorized to establish subcommittees to work on the duties listed in section 5 and to assist the commission. The subcommittees must be composed of members of the commission and interested persons who are not members of the commission and who volunteer to serve on the subcommittees without reimbursement. Interested persons may include representatives of nursing facilities with a high percentage of residents whose care is reimbursed through the MaineCare program, individuals with specialized knowledge in implementing an acuity-based staffing system, individuals with expertise in acuitybased reimbursement systems, a representative of an agency that provides services to the elderly and any other persons with experience in nursing facility care; and be it further

Sec. 4. Appointments; convening of commission. Resolved: That all appointments must be made no later than 30 days following the effective date of this resolve. The appointing authorities shall notify the Executive Director of the Legislative Council once all appointments have been completed. After appointment of all members, the chairs shall call and convene the first meeting of the commission. If 30 days or more after the effective date of this resolve a majority of but not all appointments have been made, the chairs may request authority and the Legislative Council may grant authority for the commission to meet and conduct its business; and be it further

Sec. 5. Duties. Resolved: That the commission shall study the following issues and the feasibility of making policy changes to the long-term care system:

1. Funding for long-term care facilities, including the development of an acuity-based reimbursement system as proposed in Legislative Document 1245 of the 126th Legislature, "Resolve, Directing the Department of Health and Human Services To Create a More Equitable, Transparent Resource Allocation System for Nursing Facilities Based on Residents' Needs," and the development of a pay-for-performance program to encourage and reward strong performance by nursing facilities as proposed in Legislative Document 928 of the 126th Legislature, "An Act To Improve MaineCare Nursing Home Reimbursement To Preserve Access and Promote Quality";

2. Staffing and regulatory requirements, including the development of minimum staffing requirements based on a 24-hour time period as proposed in Legislative Document 1246 of the 126th Legislature, "An Act To Promote Greater Staffing Flexibility without Compromising Safety or Quality in Nursing Facilities";

3. Collaborative agreements with critical access hospitals for the purpose of sharing resources;

4. Reimbursement mechanisms to reimburse facilities for which the MaineCare program is the payor for a high percentage of the residents as proposed in Legislative Document 928 of the 126th Legislature, "An Act To Improve MaineCare Nursing Home Reimbursement To Preserve Access and Promote Quality";

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5. The viability of privately owned facilities in rural communities; and

6. The impact on rural populations of nursing home closures.

In performing the study the commission shall review the final report of the Commission to Examine Rate Setting and the Financing of Maine's Long-term Care Facilities established by Resolve 1997, chapter 81; and be it further

Sec. 6. Staff assistance. Resolved: That the Legislative Council shall provide necessary staffing services to the commission; and be it further

Sec. 7. Information and assistance. Resolved: That the Commissioner of Health and Human Services, the State Auditor and the State Budget Officer shall provide information and assistance to the commission as required for its duties; and be it further

Sec. 8. Report. Resolved: That, no later than December 4, 2013, the commission shall submit a report that includes its findings and recommendations, including suggested legislation, for presentation to the Second Regular Session of the 126th Legislature.

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

Effective July 16, 2013.