

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SEVENTH LEGISLATURE

FIRST REGULAR SESSION
December 3, 2014 to July 16, 2015

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
OCTOBER 15, 2015

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

Augusta, Maine
2015

Services shall amend Rule Chapter 119, Regulations Governing the Licensing and Functioning of Home Health Care Services, in Chapter 7, Section 7.B.2 to allow nursing services to be provided by new nursing graduates who have successfully completed a home health care orientation program approved by the department prior to commencing independent home health care nursing practice. The orientation, provided by the agency employing the nursing graduate, must include all components of the home health agency core orientation and, in addition, a standard orientation curriculum that includes, but is not limited to, intravenous therapy including central and peripherally inserted central catheter line management, comprehensive health assessment, chronic disease self-management strategies, goal setting, patient-centered care, wound care assessment and techniques, evidence-based practice in clinical care, interprofessional collaborative practice, critical thinking and clinical judgment, health care ethics and medication assessment, reconciliation and administration and management in the community setting.

See title page for effective date.

**CHAPTER 34
H.P. 70 - L.D. 87**

**Resolve, To Implement the
Recommendations of the
Commission To Continue the
Study of 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, the people of the State need and deserve a variety of well-planned and financially stable long-term care services in home-based and community-based care settings and in nursing facilities in their communities; and

Whereas, recent closures of nursing facilities, in particular in rural and underserved areas of the State, have had a significant impact on Maine families and communities; and

Whereas, in order to provide high-quality care to Maine's elderly and disabled persons and to maintain access to services across the State, the Legislature must take immediate action to continue a thoughtful and thorough planning process; 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 preserva-

tion of the public peace, health and safety; now, therefore, be it

Sec. 1. Amendment of Principles of Reimbursement for Nursing Facilities. Resolved: That the Department of Health and Human Services shall amend Rule Chapter 101, MaineCare Benefits Manual, Chapter III, Section 67, Principles of Reimbursement for Nursing Facilities as follows.

1. Continuing education for direct care staff. The rule must be amended so that the cost of continuing education for direct care staff is included as a direct care cost component rather than a routine cost component.

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

Effective June 23, 2015.

**CHAPTER 35
H.P. 739 - L.D. 1076**

**Resolve, Directing the
Department of Health and
Human Services To Increase
Public Awareness about and
Access to Federal Resources
Related to Vaccine Injuries**

Sec. 1. Department of Health and Human Services directed to increase public awareness about and access to federal resources related to vaccine injuries. Resolved: That the Department of Health and Human Services shall create a link on the department's publicly accessible website to existing federal resources related to vaccine injuries, including but not limited to information about the:

1. National Vaccine Injury Compensation Program of the United States Department of Health and Human Services, Health Resources and Services Administration; and

2. Vaccine Adverse Event Reporting System co-sponsored by the United States Centers for Disease Control and Prevention and the United States Food and Drug Administration, agencies of the United States Department of Health and Human Services.

See title page for effective date.