

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND THIRTIETH LEGISLATURE

FIRST REGULAR SESSION
December 2, 2020 to March 30, 2021

FIRST SPECIAL SESSION
April 28, 2021 to July 19, 2021

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
JUNE 29, 2021

THE GENERAL EFFECTIVE DATE FOR
FIRST SPECIAL SESSION
NON-EMERGENCY LAWS IS
OCTOBER 18, 2021

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

Augusta, Maine
2021

**ETHICS AND ELECTION PRACTICES,
COMMISSION ON GOVERNMENTAL**

**Governmental Ethics and Election Practices -
Commission on 0414**

Initiative: Provides ongoing allocations for expenditures related to administering and enforcing lobbyist disclosure requirements, including the costs of obtaining, maintaining and upgrading technology to facilitate disclosure of lobbying and campaign finance information to the public.

OTHER SPECIAL REVENUE FUNDS	2021-22	2022-23
All Other	\$31,350	\$26,350
OTHER SPECIAL REVENUE FUNDS TOTAL	<u>\$31,350</u>	<u>\$26,350</u>

See title page for effective date.

**CHAPTER 115
H.P. 577 - L.D. 772**

An Act To Permit Naloxone Possession, Prescription, Administration and Distribution in Public and Private Schools

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

Sec. 1. 20-A MRSA §6307 is enacted to read:

§6307. Naloxone hydrochloride possession, prescription, administration and distribution

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Collaborative practice agreement" means a written and signed agreement between a physician licensed in this State or a school health advisor and a school nurse that provides for the possession, prescription, administration and distribution of naloxone hydrochloride by the physician or school health advisor and administration of naloxone hydrochloride by the school nurse or designated school personnel to students, staff or visitors during school or a school-sponsored activity or otherwise on school grounds under emergency circumstances involving an opioid overdose or apparent opioid overdose.

B. "Designated school personnel" means those employees, agents or volunteers of a school administrative unit or approved private school designated by a collaborative practice agreement who have completed the training required by the guidelines developed pursuant to subsection 8 to administer

naloxone hydrochloride to a student, staff member or visitor.

C. "Naloxone hydrochloride" means medication, in a noninjectable form, administered to reverse the effects of opioids in the emergency treatment of an opioid overdose.

D. "School" means a public or approved private school.

E. "School health advisor" means a physician or family or pediatric nurse practitioner appointed to act as a school health advisor pursuant to section 6402-A.

F. "School nurse" means a nurse appointed to serve as a school nurse pursuant to section 6403-A.

2. Collaborative practice agreement; adoption authorized. A school administrative unit or an approved private school may authorize adoption of a collaborative practice agreement for the purposes of stocking, possessing and administering naloxone hydrochloride as provided under this section. The administration of naloxone hydrochloride in accordance with this section is not the practice of medicine.

3. Collaborative practice agreement; authority. A collaborative practice agreement permits a physician licensed in this State or school health advisor to prescribe naloxone hydrochloride and direct a school nurse to administer naloxone hydrochloride in good faith to any student, staff member or visitor experiencing an apparent opioid overdose during school or a school-sponsored activity or otherwise on school grounds. Pursuant to a collaborative practice agreement, a physician licensed in this State or school health advisor may authorize the school nurse during school or a school-sponsored activity or otherwise on school grounds to designate designated school personnel to administer naloxone hydrochloride if the school nurse is not present when a student, staff member or visitor experiences a suspected opioid overdose.

4. Collaborative practice agreement; terms and provisions. A collaborative practice agreement must include the following information:

A. Name and address of the school;

B. Identification and signatures of the physician or school health advisor and school nurse who are parties to the collaborative practice agreement, the dates the agreement is signed by each party and the beginning and end dates of the period of time within which the agreement is in effect; and

C. Any other information considered appropriate by the physician or school health advisor and school nurse.

5. Use of naloxone hydrochloride without a collaborative practice agreement. If a collaborative practice agreement has not been adopted pursuant to

subsection 2, the governing body of a school administrative unit or an approved private school may authorize a school nurse or other licensed health care professional whose scope of practice includes administration of naloxone to:

A. Stock and possess naloxone hydrochloride prescribed by a legally authorized individual; and

B. Administer naloxone hydrochloride prescribed by a legally authorized individual to any student, staff member or visitor that the school nurse or other licensed health care professional, based on the school nurse's or other licensed health care professional's professional judgment, suspects to be experiencing an opioid overdose.

The administration of naloxone hydrochloride in accordance with this subsection is not the practice of medicine.

6. **Manufacturer or supplier arrangement.** A school administrative unit or an approved private school may enter into an arrangement with a manufacturer of naloxone hydrochloride or a 3rd-party supplier of naloxone hydrochloride to obtain naloxone hydrochloride at fair market prices, reduced prices or no cost.

7. **Purchase from licensed pharmacies.** A collaborative practice agreement under this section may provide that a school administrative unit or an approved private school may purchase naloxone hydrochloride from a pharmacy licensed in this State.

8. **Guidelines.** By January 1, 2022, and as needed after that date, the department in consultation with the Department of Health and Human Services shall develop and make available to all schools guidelines for the management of opioid overdose during school or a school-sponsored activity or otherwise on school grounds. The guidelines must include, but are not limited to:

A. Education and training for school personnel on recognition of opioid overdose, rescue breathing and the administration of naloxone hydrochloride; and

B. Procedures for responding to opioid overdose.

See title page for effective date.

**CHAPTER 116
H.P. 583 - L.D. 778**

An Act To Enable Electronic Reporting of Suspected Child Abuse and Neglect for Certain Mandated Reporters

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

Sec. 1. 22 MRSA §4012, sub-§1, as amended by PL 2011, c. 402, §2, is further amended to read:

1. Immediate report. Reports regarding abuse or neglect must be made immediately by telephone to the department unless otherwise specified in this subsection and must be followed by a written report within 48 hours if requested by the department.

~~Hospitals, medical personnel~~ Medical professionals, hospitals and hospital staff, school personnel and law enforcement personnel may submit emergency reports through password-protected e-mail submissions. A faxed report may also be accepted when preceded by a telephone call informing the department of the incoming fax transmission electronically. The department shall provide a portal through which these electronic reports may be submitted that is linked to the department's comprehensive child welfare information system.

See title page for effective date.

**CHAPTER 117
H.P. 585 - L.D. 780**

An Act Regarding Uncontrolled Hazardous Substance Sites

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

Sec. 1. 38 MRSA §1362, sub-§1, ¶F, as amended by PL 1985, c. 746, §32, is further amended to read:

F. Any imminently hazardous chemical substance or mixture with respect to which the Administrator of the United States Environmental Protection Agency has taken action pursuant to the United States Toxic Substances Control Act, Section 7; ~~and~~

Sec. 2. 38 MRSA §1362, sub-§1, ¶G, as amended by PL 1989, c. 878, Pt. B, §42, is further amended to read:

G. Waste oil as defined in section 1303-C; and

Sec. 3. 38 MRSA §1362, sub-§1, ¶H is enacted to read:

H. Any substance defined as a hazardous substance or a pollutant or contaminant under the United States Comprehensive Environmental Response, Compensation, and Liability Act of 1980, 42 United States Code, Section 9601.

Sec. 4. 38 MRSA §1367-B, as enacted by PL 1991, c. 811, §4 and affected by §7, is amended to read:

§1367-B. Limited exemption exemptions from liability for state or local governmental entities