

MAINE STATE LEGISLATURE

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There was considerable discussion about the amounts expended to promote unionization, and how often prohibited practices occurred.

1511 AN ACT TO REQUIRE THE DEPARTMENT OF HUMAN SERVICES TO CONDUCT DEMONSTRATIONS OF ADULT DAY CARE AND OTHER SERVICES THROUGH LONG-TERM CARE FACILITIES Sen. Bustin OTP-A
HSE-ENACT.
SEN-ENACT.
GOV-SIGNED
PL 1983, c. 545

SUMMARY: The bill required the Bureau of Maine's Elderly to select and fund programs for adult day care offered through existing long-term-care facilities. These programs would offer an alternative to institutionalization, and provide assistance to family members so they can work or have respite from in-home care. The services provided during the day could include food, medication, laundry, various forms of therapy and other supplemental services. The programs would serve 32 frail elderly in different areas of the state.

Since this is a demonstration project, the Commissioner of Human Services is to make a report on the project to the Health and Institutional Services Committee and the Appropriations Committee before January 31, 1985.

The Committee Amendment (S-139) clarified some terms used in the bill, and required that the assessment of eligibility be done by DHS, rather than by Area Agencies on Aging. It also reduced the first year appropriation, to be 75% of the second-year appropriation.

The Senate Amendment (S-241) reduced both appropriations even further.

1538 AN ACT CONCERNING SMOKING IN NURSING HOMES Sen. Bustin HSE-ENACT.
SEN-ENACT.
GOV-SIGNED
PL 83, c. 293

SUMMARY: In this new draft of LD 1254, the bill was simplified to limit smoking to designated areas of nursing homes. "Patients" were also called "residents."

1539 AN ACT TO ESTABLISH THE THIRD-PARTY PRESCRIPTION PROGRAM ACT Sen. Twitchell HSE-ENACT.
SEN-ENACT.
GOV-SIGNED
PL 83, c. 405

The new draft of LD 621 clarified some provisions, for example including other programs administered by the Department of Human Services besides the Drugs for the Elderly Program, and simplified the section on denial of payment. It established a reimbursement rate of \$3.40 (the Blue Cross rate), to be indexed to the Consumer Price Index and changed annually but not by more than 10%. Other previous sections on fiduciary and bonding requirements, cancellation, interest, penalties, etc., were eliminated.

One House Amendment (H-209) tied the reimbursement rate to the state's Medicaid dispensing fee; this was not adopted. House Amendment H-271 deleted the legislative intent section, and changed the reimbursement section completely by specifying only that 3rd party prescription programs are prohibited from charging a registration fee or other fixed charges except to cover expenses of equipment and materials.

1542 AN ACT TO REQUIRE PHYSICIANS Sen. Bustin HSE-ENACT.
CHIROPRACTORS AND PODIATRISTS SEN-ENACT.
TO POST THEIR POLICY REGARDING GOV-SIGNED
THEIR ACCEPTANCE OF MEDICARE PL 83, c. 325
ASSIGNMENTS

SUMMARY: The new draft of LD 811 required the posting of information on the acceptance of Medicare assignment by allopathic and osteopathic physicians, chiropractors and podiatrists after January 1, 1984.

1550 AN ACT TO LICENSE HOME HEALTH Sen. Bustin MAJ-OTP-A
CARE SERVICES MIN-ONTP
HSE-ENACT.
SEN-ENACT.
GOV-SIGNED
PL 83, c. 570

SUMMARY: The bill required that as of July 1, 1984, all home health entities would have to be licensed by the Department of Human Services. It defined the types of licenses and their provisions, standards and fees for licensure, and those excluded from licensure, such as sole practitioners, family members and public health nurses. It also established a Home Care Council.

There was much discussion about the concept of licensing, how and whether it would affect the quality of services, and its costs, and also whether the definition of the services provided was too broad (as DHS contended).

The Committee Amendment (S-180) clarified the definitions section and established a new category, "health care provider." The exclusions from licensing were also broadened, and a longer period was allowed for the development of the licensing standards. Because DHS agreed to develop a Home and Long-term Care Committee, the more limited Home Care Council provided in the bill was deleted.

The Senate Amendment (S-202) added a fiscal note to the bill; the House Amendment (H-403) deleted the department's authority to void a conditional license. Another House Amendment (H-370), which added an appropriation, was not adopted.