

STATE OF MAINE

5

ONE HUNDRED AND ELEVENTH LEGISLATURE

FIRST REGULAR SESSION

JOINT STANDING COMMITTEE ON

Health & Institutional Services

BILL SUMMARY



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required that the Commission have full access to information, and that it publicize and distribute its findings and recommendations throughout the state.

The Senate Amendment (S-250) removed the emergency provisions on the bill, and reduced the appropriation.

 1689
 AN ACT TO ESTABLISH REIMBURSE- Sen. Clark
 LV/WD

 MENT PRINCIPLES GOVERNING NON HSE-ACCPT LV/WD

 PROFIT HOSPITAL AND MEDICAL
 SEN-ACCPT LV/WD

 SERVICE ORGANIZATION AGREE-`
 MENTS WITH RURAL HEALTH

 CENTERS
 CENTERS

SUMMARY: The bill would have required that Blue Cross and Blue Shield of Maine reimburse rural health centers for the cost of providing care at the same rate provided under the Medicare and Medicaid programs.

The bill was withdrawn at the public hearing.

1717	AN ACT TO AMEND THE STATUTES RELATING TO FLUORIDATION	Sen. Bustin	HSE-ENACT. SEN-ENACT. GOV SIGNED PL 83, c. 463
			IL 00, C. 400

SUMMARY: The new draft of LD 1146 established new definitions of water districts, to reflect the more complex voting procedure for authorizing the addition of fluoride, provided how the question of adding fluoride could be brought before the voters (a petition procedure similar to that for other state referenda), established the form of the question to be submitted to voters, and prohibited a vote on the addition of fluoride more often than every couple of years. The majority requirement for approval is retained for municipalities, towns and plantations.

1728	AN ACT TO LIMIT PAYMENTS TO	Sen. Bustin	HSE-ENACT
	HEALTH CARE INSTITUTIONS		SEN-ENACT
	WHICH ENGAGE PERSONS TO DEFEAT		GOV-S IGNED
	THE ORGANIZATION OF COLLECTIVE		PL 83, c. 473
	BARGAINING UNITS		, .

SUMMARY: The new draft of LD 1501 modified the language as to the Legislature's concern about restrictions on organization, and also acknowledged the right of employers to present information on unionization to their employees. It clarified the nature of "disallowed expenditures," and added that the Department would not withhold reimbursement until a final decision against the healthcare institution had been made. The fine for violating the reporting requirement was reduced.

A Senate Amendment (S-176) made a technical correction in the language.