MAINE STATE LEGISLATURE

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STATE OF MAINE

ONE HUNDRED AND THIRTEENTH LEGISLATURE FIRST REGULAR SESSION

JOINT STANDING COMMITTEE ON

HUMAN RESOURCES

BILL SUMMARY



JUNE 1987

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JOINT STANDING COMMITTEE BILL SUMMARIES JUNE 1987

This document is a compilation of the bill summaries prepared by this office for the Joint Standing Committees and Joint Select Committees of the Maine Legislature. The summaries are arranged by LD number under each committee.

All Adopted Amendments are listed, by paper number (e.g., H-584 or S-222), together with the sponsor if it is a floor amendment or the designation "COMMITTEE" if it is a committee amendment.

Final action for each bill is listed to the right of the title. If final House action and Senate action differ, both are listed.

Please let us know if you would prefer a different format or additional information and if the summaries are helpful.

Key to Committee Reports and Floor Action:

OTP Ought to Pass
OTP-ND Ought to Pass in New Draft
OTP-ND-NT Ought to Pass in New Draft, New Title
OTP-A Ought to Pass as Amended
ONTP Ought Not to Pass
LVWD Leave to Withdraw
INDEF PP Indefinitely Postponed

of Human Services to develop a prospective payment system for those facilities and report on the progress in developing that system by February 1, 1988.

LD 1786 AN ACT TO AUTHORIZE HOSPITALS TO USE MAGNETIC RESONANCE IMAGING DEVICES LOCATED IN PRIVATE PHYSICIANS' FACILITIES

NOT ACCEPTED

Sponsor: BOUTILIER, Rolde, Martin J, Pray Committee Report: Min. ND Rpt. of LD 1611

SUMMARY: The original bill sought to allow a magnetic resonance imaging device in a physician's office to be used to provide services to hospital inpatients, even though they were not purchased with certificate of need approval. The minority new draft would have replaced the original bill. It would have required new technologies costing over \$1,000,000 to receive a certificate of need regardless of where the equipment is located. It also would have exempted magnetic resonance devices acquired on or before July 1, 1987 and allowed those devices to serve hospital inpatients. It would have placed a moritorium on new certificates of need until March 1, 1988 and established a Technology Advisory Committee to assist the Department of Human Services to plan on a regional basis and establish criteria to determine what new technology is needed in which regions of the State.

LD AN ACT TO REQUIRE THE MAINE HEALTH CARE FINANCE NOT ACCEPTED COMMISSION TO RECOGNIZE THE COST OF PATIENT VOLUME CURRENTLY SERVED

Sponsor: ROLDE,

Committee Report: Min. ND Rpt. of LD 588

SUMMARY: The original bill sought to require the Health Care Finance Commission to recognize a hospital's volume increases as they actually occurred instead of after a two year wait. The new draft, a minority report, sought to accomplish the same purpose.

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