

MAINE STATE LEGISLATURE

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STATE OF MAINE
113TH LEGISLATURE
SECOND REGULAR SESSION



BILL SUMMARY
JOINT STANDING COMMITTEE
ON
HUMAN RESOURCES

MAY 1988

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**ONE HUNDRED AND THIRTEENTH LEGISLATURE
FIRST & SECOND SPECIAL SESSIONS
SECOND REGULAR SESSION**

**JOINT STANDING COMMITTEE
BILL SUMMARIES
MAY 1988**

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 for floor amendments. Final action is listed to the right of the title. If final House and Senate action differ, both are listed. Committee Reports and Floor Action are indicated as follows::

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

Each individual summary was prepared by the analyst assigned, as noted for each committee. But, this document was produced by the efforts of all the office staff, including Secretaries: Charlene Brann, Janet Jean, Earl Knox, Valarie Parlin; Research Assistant Hartley Palleschi. Finally, Secretary Lorette Knox, Legal Assistant Carolyn Chick, and Research Assistant Robert Dunn had special responsibilities in the preparation of the overall document.

Please give us your suggestions and comments on these summaries and tell us of any inaccuracies.

<u>SPONSOR(S)</u>	<u>COMMITTEE REPORT</u>	<u>AMENDMENTS ADOPTED</u>
GILL BRANNIGAN DIAMOND DELLERT	OTP-AM	S-487

SUMMARY

This bill amends Maine's AIDS law. The Committee amendment (S-487) replaces the bill, revises the title, and incorporates issues from other legislation which was before the committee concerning AIDS. The other bills have been withdrawn. This bill, as amended, makes the following changes to the laws concerning AIDS:

1. In anticipation of a test for the HIV antigen, the provisions of the law concerning a test for the presence of the HIV antibody have been expanded to include an HIV antigen test also.

2. Informed consent is required of all persons obtaining the HIV test. The amendment makes a basically technical change in the scope of the risks and benefits information offered to the person obtaining the test.

3. The current law states the circumstances under which HIV test results may be disclosed. The amendment broadens the law to allow the patient's physician to make the test results available to health care providers working directly with the patient and providing direct patient care, including those treating the patient for a condition other than AIDS. The amendment also establishes immunity for physicians disclosing test results under this subsection.

The amendment specifically includes the Department of Human Services as an agency authorized to receive test results and further defines and designates which employees or other designees of the Department of Corrections, the Department of Human Services and the Department of Mental Health and Mental Retardation may have access to HIV test results by limiting access to those who are responsible for the treatment or care of the person obtaining the test. The departments must designate positions or classes of persons who will have access to the test results and under what circumstances.

This amendment also allows the Bureau of Health to disclose HIV test results to other people when necessary to carry out its duties in preventing or diminishing the effect of communicable diseases.

Disclosure is also allowed as part of a medical record release if authorized under special provisions and in cases of accidental disclosure if specific conditions are met.

4. The amendment prohibits denial of health care for refusal to give consent to an HIV test.

5. The amendment establishes a procedure to obtain an HIV test result in cases where:

- A. A health care provider or an employee or patient of a health care facility is exposed to blood or body fluids of another;
- B. The exposure creates a significant risk of infection;
- C. The patient has been informed of the accidental exposure; and
- D. The patient has refused to give informed consent after being requested to do so.

A court order is required before the test may be given. Subsequent testing arising out of the same incident must follow the same established procedures.

6. A new section on medical records is enacted providing details on when HIV infection status information may be released.

7. The amendment amends the law concerning counseling, specifying when counseling is required. Both pretest and post-test counseling require personal discussion and a written memorandum. It specifically states that pretest and post-test counseling are required by insurers if they require a test. It also requires information concerning the reliability of the test to be made a part of the counseling.

8. It extends the prohibition on insurers which prevents them from asking a potential client if the client has ever had an HIV test or for the results of such a test to October 1, 1990.

9. The amendment establishes certain rights for employees or prospective employees in hiring or retention situations.

10. It broadens the penalty provisions to include violations of any section in the chapter, while making it clear that the penalty provisions do not preempt the Maine Tort Claims Act. It also closes any hearings related to the AIDS chapter, keeping that information confidential unless release is authorized.

11. It establishes special language to provide for the recovery of hospital costs incurred because of the requirement to conform with the United States Department of Health and Human Services Public Health Service Centers for Disease Control guidelines, requirements of the Joint Commission on Accreditation of Health Care Organizations, Occupational Safety and Health Administration standards, and other federal or state laws or rules relating to the disease of AIDS.

12. It amends the communicable disease laws to broaden the scope to include persons with an infectious condition who may not be diagnosed with an illness, specifically includes HIV infection as a dangerous communicable

disease, makes the definition of infected person more specific, establishes more detailed procedural safeguards for persons who are suspected of having a dangerous communicable disease and corrects an omission in the law not related to HIV infection.

13. The amendment requires the Department of Human Services to promulgate rules concerning notification of funeral directors or other authorized agents in charge of the disposition of dead human bodies in cases when the body has been diagnosed as having a communicable disease.

LD RESOLVE, Authorizing the Bureau of Health to Conduct a Time- RESOLVE
2422 Trend Study of Leukemia Incidence in Maine 109

<u>SPONSOR(S)</u>	<u>COMMITTEE REPORT</u>	<u>AMENDMENTS ADOPTED</u>
HOLT	OTP-AM	H-598
PINES		
KANY		

SUMMARY

This resolve authorized the Bureau of Health to Conduct a Time-Trend Study of Leukemia Incidence in Maine. It was amended (H-598) to require an interim report by March 1, 1989, and a final report by January 1, 1990. The amendment also added an appropriation.

LD An Act to Add a Hemophiliac to the Committee to Advise the PUBLIC
2424 Department of Human Services on AIDS 651

<u>SPONSOR(S)</u>	<u>COMMITTEE REPORT</u>	<u>AMENDMENTS ADOPTED</u>
FOSS	OTP-AM	H-514
WEBSTER M		
MCGOWAN		
WHITMORE		

SUMMARY

This bill, as amended, added a hemophiliac to the Committee to Advise the Department of Human Services on AIDS.

LD An Act to Increase the Frequency of Restaurant Inspections PUBLIC
2428 838

<u>SPONSOR(S)</u>	<u>COMMITTEE REPORT</u>	<u>AMENDMENTS ADOPTED</u>
MANNING	OTP-AM	H-689
GILL		S-503 PEARSON
GAUVREAU		
PINES		

SUMMARY

This bill requires more inspections by health inspectors for Maine's restaurants and provides legal support through the Attorney General's office. The bill increases fees for such inspections, thereby supporting the expansion of the inspection program. The bill also decreases the time periods in which restaurants must pay any inspection fees.