

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

STATE OF MAINE
116TH LEGISLATURE

SECOND REGULAR SESSION

BILL SUMMARIES
JOINT STANDING COMMITTEE
ON
HUMAN RESOURCES

MAY 1994

Staff:

Paul J. Saucier, Legislative Analyst

*Office of Policy and Legal Analysis
Room 101, State House Station 13
Augusta, ME 04333
(207)287-1670*

MEMBERS:

**Sen. Judy A. Paradis
Sen. John E. Baldacci
Sen. Philip E. Harriman*

**Rep. Sharon Anglin Treat
Rep. Donald H. Gean
Rep. Robert B. Carr
Rep. Michael F. Brennan
Rep. Michael J. Fitzpatrick
Rep. Birger T. Johnson
Rep. Elizabeth Townsend
Rep. Peggy A. Pendleton
Rep. Joan M. Pendexter
Rep. Joseph Bruno*

**Denotes Chair*

MARTHA E. FREEMAN, DIRECTOR
WILLIAM T. GLIDDEN, JR., PRINCIPAL ANALYST
JULIE S. JONES, PRINCIPAL ANALYST
DAVID C. ELLIOTT, PRINCIPAL ANALYST
MARION HYLAN BARR
JON CLARK
LISA COPENHAVER
DEBORAH C. FRIEDMAN
MICHAEL D. HIGGINS
JILL IPPOLITI



JOHN B. KNOX
ROY W. LENARDSON
PATRICK NORTON
JANE ORBETON
MARGARET J. REINSCH
PAUL J. SAUCIER
JOHN G. KELLEY, RESEARCHER
DARLENE A. SHORES LYNCH, RESEARCHER
CARRIE C. McFADDEN, RESEARCHER

STATE OF MAINE
OFFICE OF POLICY AND LEGAL ANALYSIS
ROOM 101/107/135
STATE HOUSE STATION 13
AUGUSTA, MAINE 04333
TEL: (207) 287-1670
FAX (207) 287-1275

**ONE HUNDRED AND SIXTEENTH LEGISLATURE
SECOND REGULAR SESSION**

**JOINT STANDING COMMITTEE
BILL SUMMARIES**

MAY 1994

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 volume is organized alphabetically by committee; within each committee, the summaries are arranged by LD number. A subject index is provided at the beginning of each committee's summaries.

The committee report or reports, the prime sponsor for each bill and the lead co-sponsor in each house if one has been designated are listed below each bill title. All adopted amendments are listed, by paper number, together with the sponsor for floor amendments. Final action on each bill is listed to the right of the title. Various types of final action are abbreviated as follows:

PUBLIC XXX

P&S XXX

RESOLVE XXX

CON RES XXX

EMERGENCY

ONTP

INDEF PP

FAILED ENACTMENT

FAILED EMERGENCY ENACTMENT

FAILED MANDATE ENACTMENT

DIED BETWEEN BODIES

CONF CMTE UNABLE TO AGREE

VETO SUSTAINED

UNSIGNED

DIED ON ADJOURNMENT

Chapter # of enacted Public Law

Chapter # of enacted Private & Special Law

Chapter # of enacted Resolve

Chapter # of Constitutional Resolution passed by both Houses

Enacted law takes effect sooner than 90 days

Ought Not to Pass report accepted

Bill Indefinitely Postponed

Bill failed to get majority vote

Emergency bill failed to get 2/3 vote

Bill imposing local mandate failed to get 2/3 vote

House & Senate disagree; bill died

Committee of Conference unable to agree; bill died

Legislature failed to override Governor's Veto

Not signed by Governor within 10 days

Action incomplete when session ended; bill died

These summaries were prepared by the analyst or analysts assigned to the committee. If you have any suggestions or comments on the summaries, please let us know.

5581LHS

LD 1667 An Act Regarding the Regional Mental Health Authority Demonstration

PUBLIC 569

SPONSOR(S)
FITZPATRICK

COMMITTEE REPORT
OTP-AM

AMENDMENTS ADOPTED
H-803

SUMMARY

This bill establishes a task force to propose policies and practices for the expansion of the regional mental health board system to all 5 regions of the State. Currently, only Region V (York and Cumberland Counties) have a regional mental health board.

COMMITTEE AMENDMENT A (H-803) replaces the original bill. The original bill took preliminary steps toward the establishment of regional mental health boards in every region of the State. The amendment addresses the evaluation of the current mental health board demonstration in Region V but does not presuppose that the demonstration will be expanded statewide. The amendment also does the following:

Because the department has not been able to establish a demonstration in Region I as required in Public Law 1991, chapter 781, that requirement is deleted and the department is given discretion to establish a demonstration in any rural region;

Public Law 1991, chapter 781 limited the demonstration to adult mental health services. That limitation is removed to enable consideration of adding children's mental health and developmental disability services to the demonstration;

As in the original bill, the reporting date for the demonstration project is extended one year to January, 1995. In addition, the amendment requires the Commissioner of Mental Health and Mental Retardation to appoint a task force and makes the task force responsible for the report, rather than placing that responsibility directly on the commissioner. Also, the topics to be addressed in the report are expanded to include estimates of central bureaucracy savings to be derived by implementation of local boards; the relationship between the boards and providers; the relationship between boards and the Department of Mental Health and Mental Retardation; and the role of boards in children's services;

Under Public Law 1991, chapter 781, authority for the demonstration project sunsets on October 1, 1994. That sunset date is changed to October 1, 1995; and

A fiscal note is added to the bill.

LD 1668 An Act to Ensure Accessibility to Mental Retardation Services for Persons Who are Deaf or Hard of Hearing

PUBLIC 519

SPONSOR(S)
TREAT
ADAMS

COMMITTEE REPORT
OTP-AM

AMENDMENTS ADOPTED
H-750

SUMMARY

This bill requires the Division of Mental Retardation to ensure that mental retardation programs funded or licensed by the bureau provide appropriate accommodations and services to persons who are deaf or hard of hearing. The bill also requires the deaf services coordinator in the Division of Mental Health to serve on a departmentwide basis.

COMMITTEE AMENDMENT A (H-750) makes the following changes to the original bill.

The bill's provisions to ensure access to services for persons with mental retardation who are deaf or hard-of-hearing are merged with existing law regarding access to services for persons with mental illness who are deaf or hard-of-hearing.

The original bill required the Division of Mental Retardation to provide services directly. The amendment requires the division to ensure that those services be provided. This change allows the division to ensure access through its contractors.

The original bill required the Division of Mental Retardation to provide in each regional office at least one person who is proficient in American Sign Language. The amendment establishes this as a goal and requires the division to designate a coordinator in each regional office.

The amendment expands an existing biennial reporting requirement in mental health to include mental retardation.

The amendment clarifies that the bill does not diminish or alter the Department of Education's responsibility to provide free and appropriate education to students with disabilities.

The amendment adds a fiscal note to the bill.

**LD 1681 An Act to Encourage the Establishment or Expansion of
Certain Residency Programs Relating to Emergency Medicine
Physicians**

PUBLIC 733

SPONSOR(S)
PENDEXTER
HARRIMAN

COMMITTEE REPORT
OTP-AM

AMENDMENTS ADOPTED
H-796

SUMMARY

This bill allows hospitals to establish emergency medicine residency programs without being penalized by the State's hospital regulation system. It makes the Maine Health Care Finance Commission "blind" to new revenue associated with such programs.

COMMITTEE AMENDMENT A (H-796) adds a fiscal note to the bill.

**LD 1683 Resolve, Regarding the Development of a Medicare Volume
Performance Standard Demonstration Project**

RESOLVE 52

SPONSOR(S)
RYDELL
TREAT

COMMITTEE REPORT
OTP-AM

AMENDMENTS ADOPTED
H-768

SUMMARY

This resolve establishes the Maine Medicare Volume Performance Standard Demonstration Project and authorizes the Maine Medical Assessment Foundation to participate in the project. Under the project, practice and utilization pattern statistics for physicians in the State must be separated from the national statistics, their annual volume response must be calculated separately and fees for the subsequent year must be set utilizing the default conversion factor formula. The project must involve physicians providing services to Medicare recipients.

COMMITTEE AMENDMENT A (H-768) clarifies that the Department of Human Services will submit the waiver for the Maine Medicare Performance Standard Demonstration Project. The amendment also adds a fiscal note to the resolve.