

MAINE STATE LEGISLATURE

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STATE OF MAINE
117TH LEGISLATURE

FIRST REGULAR SESSION

BILL SUMMARIES
JOINT STANDING COMMITTEE
ON
HUMAN RESOURCES

AUGUST 1995

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**ONE HUNDRED AND SEVENTEENTH LEGISLATURE
FIRST REGULAR SESSION**

**SUMMARY OF LEGISLATION BEFORE
THE JOINT STANDING COMMITTEES**

AUGUST 1995

This document is a compilation of the bill summaries prepared by this office for the Joint Standing 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 publication, History and Final Disposition of Legislative Documents, is helpful in determining to which committee any particular bill was referred.

In this document, 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 categories of final action are abbreviated as follows:

<i>CARRIED OVER</i>	<i>Bill carried over to Second Session</i>
<i>CON RES XXX</i>	<i>Chapter # of Constitutional Resolution passed by both Houses</i>
<i>CONF CMTE UNABLE TO AGREE</i>	<i>Committee of Conference unable to agree; bill died</i>
<i>DIED BETWEEN BODIES</i>	<i>House & Senate disagree; bill died</i>
<i>DIED ON ADJOURNMENT</i>	<i>Action incomplete when session ended; bill died</i>
<i>EMERGENCY</i>	<i>Enacted law takes effect sooner than 90 days</i>
<i>FAILED EMERGENCY ENACTMENT</i>	<i>Emergency bill failed to get 2/3 vote</i>
<i>FAILED ENACTMENT</i>	<i>Bill failed to get majority vote</i>
<i>FAILED MANDATE ENACTMENT</i>	<i>Bill imposing local mandate failed to get 2/3 vote</i>
<i>INDEF PP</i>	<i>Bill Indefinitely Postponed</i>
<i>ONTP</i>	<i>Ought Not to Pass report accepted</i>
<i>P&S XXX</i>	<i>Chapter # of enacted Private & Special Law</i>
<i>PUBLIC XXX</i>	<i>Chapter # of enacted Public Law</i>
<i>RESOLVE XXX</i>	<i>Chapter # of enacted Resolve</i>
<i>UNSIGNED</i>	<i>Not signed by Governor within 10 days</i>
<i>VETO SUSTAINED</i>	<i>Legislature failed to override Governor's Veto</i>

These summaries were prepared by the analyst or analysts assigned to the committee. If more detailed information is needed on a bill, contact the committee analyst.

5581LHS

COMMITTEE AMENDMENT "A" (H-266) extends the definition of cooperative agreement for purposes of the Hospital Cooperation Act of 1992 to cover nonprofit mental health care providers and to cover coordinated negotiation and contracting with payors or employers. It requires nonprofit mental health care providers to reimburse the Department of the Attorney General for the reasonable costs of expenses incurred by the department. It caps the possible assessment to pay for work under the Act to \$200,000 per year in the next biennium. It extends from 1995 to 1999 the date for submission of recommendations regarding the Act. It allocates \$20,000 per year to pay for the cost of experts and other costs related to analyzing hospital cooperative activity.

See LD 583.

LD 761 An Act to Establish a Lead Poisoning Fund ONTP

SPONSOR(S)	COMMITTEE REPORT	AMENDMENTS ADOPTED
DAGGETT	ONTP	

SUMMARY

This bill establishes the Lead Poisoning Fund for the purposes of providing low-interest loans for lead paint abatement and providing grants for chelation treatments. The loans may be for up to 10 years. The chelation treatment grants may be for up to \$5000 and are available to households with incomes below 300% of the federal poverty level. The fund is administered by the Commissioner of Human Services. This bill imposes an additional assessment of 25¢ per gallon of paint sold at retail in the State to provide funds for the Lead Poisoning Fund.

LD 771 An Act to Expand Access to Financing for Health and Social Service Agencies PUBLIC 179

SPONSOR(S)	COMMITTEE REPORT	AMENDMENTS ADOPTED
HARRIMAN	OTP-AM	S-122

SUMMARY

This bill expands the jurisdiction of the Maine Health and Higher Education Facilities Authority to authorize it to finance a broader range of nonprofit health and social service projects.

COMMITTEE AMENDMENT "A" (S-122) removes from the definition of "community health or social service facility" those facilities that only engage in ancillary activities supporting social service agencies. It removes from the definition those facilities that are subject to oversight by the State but are not licensed. It corrects one cross-reference in the bill. It adds a provision allowing the use of letters of credit, insurance contracts, surety bonds or similar financial undertakings in funding reserve funds within the Maine Health and Higher Educational Facilities Authority.

LD 775 An Act to Create a Transitional Pharmacy Benefit Program DIED BETWEEN BODIES

SPONSOR(S)	COMMITTEE REPORT	AMENDMENTS ADOPTED
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SUMMARY

This bill directs the Department of Human Services to establish a transitional pharmacy benefit program to provide life-sustaining drugs to persons enrolled in the Maine Health Program on March 31, 1995. The program starts on April 1, 1995, and ends on June 30, 1995 and is subject to appropriated resources. If resources permit, the department is directed to provide as comprehensive a pharmacy benefit program as possible, within the limits of the appropriation. Any balance in the fund on June 30, 1995 is carried over until December 31, 1995 to pay expenses of the program. Any balance remaining on December 31, 1995 lapses to the General Fund.

This bill was enacted in the Senate and failed of emergency enactment in the House. The bill died between bodies.

LD 784 An Act to Legalize Marijuana for Medicinal Purposes ONTP

SPONSOR(S) COMMITTEE REPORT AMENDMENTS ADOPTED
STEVENS K ONTP

SUMMARY

This bill reestablishes the Marijuana Therapeutic Research Program, administered by the Commissioner of Human Services, which was repealed December 31, 1987. The bill also establishes the Participation Review Board. The Board of Registration in Medicine must review any patient wishing to participate in the program. Participation is limited to chemotherapy or radiation therapy and glaucoma patients who are not responding to conventional treatment or who are suffering severe side effects, and any other patient when medical evidence presented to the board justifies that participation. If the Board of Registration in Medicine approves a patient, the patient's physician may write a prescription that can be filled at a state or privately operated licensed pharmacy designated by the commissioner. The commissioner may obtain analyzed marijuana available from the Federal Government and deliver it to the pharmacy for dispensing to any approved patient with a written prescription from the patient's physician. The commissioner and the Participation Review Board are required to make an annual report to the Governor and the Legislature, enabling both the legislative branch and executive branch to monitor the program closely. This bill also defines side effects of chemotherapy or radiation therapy as "significant nausea or vomiting." The bill also repeals the provisions related to glaucoma patients on October 1, 1998.

See also LD 204 and LD 929.

LD 799 An Act to Amend the Laws Governing HIV Testing at the Request of Victims of Sexual Assault PUBLIC 319

SPONSOR(S) COMMITTEE REPORT AMENDMENTS ADOPTED
MCALEVEY OTP-AM H-299

SUMMARY

This bill amends the laws to require a court to order a person convicted of a crime involving a sexual act, gross sexual assault or sexual abuse of a minor to be tested for HIV if the victim makes a request at the time of sentencing.

COMMITTEE AMENDMENT "A" (H-299) brings the bill into compliance with the requirements of 42 United States Code, Section 3756 (f). It removes a requirement that is inconsistent with federal law stating that the victim of the sexual assault must allegedly have been exposed to the blood or body fluids of the convicted offender. Conviction of a sexual assault under the Maine Revised Statutes, Title 17-A, section 251, subsection 1, paragraph C, subparagraph (1) is sufficient. The amendment requires that the victim