

# MAINE STATE LEGISLATURE

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**STATE OF MAINE  
117TH LEGISLATURE**

**SECOND REGULAR SESSION**

**BILL SUMMARIES  
JOINT STANDING COMMITTEE  
ON  
HUMAN RESOURCES<sup>1</sup>**

**JUNE 1996**

**MEMBERS:**

*Sen. Joan M. Pendexter, Chair*

*Sen. John W. Benoit*

*Sen. Rochelle M. Pingree*

*Rep. Michael J. Fitzpatrick, Chair*

*Rep. Birger T. Johnson*

*Rep. David Etnier*

*Rep. J. Elizabeth Mitchell*

*Rep. Kyle W. Jones*

*Rep. Glenys P. Lovett*

*Rep. Jeffery G. Joyner*

*Rep. Jean Ginn Marvin*

*Rep. Robert J. Winglass*

*Rep. Henry L. Joy*

**Staff:**

*Jane Orbeton, Legislative Analyst*

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<sup>1</sup> Amendments to Joint Rule 13 adopted this session changed the committee name to the Joint Standing Committee on Health and Human Services.



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**ONE HUNDRED SEVENTEENTH LEGISLATURE  
SECOND REGULAR SESSION**

***Summary Of Legislation Before The Joint Standing Committees  
June 1996***

We are pleased to provide this summary of bills that were considered by the 15 Joint Standing Committees of the Maine Legislature staffed by this office. The document is a compilation of bill summaries which describe each bill, committee amendments and other relevant amendments, as well as the final action taken on the bill. Also included are statistical summaries of bill activity this Session for the Legislature and each of its joint standing committees.

The document is organized for convenient reference to information on bills handled by the joint standing committees. It is organized alphabetically by committees and within committees by bill (LD) number. The committee report(s), prime sponsor for each bill and the lead co-sponsor(s), if designated, are listed below each bill title. All adopted amendments are listed by paper number. Two indices, a subject index and a numerical index by LD number are provided for easy reference to bills. They are located at the back of the document. A separate publication, History and Final Disposition of Legislative Documents, may also be helpful in providing information on the disposition of bills.

Final action on each bill is noted to the right of the bill title. The abbreviations used for various categories of final action are 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 &amp; 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&amp;S XXX</i> .....	<i>Chapter # of enacted Private &amp; Special Law</i>
<i>PUBLIC XXX</i> .....	<i>Chapter # of enacted Public Law</i>
<i>RESOLVE XXX</i> .....	<i>Chapter # of finally passed 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>

Please note the effective date for all non-emergency legislation enacted in the Second Regular Session (unless otherwise specified in a particular law) is July 4, 1996.

**LD 1773**      **An Act to Ensure the Continued Stability of Services for  
Persons with Mental Retardation**

PUBLIC 685  
EMERGENCY

Sponsor(s)  
FITZPATRICK

Committee Report  
OTP-AM

Amendments Adopted  
H-906  
S-566

LD 1773 proposed to provide a 2-part mechanism for the payment of premiums for workers' compensation insurance carried by private agencies providing services to individuals with mental retardation beginning July 1, 1996. It would have required the Superintendent of Insurance to review the establishment of a special classification for workers at these facilities and to report by September 1, 1996 to the banking and insurance and human resources committees.

**Committee Amendment "A" (H-906)** is the Majority Report. It replaced the bill. It proposed to remove from the bill the provisions requiring the Department of Mental Health, Mental Retardation and Substance Abuse Services to ensure that private agencies providing mental retardation services under contract have loss prevention programs in place. It would have removed the portion of the bill requiring a report on special classifications for workers' compensation insurance. It would have added reimbursement criteria that depend on an agency's workers' compensation experience modification rating and that provide incentives to provide a safe workplace.

The amendment would have added an appropriation and a fiscal note.

**Senate Amendment "A" To Committee Amendment "A" (S-566)** would have added an emergency clause at the end of the committee amendment.

***Enacted law summary***

Public Law 1995, chapter 566 comprises the provisions of Committee Amendment "A" and Senate Amendment "A". The law provides a means for the Department of Mental Health, Mental Retardation and Substance Abuse Services to encourage private agencies providing mental retardation services under contract to have loss prevention programs in place. It provides reimbursement criteria that depend on an agency's workers' compensation experience modification rating and that provide incentives to provide a safe workplace. Agencies with ratings below 1.0 must be paid 1/2 of any cost decrease. Agencies that have ratings of 1.0 to 1.39 must be paid the full amount of any cost decrease if they have loss prevention plans. Agencies that have ratings of 1.4 or greater must be paid 1/2 of the cost increase if they have loss prevention plans.

Public Law 1995, chapter 685 takes effect April 11, 1996.

**LD 1784**      **An Act to Amend the Home Health Laws**

PUBLIC 620

Sponsor(s)  
WINGLASS

Committee Report  
OTP

Amendments Adopted

LD 1784 proposed to allow the Department of Human Services to establish a receivership situation for a home health care provider similar to that which is already used for other providers, such as nursing homes. The receivership would have allowed the department to take action against a provider who had committed a serious violation, while still allowing the service to continue to be provided to the clients of the home health care provider. This bill would have

required certified nursing assistants working for a home health care provider to be listed on the certified nursing assistant's registry in order to protect the public.

***Enacted law summary***

Public Law 1995, chapter 620 was enacted as printed in the original bill. The law allows the Department of Human Services to establish a receivership situation for a home health care provider similar to that which is already used for other providers, such as nursing homes. A receivership allows the department to take action against a provider who has committed a serious violation, while still allowing the service to continue to be provided to the clients of the home health care provider. The law also requires certified nursing assistants working for a home health care provider to be listed on the certified nursing assistant's registry in order to protect the public.

**LD 1788      An Act to Establish the Maine Health Data Organization**

PUBLIC 653  
EMERGENCY

Sponsor(s)

Committee Report  
OTP-AM

Amendments Adopted  
H-909

LD 1788 was the report to the Legislature of the Task Force to Monitor Deregulation of Hospitals. It's original title was "An Act to Implement the Recommendations of the Task Force to Monitor Deregulation of Hospitals." A bill containing somewhat similar provisions also considered by the committee was LD 1722, from the Maine Health Care Reform Commission. LD 1788 proposed to enact the following provisions.

1. Part A of the bill proposed to establish the Maine Health Data Organization, an independent executive organization to oversee and coordinate the collection and analysis of health care data. The bill would have enacted provisions to ensure that the Maine Health Data Organization has the authority to collect health data from all health care facilities, 3rd-party payor, managed care organizations and practitioners providing health services, including pharmacists and health product manufacturers. The bill would have required the Maine Health Data Organization to collect and analyze clinical, financial and restructuring data. The bill also proposed a mechanism of funding, including assessments and user fees, for the Maine Health Data Organization. The bill proposed the transition provision necessary to ensure continuation of the data collection and analysis functions of the Maine Health Care Finance Commission until such time as the new organization becomes operational, as determined by the board or December 31, 1996, whichever is earlier.

Part A of the bill would have required the Department of Human Services to adopt rules to create a fair hearing mechanism for resolution of disputes over eligibility determinations for charity care. This provision was also contained in LD 1673, which was enacted as Public Law 1996, chapter 596, but which takes effect before the effective date of this law. See enacted law summaries of this bill and LD 1673.

2. Part B of the bill proposed changes recommended by the Maine Health Care Reform Commission to repeal the commission's cost containment functions, as was also recommended by the Task Force to Monitor Deregulation of Hospitals.

3. Part C of the bill would have corrected cross-references that need to be changed due to the recommendations of the Maine Health Care Reform Commission.