

MAINE STATE LEGISLATURE

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STATE OF MAINE
118TH LEGISLATURE

SECOND REGULAR SESSION
AND
SECOND SPECIAL SESSION

BILL SUMMARIES
JOINT STANDING COMMITTEE
ON
HEALTH AND HUMAN SERVICES

MAY 1998

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Sen. Betty Lou Mitchell

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**ONE HUNDRED EIGHTEENTH LEGISLATURE
SECOND REGULAR AND SECOND SPECIAL SESSIONS**

**Summary Of Legislation Before The Joint Standing Committees
May 1998**

We are pleased to provide this summary of bills that were considered by the Joint Standing Committees of the Maine Legislature. The document is a compilation of bill summaries which describe each bill and relevant amendments, as well as the final action taken. 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 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. These bill summaries also are available at the Law and Legislative Reference Library and on the Internet (www.state.me.us/legis/opla).

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:

CON RES XXX..... Chapter # of Constitutional Resolution passed by both Houses
CONF CMTE UNABLE TO AGREE.....Committee of Conference unable to agree; bill died
DIED BETWEEN BODIES.....House & Senate disagree; bill died
DIED IN CONCURRENCE.....One body accepts ONTP report; the other indefinitely postpones the bill
DIED ON ADJOURNMENT.....Action incomplete when session ended; bill died
EMERGENCY.....Enacted law takes effect sooner than 90 days
FAILED EMERGENCY ENACTMENT/FINAL PASSAGE.....Emergency bill failed to get 2/3 vote
FAILED ENACTMENT/FINAL PASSAGE.....Bill failed to get majority vote
FAILED MANDATE ENACTMENT.....Bill imposing local mandate failed to get 2/3 vote
INDEF PP.....Bill Indefinitely Postponed
ONTP..... Ought Not To Pass report accepted
OTP ND..... Committee report Ought To Pass In New Draft
OTP ND/NT..... Committee report Ought To Pass In New Draft/New Title
P&S XXX..... Chapter # of enacted Private & Special Law
PUBLIC XXX..... Chapter # of enacted Public Law
RESOLVE XXX..... Chapter # of finally passed Resolve
UNSIGNED.....Bill held by Governor
VETO SUSTAINED.....Legislature failed to override Governor's Veto

Please note the effective date for all non-emergency legislation enacted in the Second Regular Session (unless otherwise specified in a particular law) is June 30, 1998 and July 9, 1998 for the Second Special Session. Second Special Session laws include Public Laws beginning with Chapter 718, Private and Special Laws beginning with Chapter 82 and Resolves beginning with Chapter 117.

LD 1779

An Act Regarding Access to Medical Information

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE WATSON	ONTP	

LD 1779 proposed to create the Medical Privacy Act of 1997, that would have established a right to privacy with respect to health information, including genetic information. It would have helped to ensure the confidentiality of computerized or electronically transferred health information and restricted the gathering of aggregate health information for financial gain or other purposes without an individual's knowledge or consent. The bill also would have provided individuals with access to health information of which they are the subject and the power to challenge the accuracy and completeness of, amend or correct records containing that information.

The bill would have provided that an individual's interest in the privacy of health information may not be overridden without meaningful notice and informed consent, except in limited circumstances when there is a compelling public interest. These circumstances would have included disclosure when the subject of information is in danger, or another individual is in danger; disclosure to a health oversight agency in cases concerning fraud, protection of individuals from harm, abuse, neglect, or exploitation; disclosure for public health purposes; and disclosure to health researchers within certain parameters.

This bill also would have provided for disclosure of health information for judicial, law enforcement and administrative purposes pursuant to requirements governing subpoenas, warrants, court orders, and in certain other cases involving legal claims. The bill would have established civil penalties for failure to comply with the provisions of the Medical Privacy Act of 1997, and a private right of action of individuals aggrieved by conduct in violation of the Medical Privacy Act of 1997.

The bill would have required that an advisory group be appointed by the department to review all proposed rules and assist the department in establishing the standards for compliance with the rules. The group would have been directed to review further modifications to the Medical Privacy Act of 1997 to ensure efficient and confidential electronic exchange of protected health information and to make recommendations to bring certain existing laws into compliance with this Act.

The bill would have addressed the relationship of the Medical Privacy Act of 1997 to other laws in 2 ways. First, it would have provided that the Medical Privacy Act of 1997 does not preempt, supersede or modify the operation of certain existing state laws. Second, it would have amended certain other existing laws concerning the collection, use and dissemination of health information to render them consistent with the Medical Privacy Act of 1997, and would have repealed other laws that are inconsistent.

See also LD 1737.

LD 1914

An Act Regarding the Possession of Tobacco Products by a Juvenile

PUBLIC 578

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERKINS	OTP-AM	H-781

LD 1914 proposed to allow a juvenile to transport tobacco products in a motor vehicle if this transportation is in the scope of the juvenile's employment or at the request of the juvenile's parent or legal guardian. The bill parallels current law with respect to the transportation of liquor by a juvenile.

Committee Amendment "A" (H-781) proposed to delete the provisions in the bill on legalizing transportation of tobacco products by a minor at the request of the minor's parent, legal guardian or custodian. It proposed to require that tobacco products transported by a minor in the course of employment be in the original packaging.

Enacted law summary

Public Law 1997, chapter 578 comprises the provisions of the bill and Committee Amendment "A". The law allows a juvenile to transport tobacco products in a motor vehicle if this transportation is in the scope of the juvenile's employment. It requires that tobacco products transported by a minor in the course of employment be in the original packaging.

LD 1966 An Act Regarding the Spousal Allowance for Divorced Spouses of ONTP
Nursing Home Care Recipients Receiving Medicaid

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CATHCART HATCH	ONTP	

LD 1966 would have provided that income that is required to pay court-ordered alimony or spousal support may not be considered available for purposes of Medicaid eligibility for institutional care.

LD 1971 An Act to Provide Representation for Chiropractors on the Board PUBLIC 568
of the Maine Health Data Organization

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE PENDLETON P	OTP-AM	H-780

LD 1971 proposed to place a chiropractor on the Board of the Maine Health Data Organization.

Committee Amendment "A" (H-780) proposed to add one employer member selected from a list submitted by a health management coalition in this State to the Board of Directors of the Maine Health Data Organization. The amendment proposed to add a fiscal note.

Enacted law summary

Public Law 1997, chapter 568 comprises the provisions of the bill and Committee Amendment "A". It adds a chiropractor member to the board of the Maine Health Data Organization. It also adds one employer member selected from a list submitted by a health management coalition in this State.