

MAINE STATE LEGISLATURE

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**STATE OF MAINE
119TH LEGISLATURE**

SECOND REGULAR SESSION

**BILL SUMMARIES
JOINT STANDING COMMITTEE
ON
HEALTH AND HUMAN SERVICES**

JULY 2000

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Sen. Betty Lou Mitchell*

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ONE HUNDRED NINETEENTH LEGISLATURE
SECOND REGULAR SESSION

Summary Of Legislation Before The Joint Standing Committees
July 2000

We are pleased to provide this summary of bills that were considered by the Joint Standing and Select Committees of the Maine Legislature this past session. 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 and select committees.

The document is organized for convenient reference to information on bills considered by the 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
NOT PROPERLY BEFORE THE BODY..... Ruled out of order by the presiding officers; bill died
INDEF PP..... Bill Indefinitely Postponed
ONT P..... 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 August 11, 2000.

David E. Boulter, Director
Offices Located in the State House, Rooms 101 & 107

geographic region, service setting or residential setting of the older person. LD 2513 proposed to implement the recommendations of the departments and the advisory committee.

Committee Amendment "A" (S-586) proposed to replace the bill. It proposed to require the Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Human Services to undertake initiatives regarding services to older persons with special needs, require the Department of Mental Health, Mental Retardation and Substance Abuse Services to adopt quality assurance measures and performance indicators and require the two departments to support the Joint Advisory Committee on Select Services for Older Persons, which would advise the departments and monitor new initiatives. The amendment also proposed to add a fiscal note to the resolve.

Enacted law summary

Resolve 1999, chapter 106 requires the Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Human Services to undertake initiatives regarding services to older persons with special needs, requires the Department of Mental Health, Mental Retardation and Substance Abuse Services to adopt quality assurance measures and performance indicators and requires the two departments to support the Joint Advisory Committee on Select Services for Older Persons, which will advise the departments and monitor new initiatives.

LD 2523

An Act to Establish Fair Pricing for Prescription Drugs

ONTP

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

LD 2523 proposed to establish the Maine Prescription Drug Fair Pricing Act. LD 2523 proposed to do the following:

1. It proposed to establish the Fair Drug Pricing Board. The board, with the approval of the Legislature, would set the maximum prices for prescription drugs based upon a specific formula. The board would be required to work with the Department of Human Services, the Department of Professional and Financial Regulation and the Maine Board of Pharmacy and to report regularly to those entities and the Legislature. The board would be empowered to enter into agreements with other States or Canadian provinces to ensure uniform prices for prescription drugs. The board would also be required to maintain an Internet site to give the public access to the price schedule established by the board.
2. The Attorney General would be given specific enforcement power of the Act. If the Attorney General finds that a violation of certain laws has occurred, the Attorney General would recommend the suspension or revocation of a manufacturer's certificate of registration. If 50 or more Maine citizens petition the Attorney General alleging excessive prescription drug prices, the Attorney General would be required to investigate.
3. The sale of prescription drugs over the Internet would be prohibited.
4. The current prohibition against profiteering in necessities would be expanded to include prescription drugs.

See also LD 2599.

LD 2559

**An Act to Amend the Charter of Hospital Administrative District
No. 4**

P & S 70

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DAVIS P	OTP	

LD 2559 proposed to increase the maximum debt limit for Hospital Administrative District #4 (Mayo Hospital) from \$7,000,000 to an amount not to exceed 2% of the total current state valuation of all towns and plantations that are members of the district.

Enacted law summary

Private and Special Law 1999, chapter 70 increases the maximum debt limit for Hospital Administrative District #4 (Mayo Hospital in Dover-Foxcroft) from \$7,000,000 to an amount not to exceed 2% of the total current state valuation of all towns and plantations that are members of the district.

LD 2580

Resolve, Regarding Access to Marijuana for Medical Use

RESOLVE 137

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
RAND QUINT	OTP-AM	S-597 S-797 RAND

LD 2580 proposed to create a voluntary registry for eligible patients and designated caregivers under the Maine Medical Marijuana Act of 1998 in the Department of Human Services, Bureau of Medical Services, Division of Licensing and Certification. The bill also proposed to create a distribution system for such individuals to secure marijuana from the Department of Public Safety, Maine Drug Enforcement Agency. An eligible patient or designated caregiver would need a valid registry identification card in order to secure marijuana from the Maine Drug Enforcement Agency.

Committee Amendment "A" (S-597) proposed to replace the bill, change the title and change the form of the bill to a resolve. It proposed to direct the Attorney General to convene a task force to study and make recommendations on implementation of the marijuana for medical purposes law and access to marijuana for medical purposes. It proposed to provide for the appointment of legislative members of the task force. It proposed to require a report to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Criminal Justice by October 1, 2000.

Senate Amendment "A" to Committee Amendment "A" (S-776) proposed to add an emergency preamble and an emergency clause to the resolve and to require the Speaker of the House to give preference to members of the Joint Standing Committee on Criminal Justice, the Joint Standing Committee on Judiciary and the Joint Standing Committee on Health and Human Services when making appointments to the task force.