

MAINE STATE LEGISLATURE

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*State Of Maine
120th Legislature*

First Regular Session

Bill Summaries

*Joint Standing Committee
on
Health and Human Services*

August 2001

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120th Legislature
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Summary Of Legislation Before The Joint Standing Committees
August 2001

Enclosed please find a summary of all bills, resolves, joint study orders, joint resolutions and Constitutional resolutions that were considered by the joint standing 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 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:

CARRIED OVER.....	Bill Carried Over to Second Regular Session
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
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 First Regular Session (unless otherwise specified in a particular law) is **September 21, 2001**.

David E. Boulter, Director
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Joint Standing Committee on Health and Human Services

LD 583 proposed to direct the Department of Human Services, Bureau of Health to adopt rules to allow individual farmers and farmers at farmers' markets to accept Women, Infants and Children Farmers' Market Nutrition Program coupons.

LD 611

An Act to Create a Pilot Project to Fully Implement the Maine Medical Marijuana Act of 1998

CARRIED OVER

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

LD 611 is a concept draft pursuant to Joint Rule 208.

This bill proposed to create a pilot program allowing one medical marijuana distribution center in the State. The center would be incorporated as a nonprofit entity managed and overseen by a diverse community group. In particular, this bill would propose the following.

1. A single nonprofit center, referred to herein as the "center," would be incorporated for the purpose of cultivating and distributing medical marijuana to individuals qualified under the Maine Medical Marijuana Act of 1998. The center would also be authorized to distribute or lend, or both, cultivation equipment, supplies and seeds to qualified individuals for cultivation for personal use.
2. The center would be overseen and managed by a community board made up law enforcement, current and former patients, patient advocates, hospice facilities, education professionals, legal community, business, pharmacists, clergy, medicine and other groups involved in the community.
3. The framework for the operation of the community board would be included in the enabling legislation. Among other things, the framework would provide for term length of board members, qualifying members as described above, civil and criminal immunity protection for board members and employees acting within the scope of the center's mission and the authorization to use Maine's nonprofit business statute as a basis for organizational structure.
4. The center would be able to charge patients for the product to help cover the cost of the center. The center would also be prohibited from securing medical marijuana from outside the State.
5. A mandatory registry system for patients using the center would be created to ensure that only qualified individuals access the center's services. The system would be maintained by the center with oversight and input from the sheriff of the county within which the center is located. Other law enforcement personnel could confirm the participation of individuals in the center's services, if necessary, through that particular sheriff's office or the center. Among other things, the registry system would consist of a photo identification card, and the center would be authorized by the patient to check with the individual's physician that the individual falls within the provisions of the Maine Medical Marijuana Act of 1998. The center would also check with the appropriate state medical board or with the statewide medical association to determine that the physician is duly licensed to practice in the State.

Joint Standing Committee on Health and Human Services

6. The center would be required to keep records of patients' usage from the center in order to monitor compliance with statutory limits.
7. The center would be required to report to the Legislature within 18 months of commencement of operation. The report could also contain suggestions for additional legislation to meet needs of patients. The Legislature could then take additional action, including the authorization of additional sites with the State.
8. A person qualified under the Maine Medical Marijuana Act of 1998 who possessed appropriate documentation under the current law of that person's qualification at the time of a stop or encounter with law enforcement would not be subject to seizure of a lawful amount of marijuana or the equipment necessary to maintain, grow or consume medical marijuana.

LD 619

Resolve, to Provide Adequate Patient Care Staffing for Certain Home Care Programs

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE PENDLETON	OTP-AM	H-632

LD 619 proposed to require contracts for home care services entered into by the Department of Human Services for the home-based care program, the Medicaid waiver program and private duty nursing and personal care services programs to contain provisions to include funding for adequate pay and employment benefits for staff providing patient care and audit mechanisms to ensure that the funding is used for those purposes. These provisions would have to be implemented beginning January 1, 2002.

Committee Amendment "A" (H-632) proposed to delete from the resolve reference to employment benefits. It proposed to provide for a pay increase of \$1 per hour for direct care workers in the Medicaid waiver program, the private duty nursing and personal care services programs and the home-based care program beginning January 1, 2002. It proposed to add an appropriation section, an allocation section and a fiscal note to the resolve.

LD 633

An Act to Require Reporting on Children's Crisis Services

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE PENDLETON	OTP-AM	H-646 H-655 O'BRIEN J

LD 633 proposed to require the Department of Mental Health, Mental Retardation and Substance Abuse Services to coordinate with the Department of Human Services to provide cost-based residential and community-based services to all children who qualify for those services through the Children's Mental Health Program.

Committee Amendment "A" (H-646) proposed to replace the bill. It proposed to provide a new title. It proposed to require monthly reports by the Department of Mental Health, Mental Retardation and Substance Abuse Services