## MAINE STATE LEGISLATURE

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### State Of Maine 121st Legislature

# Second Regular Session and Second Special Session

### **Bill Summaries**

### Joint Standing Committee on Health and Human Services

May 2004

### <u>Members</u>:

Sen. Michael F. Brennan, Chair Sen. John L. Martin Sen. Carol Weston

> Rep. Thomas J. Kane, Chair Rep. Edward R. Dugay Rep. Margaret M. Craven Rep. William M. Earle Rep. William R. Walcott Rep. Anne C. Perry Rep. Thomas F. Shields Rep. Darlene J. Curley Rep. James J. Campbell, Sr. Rep. Sarah O. Lewin

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### Maine State Legislature



### Office Of Policy And Legal Analysis Office Of Fiscal And Program Review

### 121st Maine Legislature Second Regular Session and Second Special Session

#### Summary Of Legislation Before The Joint Standing Committees

Enclosed please find a summary of all bills, resolves, joint study orders, joint resolutions and Constitutional resolutions that were considered by the joint standing and joint 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 arranged alphabetically by committee name 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/billsumm.htm).

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:

	Chapter # of Constitutional Resolution passed by both Houses
	y accepts ONTP report; the other indefinitely postpones the bill
	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 PostponedOught Not To Pass report accepted
ONTP	Ought Not To Pass report accepted
OTP-ND	
P&S XXX	Chapter # of enacted Private & Special Law Joint Order passed in both bodiesChapter # of enacted Public Law
PASSED	Joint Order passed in both bodies
PUBLIC XXX	Chapter # of enacted Public Law
RESOLVE XXX	
UNSIGNED	Bill held by Governor
VETO SUSTAINED	Legislature failed to override Governor's Veto

Please note that the effective date for all non-emergency legislation enacted in the Second Regular Session (unless otherwise specified in a particular law) is April 30, 2004; and non-emergency legislation enacted in the Second Special Session is July 30, 2004. Four bills (LD's 1572, 1629, 1636 and 1637) that were considered at the First Special Session in August 2003 are also included in these summaries.

### Joint Standing Committee on Health and Human Services

LD 1720 An Act To Ensure the Lowest-priced Prescription Drugs for Maine Seniors

 Sponsor(s)
 Committee Report
 Amendments Adopted

 TREAT
 ONTP

 LEMOINE

LD 1720 proposed to prohibit a drug manufacturer from considering eligibility for the elderly low-cost drug program when determining eligibility for a patient assistance, drug access or drug discount program.

LD 1726 An Act To Require Criminal History Checks Prior to Placement of Children by the Department of Human Services

 Sponsor(s)
 Committee Report
 Amendments Adopted

 DOUGLASS
 ONTP

 WALCOTT

LD 1726 proposed to require a person with whom a child in the custody or care of the Department of Human Services is to be placed to undergo a criminal history record check. As proposed, the department would be responsible for ensuring the completion of the record check. The bill proposed that a child may not be placed with a person who has a history of abuse or neglect, defined in the Maine Revised Statutes, Title 22, section 4002, subsection 1 as "a threat to a child's health or welfare by physical, mental or emotional injury or impairment, sexual abuse or exploitation, deprivation of essential needs or lack of protection from these, by a person responsible for the child."

LD 1739 An Act To Clarify the Requirements of the Behavioral Treatment and Safety Device Review Teams for Persons with Mental Retardation or Autism

PUBLIC 564

**ONTP** 

**ONTP** 

Sponsor(s)Committee ReportAmendments AdoptedO'BRIEN JOTP-AMH-720

LD 1739 proposed to establish a review team and requirements for prior approval of a behavioral treatment program involving the use of aversive or severely intrusive techniques for a child under 18 years of age with mental retardation or autism.

Committee Amendment "A" (H-720) proposed to replace the bill. The amendment proposed to retain the provision of the bill that establishes a review team and requirements for prior approval of a behavioral treatment program involving the use of aversive or severely intrusive techniques for a child under 18 years of age with mental retardation or autism. The amendment proposed to add a provision that establishes the same review team and requirements for prior approval of the use of safety devices for a child under 18 years of age with mental retardation or autism.

### Joint Standing Committee on Health and Human Services

#### **Enacted Law Summary**

Public Law 2003, chapter 564 establishes a review team and requirements for prior approval of a behavioral treatment program involving the use of aversive or severely intrusive techniques for a child under 18 years of age with mental retardation or autism and for prior approval of the use of safety devices for a child under 18 years of age with mental retardation or autism.

LD 1747 An Act To Amend the Medicaid Drug Rebate Program and the Elderly Low-cost Drug Program

**PUBLIC 611** 

Sponsor(s)Committee ReportAmendments AdoptedCRAVENOTP-AMH-778

LD 1747 proposed to make changes to the Medicaid drug rebate program and to the elderly low-cost drug program to clarify the out-of-pocket cost to participating members.

Committee Amendment "A" (H-778) proposed to reorganize the law regarding basic, supplemental and catastrophic benefits in the elderly low-cost drug program. It proposed to add \$2 to the recipient's copayment in the catastrophic program.

#### **Enacted Law Summary**

Public Law 2003, chapter 611 makes changes to the Medicaid drug rebate program and to the elderly low-cost drug program to clarify the out-of-pocket cost to participating members and adds \$2 to the recipient's copayment in the catastrophic program.

LD 1748

An Act To Amend the Rule-making Authority of the Department of Human Services to Ensure Cost-effective Operation of State Medical Services Programs and Compliance with Federal Requirements

PUBLIC 612 EMERGENCY

Sponsor(s)Committee ReportAmendments AdoptedO'NEILOTP-AMH-777

LD 1748 proposed to provide the authority for 2 bureaus in the Department of Human Services to adopt rules having retroactive application. It proposed to allow the Bureau of Medical Services to do so to maximize revenue sources and to meet deappropriations. It proposed to allow the Bureau of Family Independence to do so to comply with federal regulations or to conform to the state plan as filed with the Federal Government.

**Committee Amendment "A" (H-777)** proposed to provide the authority for 2 bureaus in the Department of Human Services, the Bureau of Medical Services and the Bureau of Family Independence, to adopt rules having retroactive application in certain specific circumstances for a period up to 8 calendar quarters. It proposed to allow the Bureau of Medical Services to do so to maximize available federal revenue sources through the federal