

MAINE STATE LEGISLATURE

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*State Of Maine
122nd Legislature*

*First Regular Session and
First Special Session*

Bill Summaries

*Joint Standing Committee
on
Health and Human Services*

August 2005

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Maine State Legislature

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122nd Legislature
First Regular Session and First Special Session

Summary of Legislation Considered by the Joint Standing Committees
August 2005

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. A subject index for each committee is included immediately before the bill summaries for that committee, and a numerical index by LD number is included 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 June 29, 2005; and for non-emergency legislation enacted in the First Special Session is September 17, 2005.

Joint Standing Committee on Health and Human Services

LD 107

**An Act Guaranteeing Freedom of Choice Regarding the
Disposition of One's Own Organs**

PUBLIC 208

<u>Sponsor(s)</u> FAIRCLOTH		<u>Committee Report</u> OTP		<u>Amendments Adopted</u>
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LD 107 proposed to remove the provision of law that allows the next of kin to a person who has expressed intent to donate that person's own body organ or tissue after death to override the intention of that person. It also proposed to remove the provision of law that requires that a donor card be signed in the presence of 2 witnesses who must sign the donor card in the presence of the donor. The bill proposed to clarify that a person may donate that person's own body organ or tissue after death by way of a will, a donor card, an electronic donor registry or a driver's license on which a designation is made by organ donor decal, code or notation.

Enacted law summary

Public Law 2005, chapter 208 repeals the law that allows the next of kin to a person who has expressed intent to donate that person's own body organ or tissue after death to override the intention of that person. It also repeals the provision of law that requires that a donor card be signed in the presence of 2 witnesses who must sign the donor card in the presence of the donor. The law also clarifies that a person may donate that person's own body organ or tissue after death by way of a will, a donor card, an electronic donor registry or a driver's license on which a designation is made by organ donor decal, code or notation.

LD 108

**An Act To Require the Department of Health and Human Services
To Analyze Costs before the Legislature Imposes Mandates**

ONTP

<u>Sponsor(s)</u> GLYNN		<u>Committee Report</u> ONTP MAJ OTP-AM MIN		<u>Amendments Adopted</u>
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LD 108 proposed to impose on the Legislature a mandate review procedure similar to the procedure used in health insurance matters. The procedure would apply to proposed mandates that would impose costs on physicians and health care providers licensed by the Department of Health and Human Services.

LD 129

**An Act To Plan for a Pilot Program for Distributing Unopened
Medicines and Medical Supplies**

P & S 20

<u>Sponsor(s)</u> WATSON		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> H-347
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LD 129 proposed to establish the unused prescription drug program under which unused prescription drugs are accepted and dispensed to low-income persons. To be eligible for the program a person must have a family income below 350% of the federal poverty level, must not be receiving MaineCare prescription drug benefits, must be a Maine resident and must have a valid prescription for the drug to be dispensed. The program would

Joint Standing Committee on Health and Human Services

accept unused and unopened prescription drugs from drug manufacturers, drug wholesale and terminal distributors, hospitals, health clinics, federally qualified health centers, Indian health centers and rural health centers and assisted living facilities licensed by the Department of Health and Human Services.

Enacted law summary

Private and Special Law 2005, chapter 20 directs the Department of Health and Human Services to begin planning for a pilot program for distributing unopened medicines and medical supplies that are not needed by the person for whom they were purchased and requires a report to the Joint Standing Committee on Health and Human Services prior to operation of the pilot program.

LD 134

An Act To Implement the Recommendations of the Commission To Study Public Health

ONTP

Sponsor(s)

Committee Report

Amendments Adopted

ONTP	MAJ
OTP-AM	MIN

LD 134 proposed to implement certain recommendations of the Commission to Study Public Health, which was created pursuant to Resolve 2003, chapter 95. The bill proposed to:

1. Create the Maine Obesity Prevention Fund, to be funded from sources determined by the Legislature to be contributing causes of obesity;
2. Extend the Commission to Study Public Health through the Second Regular Session of the 122nd Legislature;
3. Direct the Dirigo Health board and the Department of Health and Human Services to study and report on incentives provided to encourage purchases of healthy food and beverages;
4. Direct the Department of Administrative and Financial Services, Bureau of Human Resources, Division of Employee Health and Benefits to implement a comprehensive employee health program addressing obesity;
5. Direct the Department of Administrative and Financial Services to create an expedited bid process for pilot projects related to employee health;
6. Direct the Department of Labor, Bureau of Rehabilitation Services, Division of the Blind and Visually Impaired to pursue reforms that will increase the availability of healthy foods and beverages in cafeterias, snack bars and vending machines under the division's purview;
7. Direct the State Employee Health Commission to direct health insurance carriers who provide health coverage for state employees, retirees and MaineCare recipients to investigate, and possibly implement, potentially cost-saving services for obesity prevention among their insureds; and
8. Direct the Department of Professional and Financial Regulation, Bureau of Insurance to encourage all health insurance carriers to provide incentives for their insureds to make use of potentially cost-saving services for obesity prevention.