

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

Staff:

*Jane Orbeton, Senior Analyst
Lucia Nixon, Legislative Analyst
Patrick Norton, Deputy Director*

*Office of Policy and Legal Analysis
13 State House Station
Augusta, ME 04333
(207) 287-1670*

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Maine State Legislature

OFFICE OF POLICY & LEGAL ANALYSIS

13 State House Station, Room 215 Cross State Office Building
Augusta, Maine 04333-0013
Telephone: (207) 287-1670
Fax: (207) 287-1275

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 835

Resolve, To Establish the Blue Ribbon Commission on the Future of MaineCare

**RESOLVE 117
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CURLEY ROTUNDO	OTP-AM	H-523 S-381 GAGNON

LD 835 proposed to create the Blue Ribbon Commission on the Future of MaineCare. The commission, would be composed of 6 persons, is appointed by the Governor, President of the Senate and Speaker of the House. The commission would be directed to study the future of the MaineCare program, options for coverage, models for financing and coordination with individual and group coverage. The commission would also be required to examine the public policy, various models of responsibility for health care and alternatives for funding and fiscal stability. The commission would be directed to provide recommendations for the future of the MaineCare program. The commission may hold public hearings and public meetings. The commission would be directed to consult with the MaineCare Advisory Committee, the Maine Quality Forum, the Advisory Council on Health Systems Development and associations of health care providers, employers providing health benefits and health carriers. Commission staffing may be provided by the Legislative Council. The Department of Health and Human Services, the Governor's Office of Health Policy and Finance, the Maine Health Data Organization and the Maine Health Data Processing Center would be directed to provide information and assistance as requested to provide reports and any accompanying legislation by January 1, 2006 and December 1, 2006.

Enacted law summary

Resolve 2005, chapter 117 creates the Blue Ribbon Commission on the Future of MaineCare. The commission, composed of 10 persons, is directed to study the MaineCare program and make recommendations on how to improve the quality, adequacy, effectiveness and delivery of services under the program in the most cost-effective manner possible in an effort to ensure its sustainability over time, including various options for providing coverage for persons in need of health care services. In conducting this study, the commission is required to make recommendations about the extent to which MaineCare is meeting its current and future responsibilities; review the effectiveness of various models in financing and providing health care coverage to low-income and vulnerable populations; study and report on eligibility levels, service benefits, expenditures and other factors affecting future costs under the MaineCare program; estimate future program costs; review and summarize the economic impact of MaineCare, including its role in maintaining Maine's health care provider network; provide an analysis of changes in funding and health care policy at the federal level, including changes in the federal match rate formula and how such changes will affect MaineCare; and review and make recommendations related to actions taken by the federal Bipartisan Commission on Medicaid and the Medically Underserved.

Commission staffing may be provided by the Office of Policy and Legal Analysis and the Office of Fiscal and Program Review. The Department of Health and Human Services, the Governor's Office of Health Policy and Finance, the Maine Health Data Organization and the Maine Health Data Processing Center are directed to provide information and assistance as requested. The commission is required to provide a report and any accompanying legislation by December 7, 2005. The commission is authorized to accept outside funds to fund any necessary expenses of the commission beyond legislative per diem and expenses of commission members.

Resolve 2005, chapter 117 was finally passed as an emergency measure effective June 21, 2005.