

MAINE STATE LEGISLATURE

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*State Of Maine
122nd Legislature*

Second Regular Session

Bill Summaries

*Joint Standing Committee
on
Health and Human Services*

July 2006

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Maine State Legislature



Office of Policy and Legal Analysis Office of Fiscal and Program Review

122nd Maine Legislature Second Regular 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 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:

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
P&S XXX.....	Chapter # of enacted Private & Special Law
PASSED.....	Joint Order passed in both bodies
PUBLIC XXX.....	Chapter # of enacted Public Law
RESOLVE XXX.....	Chapter # of finally passed Resolve
UNSIGNED (Pocket Veto).....	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 August 23, 2006.

Joint Standing Committee on Health and Human Services

LD 699

An Act To Repeal Tax and Match

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u> NASS R	<u>Committee Report</u> ONTP MAJ OTP-AM MIN	<u>Amendments Adopted</u> S-193
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LD 699 proposed to repeal the service provider tax imposed on private nonmedical institution services and the tax imposed on health care providers, hospitals and nursing homes.

LD 846

Resolve, Regarding Hospital Free Care Guidelines

RESOLVE 148

<u>Sponsor(s)</u> LERMAN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-816
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LD 846 proposed to limit a hospital licensed under the Maine Revised Statutes, Title 22, chapter 405 in the amount the hospital may bill a person who has been served in an inpatient or outpatient capacity and who does not have health insurance or other health coverage beginning January 1, 2006. The limit would be 150% of the reimbursement rate provided by the MaineCare program for the same inpatient or outpatient service.

Committee Amendment “A” (H-816) proposed to replace the bill and substitute a resolve. The amendment proposed to direct the Department of Health and Human Services to amend its routine technical rules on hospital free care guidelines to provide for eligibility for free care for persons below 150% of the federal nonfarm income official poverty line by October 1, 2006.

Enacted law summary

Resolves 2005, chapter 148 directs the Department of Health and Human Services to amend its rules on hospital free care guidelines by October 1, 2006 to provide for eligibility for free care for persons below 150% of the federal nonfarm income official poverty line.

LD 904

An Act To Create the Maine Asthma and Lung Disease Research Fund

PUBLIC 672

<u>Sponsor(s)</u> MARTIN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-294 S-681 ROTUNDO
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LD 904 proposed to establish the Maine Asthma and Lung Disease Research Fund in the Department of Health and Human Services, Bureau of Health to provide grants for research into the health effects of indoor and outdoor air pollution and the prevention, causes, treatment and cure of lung diseases such as asthma, emphysema and chronic obstructive pulmonary disease. The funding source of the fund would be a voluntary checkoff on the

Joint Standing Committee on Health and Human Services

individual income tax form that allows a taxpayer to donate a portion of a tax refund or make a donation with the tax return.

Committee Amendment “A” (S-294) proposed to add an appropriations and allocations section to the bill.

Senate Amendment “A” to Committee Amendment “A” (S-681) proposed to change the application date from tax years beginning on and after January 1, 2005 to January 1, 2006. It proposed to require the Commissioner of Administrative and Financial Services to seek outside funds to support the fiscal year 2006-07 start-up costs of the Maine Asthma and Lung Disease Research Fund income tax checkoff and provide that the bill becomes effective 90 days after the commissioner certifies that the necessary funds have been received. It also proposed to adjust the appropriations and allocations section in Committee Amendment “A” to reflect these changes.

This amendment also proposed to change the statutory allocation of the checkoff to avoid a numbering conflict.

Enacted law summary

Public Law 2005, chapter 672 establishes the Maine Asthma and Lung Disease Research Fund in the Department of Health and Human Services, Bureau of Health to provide grants for research into the health effects of indoor and outdoor air pollution and the prevention, causes, treatment and cure of lung diseases such as asthma, emphysema and chronic obstructive pulmonary disease. The funding source of the fund is a voluntary checkoff on the individual income tax form that allows a taxpayer to donate a portion of a tax refund or make a donation with the tax return.

The application date is tax years beginning on and after January 1, 2006. The Commissioner of Administrative and Financial Services is directed to seek outside funds to support the fiscal year 2006-07 start-up costs of the Maine Asthma and Lung Disease Research Fund income tax checkoff. The law becomes effective 90 days after the commissioner certifies that the necessary funds have been received.

LD 950

An Act To Allow the Shipment of Cigars into Maine

ONTP

<u>Sponsor(s)</u> PLOWMAN		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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LD 950 proposed to provide exceptions for cigars to the laws governing delivery sales of tobacco products in the State.

LD 1036

An Act To Amend the Laws Governing the Burial or Cremation of Certain Persons

PUBLIC 483

<u>Sponsor(s)</u> MAYO BARSTOW		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> S-456
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LD 1036 proposed to reduce the time frame for a decision on burial benefits under general assistance from 10 to 2 days. In addition, this bill proposed to reduce the pool of relatives responsible for burial or cremation costs.