

# 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](http://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 1555**

**Resolve, Directing the Department of Health and Human Services  
To Review How It Handles Services Provided to Persons with  
Developmental Disabilities and Mental Retardation**

**RESOLVE 147**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LERMAN NASS R	OTP-AM	H-815

LD 1555 proposed to address the following issues in the field of community-based services for persons with developmental disabilities and mental retardation: reimbursement, audit and appeal procedures, rules, regulations and administrative requirements, standardized data, contract formats and financial reports, medication courses, deemed status licensure, maintenance of the Child Development Services System, gastrostomy tubes, rules regarding residential options, advocacy regarding federal legislation, cost-of-living adjustments and Dirigo Health insurance.

**Committee Amendment “A” (H-815)** proposed to replace the bill and make it a resolve. The amendment proposed to relate to providers of services to persons with developmental disabilities and mental retardation. This amendment proposed to require the Department of Health and Human Services to post provider payment interpretations on the Internet, to develop a medication administration curriculum and to determine whether cost-of-living adjustments will be included in the department's budget request that is submitted to the Governor.

***Enacted law summary***

Resolve 2005, chapter 147 relates to providers of services to persons with developmental disabilities and mental retardation. This resolve requires the Department of Health and Human Services to post provider payment interpretations on the Internet, to develop a medication administration curriculum and to determine whether cost-of-living adjustments will be included in the department's budget request that is submitted to the Governor.

**LD 1614**

**Resolve, Regarding Comprehensive Community Health Coalitions**

**RESOLVE 139  
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ROSEN R PINGREE	OTP-AM	S-455

LD 1614 propose to establish the Commission to Certify and Recertify Comprehensive Community Health Coalitions, to establish a system of comprehensive community health coalitions and to appropriate \$200,000 in fiscal year 2006-07 for the Commission to Certify and Recertify Comprehensive Community Health Coalitions, effective January 1, 2006.

**Committee Amendment “A” (S-455)** proposed to replace the bill and change it to a resolve. The amendment proposed to add emergency language to the resolve. The amendment proposed to require the Department of Health and Human Services to recognize and partner with comprehensive community health coalitions. The amendment proposed to direct the Public Health Work Group created under the State Health Plan to form 2 subcommittees to work on core competencies, functions and performance standards for comprehensive community health coalitions and to inventory resources and develop a plan to integrate some funding sources to