

State Of Maine 122nd Legislature

Second Regular Session

Bill Summaries

Joint Standing Committee on Health and Human Services

July 2006

<u>Members:</u> Sen. Arthur F. Mayo III, Chair Sen. John L. Martin Sen. Richard W. Rosen

Rep. Hannah Pingree, Chair Rep. William R. Walcott Rep. Carol A. Grose Rep. Richard J. Burns Rep. Elizabeth S. Miller Rep. David C. Webster Rep. Thomas F. Shields Rep. James J. Campbell, Sr. Rep. Sarah O. Lewin Rep. Kevin J. Glynn Rep. Michael Sockalexis

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Maine State Legislature



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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, <u>History and Final Disposition of Legislative Documents</u>, 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	
DIED IN CONCURRENCEOne	body accepts ONTP report; the other indefinitely postpones the bill
DIED ON ADJOURNMENT	
EMERGENCY	Enacted law takes effect sooner than 90 days
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: hill died
INDEF PP	Bill Indefinitely Postponed
ONTP	
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	Bill held by Governor

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

Pubic Law 2005, chapter 648 authorizes the Department of Health and Human Services to adopt rules with retroactive application to increase provider reimbursement in order to ensure access to covered medically necessary services for MaineCare members. The law also repeals the repeal date of July 1, 2006 on the authority of the department to adopt rules with retroactive application.

The law directs the MaineCare Advisory Committee to review the report of the Blue Ribbon Commission on the Future of MaineCare with the goal of identifying initiatives for continuing improvement and monitoring changes in the federal Medicaid program and directs the committee to report to the Joint Standing Committee on Health and Human Services any recommendations for legislation or rulemaking in an initial report by September 1, 2006 and a final report by January 1, 2007.

Enacted as an emergency Public Law 2005, chapter 648 takes effect May 30, 2006.

LD 1760 An Act To Amend the Maine Health Data Organization and Maine PUBLIC 565 Health Data Processing Center Laws

Sponsor(s)	Committee Report		Amendments Adopted
MAYO	OTP-AM	MAJ	S-515
MILLER	OTP-AM	MIN	

LD 1760 proposed to clarify that dental services are not limited benefit health insurance polices and are subject to assessment of permanent funding under the Maine Health Data Organization laws.

Committee Amendment "A" (S-515) proposed to allow the Maine Health Data Processing Center to receive and process claims from entities outside the State and specified how the net earnings of the center must be distributed. It proposed to require the Maine Health Data Organization board of directors to report those net earnings each year and to increase the fine from \$250,000 to \$500,000 for a person who receives and uses data of the Maine Health Data Organization for commercial advantage, pecuniary or personal gain or malicious harm.

Enacted law summary

Public Law 2005, chapter 565 specifies that, under the Maine Health Data Organization laws, dental service policies are not considered limited benefit health insurance polices and are subject to the permanent funding assessment. It allows the Maine Health Data Processing Center to receive and process claims from entities outside the State, specifies how the net earnings of the center must be distributed and requires the Maine Health Data Organization board of directors to report those net earnings each year. It also increases the fine from \$250,000 to \$500,000 for a person who receives and uses data of the Maine Health Data Organization for commercial advantage, pecuniary or personal gain or malicious harm.

LD 1784

Resolve, To Clarify Contingency Allowance under the Certificate of Need Law

Sponsor(s)	Committee Report	Amendments Adopted
ROSEN R	OTP-AM	S-548

RESOLVE 185

EMERGENCY

Joint Standing Committee on Health and Human Services

LD 1784 proposed to require the Department of Health and Human Services to allow construction contingency budgeting for capital projects in a certificate of need application that is consistent with industry standards.

Committee Amendment "A" (S-548) proposed to change the Act to a Resolve and proposed to direct the Department of Health and Human Services to revise or adopt rules as needed to provide for a contingency allowance of 5% to 8% depending on the type of project, as defined in the rules, in issuing a certificate of need. It proposed that there be no cap on the contingency allowance other than the applicable percentage and proposed to require the department to repeal the current cap of \$1,000,000.

Enacted law summary

Resolve 2005, chapter 185 directs the Department of Health and Human Services to revise or adopt rules as needed to provide for a contingency allowance of 5% to 8% depending on the type of project, as defined in the rules, in issuing a certificate of need. The contingency allowance may not be subject to an additional cap other than the applicable percentage and the department shall repeal the current cap of \$1,000,000. The law defines the related rules as routine technical rules.

Resolve 2005, chapter 185 was enacted as an emergency measure effective April 13, 2006.

LD 1808 An Act To Streamline MaineCare Billing ONTP

Sponsor(s)Committee ReportAmendments AdoptedFISCHERONTP

LD 1808, proposed to direct the Department of Health and Human Services to adopt procedures for MaineCare claims so that a provider could directly bill MaineCare when the provider thought there was no health insurance carrier to cover the claim. Also the bill proposed to allow health care providers to bill using commercial health insurance billing codes.

LD 1814Resolve, To Establish the Work Group To Review and
Recommend Improvements for the Certificate of Need ProgramDIED BETWEEN
BODIES

Sponsor(s)	Committee Report		Amendments Adopted
MILLER	OTP-AM	MAJ	H-934
MAYO	ONTP	MIN	

LD 1814, presented as a concept draft pursuant to Joint Rule 208, proposed to amend the certificate of need program within the Department of Health and Human Services. It proposed to lower the dollar amounts for the thresholds for review, add requirements for reporting regarding projects that do not require review, add methods for determining community need, replace the current method of relying on utilization rates, clarify the roles for other state agencies and offices, and impose upon the certificate of need process the adjudicatory hearings procedures applicable under the Maine Administrative Procedure Act, which include the use of an impartial hearing officer who would make a recommendation to the Commissioner of Health and Human Services.