

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 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

<u>Sponsor(s)</u> FISCHER		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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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 1814

Resolve, To Establish the Work Group To Review and Recommend Improvements for the Certificate of Need Program

DIED BETWEEN BODIES

<u>Sponsor(s)</u> MILLER MAYO		<u>Committee Report</u> OTP-AM MAJ ONTP MIN		<u>Amendments Adopted</u> H-934
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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.