

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 1994

Resolve, To Preserve Patient Records

RESOLVE 164

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SMITH W BARTLETT	OTP-AM	H-882

LD 1994 proposed to provide that a hospital or health care practitioner may not destroy an image of a patient recorded using x rays, magnetic resonance imaging or computerized tomography without the consent of the patient.

Committee Amendment “A” (H-882) proposed to replace the bill and change it to a resolve. It proposed to direct the Department of Health and Human Services to amend the rules regarding licensing for general and specialty hospitals and ambulatory surgical facilities to require general public notice or notice to a patient when hospitals and facilities plan to destroy or purge images of a patient that were made using x rays, magnetic resonance imaging or computerized tomography. The amendment proposed to designate the rules as routine technical rules.

Enacted law summary

Resolve 2005, chapter 164 directs the Department of Health and Human Services to amend the rules regarding licensing for general and specialty hospitals and ambulatory surgical facilities to require general public notice or notice to a patient when hospitals and facilities plan to destroy or purge images of a patient that were made using x rays, magnetic resonance imaging or computerized tomography. The resolve designates the rules as routine technical rules.

LD 1995

**Resolve, Directing the Department of Health and Human Services
To Amend Its Rules To Ensure Efficiencies in the Billing and
Delivery of Outpatient Clinical Services**

RESOLVE 203

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BURNS BRENNAN	OTP-AM	H-1033 H-1045 PINGREE

LD 1995 proposed to direct the department to amend its rules governing reimbursement under MaineCare to allow for reimbursement to providers of outpatient clinical services who practice independently. Under rules adopted by the Department of Health and Human Services, certain providers of outpatient clinical services may be reimbursed for services provided to MaineCare members only if the service providers are affiliated with an agency.

Committee Amendment “A” (H-1033) proposed to require the Department of Health and Human Services to amend the MaineCare rules for licensed clinical social workers, licensed marriage and family therapists, licensed pastoral counselors and licensed professional counselors to provide additional standards in order to coordinate and integrate with MaineCare-managed behavioral health care services. The amendment proposed to tie

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implementation of the rule changes to the beginning of managed behavioral health care services. The amendment proposed to designate the rules as routine technical rules.

Implementation of the rule changes and broadened reimbursement rules for licensed clinical social workers, licensed marriage and family therapists, licensed pastoral counselors and licensed clinical professional counselors practicing independently would take place in coordination with and at the same time as the department's initiative in managed behavioral health care services under the MaineCare program.

House Amendment "A" to Committee Amendment "A" (H-1045) proposed to require the Department of Health and Human Services, in implementing managed behavioral health care services and consistent with budgeted savings, to amend its rules to allow MaineCare reimbursement to outpatient behavioral health care clinical service providers who practice independently and who participate in the department's managed care initiative.

Enacted law summary

Resolve 2005, chapter 203 requires the Department of Health and Human Services, in implementing managed behavioral health care services and consistent with budgeted savings, to amend its rules to allow MaineCare reimbursement to outpatient behavioral health care clinical service providers who practice independently and who participate in the department's managed care initiative.

LD 2000

Resolve, To Ensure Appropriate Reimbursement of Rising Heating Costs for Long-term Care Facilities

**DIED ON
ADJOURNMENT**

<u>Sponsor(s)</u> RICHARDSON J		<u>Committee Report</u> OTP-AM		<u>Amendments Adopted</u> H-963
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LD 2000 proposed to require the Department of Health and Human Services to amend its principles of reimbursement for long-term care facilities to provide proper recognition of rapidly rising energy costs. The changes would affect each of the next 3 fiscal years for these facilities. Under the bill, these costs will be reclassified as fixed costs that are fully reimbursed and will no longer be subject to routine cost caps. For those private nonmedical institutions that receive predetermined room and board rates, these rates would be adjusted upward over the next 3 fiscal years to provide sufficient reimbursement to cover rapidly rising energy costs.

Committee Amendment "A" (H-963) proposed to direct the Department of Health and Human Services to amend the rules for reimbursing nursing and residential care facilities to rebase the heating costs incorporated in the routine cost component. The amendment proposed to appropriate \$494,508 in fiscal year 2007 for residential care facilities and to appropriate \$308,453 in fiscal year 2007 and allocate \$529,278 in fiscal year 2007 for nursing facilities.