

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
123<sup>RD</sup> LEGISLATURE  
FIRST REGULAR SESSION



Summaries of bills and adopted amendments and laws enacted or finally passed during the First Regular Session of the 123<sup>rd</sup> Maine Legislature coming from the

**JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES**

July 2007

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# STATE OF MAINE

123<sup>RD</sup> LEGISLATURE

FIRST REGULAR SESSION

## LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS



This *Legislative Digest of Bill Summaries and Enacted Laws* summarizes all bills and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 123<sup>rd</sup> Maine Legislature, which was in session from December 6, 2006 to June 21, 2007.

The *Digest* is arranged alphabetically by committee, and within each committee by LD number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each bill title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. The appendices include a summary of relevant session statistics, an index of all bills by LD number and an index of enacted laws by law type and chapter number.

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 (or Accepted ONTP report).....	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.....	Bill held by Governor
VETO SUSTAINED.....	Legislature failed to override Governor's Veto

Please note that the effective date for non-emergency legislation enacted in the First Regular Session is **September 20, 2007**. The effective date for legislation enacted as an emergency measure is specified in the enacted law summary for those bills.

## Joint Standing Committee on Health and Human Services

### House Amendment "A" (H-553)

This amendment adds 4 members to the work group on the certificate of need program.

### Enacted Law Summary

Resolve 2007, chapter 110 directs the Department of Health and Human Services to convene a work group on the certificate of need program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008. The resolve authorizes the committee to submit legislation to the Second Regular Session of the 123rd Legislature.

### LD 1536      **Resolve, Directing the Department of Health and Human Services To Reform Maine's Noncategorical Medicaid Program**

ONTP

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

This resolve requires the Department of Health and Human Services to make reforms to the state Medicaid program for noncategorical Medicaid recipients that will contain costs until the State can sustain a more generous system. It would require the department to evaluate the program and propose reforms to the Second Regular Session of the 123rd Legislature and any legislation needed to implement reforms. The resolve requires the department to limit the eligibility and benefits for noncategorical Medicaid recipients during fiscal years when the state and local tax burden ranks in the highest 1/3 of all states as determined by the Revenue Forecasting Committee, the State Tax Assessor and nongovernmental organizations that represent differing viewpoints, including the Maine Center for Economic Policy and the Maine Economic Research Institute. It would allow the department to increase benefits only when the state and local tax burden ranks in the middle 1/3 of all states as determined by the Revenue Forecasting Committee, the State Tax Assessor and nongovernmental organizations that represent differing viewpoints.

### LD 1537      **Resolve, To Review Remote Access Medicine, Hospice and Home Health Care under MaineCare**

RESOLVE 111

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PINGREE	OTP-AM	H-484

This resolve requires the Department of Health and Human Services to adjust the rates for home health agencies providing care under the MaineCare program and to add an annual review and adjustment. The rules, which are designated as routine technical rules, must be amended by October 1, 2007. The resolve also directs the department to assess the impact of providing home care and hospice benefits to MaineCare members enrolled under the noncategorical adult waiver and to report to the Joint Standing Committee on Health and Human Services by December 1, 2007.

### Committee Amendment "A" (H-484)

This amendment provides a new title and replaces the resolve. The amendment directs the Department of Health and Human Services to review certain aspects of the MaineCare program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 with recommendations for legislation and rule and funding changes. The aspects that must be reviewed include MaineCare reimbursement for remote access medicine and hospice and home health care benefits for noncategorical adults. The joint standing committee is authorized to submit legislation to the Second Regular Session of the 123rd Legislature.

### Enacted Law Summary

## *Joint Standing Committee on Health and Human Services*

Resolve 2007, chapter 111 directs the Department of Health and Human Services to review certain aspects of the MaineCare program and to report to the Joint Standing Committee on Health and Human Services by January 15, 2008 with recommendations for legislation and rule and funding changes. The aspects that must be reviewed include MaineCare reimbursement for remote access medicine and hospice and home health care benefits for noncategorical adults. The joint standing committee is authorized to submit legislation to the Second Regular Session of the 123rd Legislature.

**LD 1566     An Act To Allow the State Timely Opportunity To Participate in  
Settlement Negotiations for MaineCare Benefits**

**PUBLIC 381**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WEBSTER	OTP-AM	S-306    BRANNIGAN

Current Maine law requires recipients or their attorneys to notify the Department of Health and Human Services when they make a claim to recover the medical costs that were paid by MaineCare. The current law does not specify when the notification must be made. A recent U.S. Supreme Court decision, *Arkansas v. Ahlborn*, requires states to further refine their laws to allow states to participate in negotiations in a timely manner. This bill grants the State that authority by requiring that notification be made prior to when settlement negotiations begin.

**Senate Amendment "A" (S-306)**

This amendment clarifies the obligation to provide notice to the Department of Health and Human Services when a MaineCare recipient has received benefits paid for by the MaineCare program.

**Enacted Law Summary**

Public Law 2007, chapter 381 clarifies the obligation to notify the Department of Health and Human Services when a MaineCare recipient's claim for medical expenses paid by MaineCare is negotiated to settlement or paid.

**LD 1567     Resolve, To Demonstrate Cost Savings by Preventing the Onset of  
Severe Mental Illness in Youth**

**CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EBERLE		H-204

This resolve directs the Department of Health and Human Services to initiate a demonstration program to determine whether the methods used by the Portland Identification and Early Referral Program (PIER) can have the effect of preventing a substantial number of new cases of psychosis and psychotic disorders in young people from 12 years of age to 25 years of age. The demonstration program would provide financial resources to PIER to continue to prevent new cases of psychosis and psychotic disorders in the greater Portland area and would provide training and consultation necessary to ensure that a new program developed in the State will be as effective and reliable as PIER.

**Committee Amendment "A" (H-204)**

This amendment adds a calculation and transfer section allowing the State Budget Officer to distribute costs associated with this program among various accounts within the Department of Health and Human Services and adds an appropriations and allocations section to the resolve.

This bill was carried over to any special or regular session of the 123rd Legislature by Joint Order, HP 1369.