

$\begin{array}{c} \textbf{STATE OF MAINE} \\ 124^{\text{TH}} \text{ Legislature} \\ \text{First Regular Session} \end{array}$



Summaries of bills, adopted amendments and laws enacted or finally passed during the First Regular Session of the 124th Maine Legislature coming from the

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

July 2009

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STATE OF MAINE

124th 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 124th Maine Legislature.

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:

CARRIED OVER	Carried over to a subsequent session of the Legislature
CON RES XXX Chapte	r # 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	s 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
	AGE 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; bill died
ONTP (or Accepted ONTP report)	
<i>P&S XXX</i>	Chapter # of enacted Private & Special Law
PUBLIC XXX	Chapter # of enacted Public Law
RESOLVE XXX	Chapter # of finally passed Resolve
UNSIGNED	
	Legislature failed to override Governor's Veto

The effective date for non-emergency legislation enacted in the First Regular Session of the 124th Legislature is September 12, 2009. 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

LD 1354 Resolve, Directing the Department of Health and Human Services To Limit Prescriptions for Narcotic Drugs under MaineCare without Prior Authorization

ONTP

Sponsor(s) MILLS P Committee Report ONTP Amendments Adopted

This resolve directs the Department of Health and Human Services to:

1. Require that narcotic prescription drugs for each MaineCare patient be prescribed by a single medical provider unless prior authorization is obtained;

2. Require that narcotic prescription drugs for each MaineCare patient be dispensed by only one pharmacy or drug dispenser at a time unless prior authorization is obtained;

3. Require that narcotic prescription drugs for MaineCare patients not be prescribed for the treatment of pain arising from a noncancerous or nonterminal condition beyond a period of 30 days except by prior authorization; and

4. Require that narcotic prescription drugs for MaineCare patients not be prescribed for the treatment of chronic pain arising from a noncancerous or nonterminal condition except by a physician recognized by MaineCare as having specialized training and expertise in managing patients suffering from chronic pain.

LD 1359 An Act To Improve the Use of Data from the Controlled Substances Prescription Monitoring Program

PUBLIC 298

Sponsor(s)	Committee Report	Amendments Adopted
MILLS P	OTP-AM MAJ ONTP MIN	S-125

This bill amends the Controlled Substances Prescription Monitoring Program as follows:

1. It provides that "dispenser" includes a prescriber and a licensed substance abuse treatment program, such as a methadone clinic, that administers or dispenses controlled substances. It further clarifies that "prescriber" includes nonphysician prescribers.

2. It requires the Department of Public Safety, State Bureau of Identification to report to the Controlled Substances Prescription Monitoring Program information related to arrests and convictions for crimes that include the use, possession, furnishing, sale or diversion of a controlled substance.

3. It requires the Office of the Chief Medical Examiner to file with the Controlled Substances Prescription Monitoring Program information concerning the death of a person in which a controlled substance or other drug may have contributed to the person's death.

4. If the Office of the Chief Medical Examiner has reported to the Controlled Substances Prescription Monitoring Program that a controlled substance or other drug may have contributed to a person's death, it requires the program to notify all prescribers and dispensers who reported information pertaining to the deceased person.

Joint Standing Committee on Health and Human Services

5. It authorizes health care licensing boards to make the determination of "reasonable cause" that would allow the boards access to prescription monitoring information.

6. It expands access to prescription monitoring information to the MaineCare program and the Office of the Chief Medical Examiner and contains provisions regarding the confidentiality of prescription monitoring information possessed by the Office of the Chief Medical Examiner.

7. It directs the Department of Health and Human Services, Office of Substance Abuse to adopt rules to implement the law.

Committee Amendment "A" (S-125)

This amendment is the majority report of the committee. It replaces the bill. It authorizes release of information from the Controlled Substances Prescription Monitoring Program under the Maine Revised Statutes, Title 22, chapter 1603 to the MaineCare program for the purposes of managing care, monitoring the purchase of controlled substances and avoiding duplicate dispensing of controlled substances.

Enacted Law Summary

Public Law 2009, chapter 298 authorizes release of information from the Controlled Substances Prescription Monitoring Program under the Maine Revised Statutes, Title 22, chapter 1603 to the MaineCare program for the purposes of managing care, monitoring the purchase of controlled substances and avoiding duplicate dispensing of controlled substances.

LD 1360 An Act To Allow Law Enforcement and Family Members To Petition the District Court To Initiate Assisted Outpatient Treatment

Carried Over

Sponsor(s)	Committee Report	Amendments Adopted
NUTTING J		

This bill enables law enforcement or a family member of a person with a severe and persistent mental illness who is in need of assisted outpatient treatment to petition the District Court for an order that the person must participate in assisted outpatient treatment. The assisted outpatient treatment order lasts for 6 months and is renewable for an additional 12 months. The application, hearing, review and appeal process includes notice, a mental health examination, court-appointed or retained counsel, the right to present evidence and cross-examine witnesses and a record of the proceedings. The order to participate in assisted outpatient treatment includes within it an individualized treatment plan.

The bill requires the Department of Health and Human Services to provide community mental health services, including assignment of an assertive community treatment team, for a person who is ordered to participate in assisted outpatient treatment.

The bill requires providers of mental health services who apply for grants and contracts with the Department of Health and Human Services to provide community mental health treatment to persons ordered by a court to participate in assisted outpatient treatment.

The bill includes as a duty of the Department of Health and Human Services, under the category of safety net services, providing services for persons ordered to participate in assisted outpatient treatment.

This bill requires pharmacy benefits managers to register with the Department of Professional and Financial