# MAINE STATE LEGISLATURE

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## STATE OF MAINE

124<sup>TH</sup> LEGISLATURE FIRST REGULAR SESSION



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

# JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

July 2009

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## STATE OF MAINE

124<sup>th</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 124<sup>th</sup> 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
	# 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 PASSA	AGE Emergency bill failed to get 2/3 vote
	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)	Ought Not To Pass report accepted; bill died
P&S XXX	
PUBLIC XXX	
RESOLVE XXX	Chapter # of finally passed Resolve
	Bill held by Governor
VETO SUSTAINED	Legislature failed to override Governor's Veto

The effective date for non-emergency legislation enacted in the First Regular Session of the 124<sup>th</sup> 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

- 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

## Joint Standing Committee on Health and Human Services

Regulation, Bureau of Insurance before entering into any contracts for pharmacy benefits management in the State. The bill also sets forth standards for audits conducted by pharmacy benefits managers. The bill requires the State Auditor to develop audit procedures to ensure state agencies that have pharmacy benefits management contracts are compliant with state law relating to pharmacy benefits management and prescription drug rebates. The bill also expands the privacy provisions applicable to pharmacy benefits managers to ensure that patient prescription information, even deidentified information, is not used directly by the pharmacy benefits manager or sold by or transferred to others for use in pharmaceutical marketing or by insurance companies in making benefits decisions.

This bill was carried over to any special or regular session of the 124th Legislature by Joint Order, H.P. 1053.

### LD 1363 An Act To Establish and Promote Statewide Collaboration and Coordination in Public Health Activities and To Enact a Universal Wellness Initiative

PUBLIC 355

Sponsor(s)	Committee Report	Amendments Adopted
MILLER ROSEN R	OTP-AM	H-407
ROSEN K		H-436 PERRY A

This bill coordinates and streamlines the public health system in this State. It prepares the state public health system for national federally recognized public health accreditation and ensures the effective, efficient and evidence-based delivery of essential public health services. The bill recognizes and formally establishes Healthy Maine Partnerships, district coordinating councils for public health and the Statewide Coordinating Council for Public Health.

The bill also establishes a universal wellness initiative using the existing resources of the public health infrastructure. The initiative requires the development and distribution of a resource toolkit for the uninsured and a health risk assessment for all people of the State with a focus on the uninsured and those facing health disparities. It also requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention to issue an annual report card on health for each public health district in the State and for the state health plan to publish the report cards.

#### Committee Amendment "A" (H-407)

This amendment provides a definition for "municipal health department" and provides for accreditation of municipal health departments. It adds a provision that allows municipal health departments to enter into data-sharing agreements with the Department of Health and Human Services if the agreement protects the confidentiality and security of individually identifiable health information.

#### House Amendment "A" (H-436)

This amendment removes from the membership of the Statewide Coordinating Council for Public Health the 4 appointed Legislators.

#### **Enacted Law Summary**

Public Law 2009, chapter 355 coordinates and streamlines the public health system in this State. It prepares the state public health system for national federally recognized public health accreditation and ensures the effective, efficient and evidence-based delivery of essential public health services. The law recognizes and formally