

MAINE STATE LEGISLATURE

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STATE OF MAINE
125TH LEGISLATURE
SECOND REGULAR SESSION



Summaries of bills, adopted amendments and laws enacted or finally passed

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

June 2012

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STATE OF MAINE

125TH LEGISLATURE
SECOND REGULAR SESSION



LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* summarizes all LDs and adopted amendments and all laws enacted or finally passed during the Second Regular Session of the 125th Maine Legislature.

The *Digest* is arranged alphabetically by committee and within each committee by Legislative Document (LD) number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each LD 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 LD is noted to the right of the LD title. The following describes the various final actions.

<i>CARRIED OVER</i>	<i>carried over to a subsequent session of the Legislature</i>
<i>CON RES XXX</i>	<i>chapter # of constitutional resolution passed by both houses</i>
<i>CONF CMTE UNABLE TO AGREE</i>	<i>Committee of Conference unable to agree; legislation died</i>
<i>DIED BETWEEN HOUSES</i>	<i>House & Senate disagreed; legislation died</i>
<i>DIED IN CONCURRENCE</i>	<i>defeated in each house, but on different motions; legislation died</i>
<i>DIED ON ADJOURNMENT</i>	<i>action incomplete when session ended; legislation died</i>
<i>EMERGENCY</i>	<i>enacted law takes effect sooner than 90 days after session adjournment</i>
<i>FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE</i>	<i>emergency failed to receive required 2/3 vote</i>
<i>FAILED, ENACTMENT or FINAL PASSAGE</i>	<i>failed to receive final majority vote</i>
<i>FAILED, MANDATE ENACTMENT</i>	<i>legislation proposing local mandate failed required 2/3 vote</i>
<i>HELD BY GOVERNOR</i>	<i>Governor has not signed; final disposition to be determined at subsequent session</i>
<i>LEAVE TO WITHDRAW</i>	<i>sponsor's request to withdraw legislation granted</i>
<i>NOT PROPERLY BEFORE THE BODY</i>	<i>ruled out of order by the presiding officer; legislation died</i>
<i>INDEF PP</i>	<i>indefinitely postponed; legislation died</i>
<i>ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X</i> ...	<i>ought-not-to-pass report accepted; legislation died</i>
<i>P&S XXX</i>	<i>chapter # of enacted private & special law</i>
<i>PUBLIC XXX</i>	<i>chapter # of enacted public Law</i>
<i>RESOLVE XXX</i>	<i>chapter # of finally passed resolve</i>
<i>VETO SUSTAINED</i>	<i>Legislature failed to override Governor's veto</i>

The effective date for non-emergency legislation enacted in the Second Regular Session of the 125th Legislature is Thursday, August 30, 2012. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

Joint Standing Committee on Health and Human Services

LD 612 **An Act To Provide Reimbursement for Medication Therapy Management Services** **ONTP**

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

This bill was carried over from the First Regular Session of the 125th Legislature.

This bill creates a category of pharmacy services, designated as medication therapy management services, for which pharmacists may charge separately from a charge for the prescription drug or a dispensing fee. The bill defines "medication therapy management services," "qualified pharmacist" and "targeted patient." The bill authorizes the MaineCare program to reimburse for these services if they are found by the Commissioner of Health and Human Services to be cost-effective. The bill requires health insurance carriers to pay for medication therapy management services to targeted patients by qualified pharmacists if the carrier provides coverage for prescription drugs. This bill requires an evaluation by the Commissioner of Health and Human Services of the effect of medication therapy management services by January 1, 2017, and establishes the Medication Therapy Management Advisory Committee to advise the Superintendent of Insurance within the Department of Professional and Financial Regulation on implementation of medication therapy management services.

LD 646 **An Act To Ensure the Safety of Children in the MaineCare Program Who Are Prescribed Antipsychotic Medications** **ONTP**

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

This bill was carried over from the First Regular Session of the 125th Legislature.

This bill provides specific requirements for the provision of antipsychotic medications to children in the MaineCare program. It provides for uses approved and for uses not approved by the United States Department of Health and Human Services, Food and Drug Administration. It provides for documentation in the child's health care record and for monitoring for effectiveness and side effects. It directs the Department of Health and Human Services to adopt routine technical rules to implement the new requirements.

LD 806 **An Act To Increase Access to Information Regarding Health Care Facility and Practitioner Payments** **PUBLIC 525**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BERRY LANGLEY	OTP-AM	H-719

Joint Standing Committee on Health and Human Services

This bill was carried over from the First Regular Session of the 125th Legislature.

This bill requires a licensed hospital to post in the hospital in an area used by the public a list of prices charged by the hospital for the 100 most commonly performed procedures in the hospital. The hospital shall also post a link or page on its publicly accessible website stating its pricing policy and current prices for the 100 most commonly performed procedures in the hospital. The bill requires ambulatory surgical facilities to post similar price lists. The bill requires review and a report on hospital efforts to control costs from the Office of Program Evaluation and Government Accountability.

Committee Amendment "A" (H-719)

This amendment replaces the bill. It provides a new title. It requires the Maine Health Data Organization, when posting on its website price information regarding health care facilities and practitioners, to post the information semiannually, to post information that is current to within 12 months of the date of submission of the information and to display on the website the date of posting, beginning October 1, 2012.

Enacted Law Summary

Public Law 2011, chapter 525, beginning October 1, 2012, requires the Maine Health Data Organization, when posting on its website price information regarding health care facilities and practitioners, to post the information semiannually, to be current to within 12 months of the date of submission of the information and to display the date of posting.

LD 897 An Act To Amend the Application Process for the Progressive Treatment Program

PUBLIC 492

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HILL	OTP-AM	S-389

This bill was carried over from the First Regular Session of the 125th Legislature.

Current law limits who may obtain an order from the District Court to admit a patient to a progressive treatment program. This bill allows a health officer, law enforcement officer or any other person to obtain the order. The bill also requires that when an examiner forms an opinion it must be based on history as well as personal observation.

Committee Amendment "A" (S-389)

This amendment strikes and replaces the bill. It adds medical practitioners, law enforcement officers and legal guardians of individuals to the list of persons who may apply for admission to the progressive treatment program of an individual in need of psychiatric treatment. The amendment clarifies that available community providers for a progressive treatment program patient must be licensed and qualified. The amendment requires the application for admission to the program to include a proposed individualized treatment plan and to identify one or more licensed and qualified community providers willing to support the plan. The amendment requires that the applicant serve notice of hearing on a patient who is not hospitalized and provide proof of service to the court. The amendment also repeals provisions of law that apply when a patient is going to be served by an assertive community treatment team.

Enacted Law Summary

Public Law 2011, chapter 492 adds medical practitioners, law enforcement officers and legal guardians of individuals to the list of persons who may apply for admission to the progressive treatment program of an individual in need of psychiatric treatment. The law clarifies that available community providers for a progressive treatment