

MAINE STATE LEGISLATURE

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STATE OF MAINE
125TH LEGISLATURE
FIRST REGULAR SESSION



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

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

July 2011

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STATE OF MAINE
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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 First 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.

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

The effective date for non-emergency legislation enacted in the First Regular Session of the 125th Legislature is September 28, 2011. 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

This bill authorizes the Department of Professional and Financial Regulation, Board of Licensure of Podiatric Medicine and State Board of Veterinary Medicine to establish health programs to allow them to participate in a medical professionals health program created to promote the identification, treatment and recovery of health professionals diagnosed with substance abuse disorders or other mental illness. The program currently has contracts with the Board of Licensure in Medicine, the Board of Osteopathic Licensure, the Board of Dental Examiners, the Maine Board of Pharmacy and the State Board of Nursing.

Committee Amendment "A" (H-285)

This amendment adds an appropriations and allocations section to the bill.

Enacted Law Summary

Public Law 2011, chapter 190 authorizes the Department of Professional and Financial Regulation, Board of Licensure of Podiatric Medicine and State Board of Veterinary Medicine to establish health programs to allow them to participate in a medical professionals health program created to promote the identification, treatment and recovery of health professionals diagnosed with substance abuse disorders or other mental illness. The program currently has contracts with the Board of Licensure in Medicine, the Board of Osteopathic Licensure, the Board of Dental Examiners, the Maine Board of Pharmacy and the State Board of Nursing.

LD 1029 Resolve, To Reduce Health Care Costs through Interstate Collaboration ONTP

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

This resolve directs the Department of Health and Human Services in consultation with health policy groups in the State to participate in regional interstate efforts to identify and implement systems and methodologies to reduce health care costs and improve the health care of the citizens of the participating states with the New England States Consortia Systems Organization and other cooperative regional efforts. The resolve also requires an interim report and a final report to the Joint Standing Committee on Health and Human Services.

LD 1039 Resolve, To Create a Working Group To Make Recommendations To Improve the Efficiency, Accountability and Proper Administration of Municipal General Assistance Programs DIED ON ADJOURNMENT

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ROTUNDO ROSEN R	OTP-AM	H-540

This resolve directs the Commissioner of Health and Human Services to convene a working group to examine municipal general assistance programs. The commissioner is directed to report to the Second Regular Session of the 125th Legislature with its findings and suggested legislation. The working group is directed to examine the administration and efficiency of the programs, to study the administration of appropriate records and to determine the opportunity for electronic data exchange between municipalities and the Department of Health and Human Services to verify eligibility factors and to promote program integrity.

Committee Amendment "A" (H-540)

Joint Standing Committee on Health and Human Services

This amendment makes the following changes to the resolve, which creates a working group to study and to make recommendations regarding the administration of general assistance programs.

1. It adds the general assistance program manager in the Department of Health and Human Services to the working group, increasing the number of members of the group from 9 to 10.
2. It adds to the duties of the working group so that the group examines uniformity of general assistance administration, studies whether additional sources of income should be included in the calculation of general assistance, determines whether lump-sum payments should be calculated differently and studies whether the length of ineligibility following a work requirement violation, discharge for misconduct or refusal to use an available resource is appropriate.
3. It clarifies that the Director of the Office of Policy and Legal Analysis must be notified of meetings of the working group.
4. It clarifies that the report from the working group must be submitted to the Joint Standing Committee on Health and Human Services.
5. It adds an appropriations and allocations section.

This bill died on the appropriations table on adjournment.

LD 1062 An Act To Ensure Access to Certain Health Care Services for Children ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CLARK H BRANNIGAN	ONTP	

This bill is a concept draft pursuant to Joint Rule 208.

This bill proposes to ensure access to health care for children by:

1. Allowing a child who does not have health care coverage to see a medical specialist free of charge; and
2. Allowing the child to continue to be seen and treated by that specialist, if the medical condition is one that can be treated by that specialist, for a small fee based only on income, such as actual wages earned by the child's parent or guardian or general assistance provided to the child or the child's parent or guardian. Unearned income, such as interest and dividends, savings, retirement plans, pensions, unemployment or workers' compensation benefits and the value of property owned by the child or the parent or guardian of the child, would not be includable for purposes of determining the fee to be paid to the specialist.

LD 1073 Resolve, To Encourage the Use of Defibrillators in Health Clubs and Gyms RESOLVE 50

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CASAVANT SULLIVAN	OTP-AM	H-172