

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

Enacted Law Summary

Public Law 2011, chapter 511 expedites electronic filing of vital records and helps align state law regarding the delayed filing of records with the requirements of the Federal Government. It closes to public inspection applications recording notice of intention to marry for the same time frame that marriage certificates are closed. The names of the persons who intend to marry and the intended date of marriage continue to be public and a researcher engaged in genealogical research with a researcher identification card continues to have access to applications.

LD 1628 An Act To Limit Payment for Care and Treatment of Residents of State Institutions PUBLIC 674

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MCCORMICK	OTP-AM MAJ OTP-AM MIN	S-468

This bill limits the amount that a provider may charge the State for medical services provided to a resident of a state institution outside of the state institution. The amount is restricted to the amount established by the rules of the Department of Health and Human Services for the MaineCare program for those services. The bill also removes references to the Homestead facility, which closed in 2007.

Committee Amendment "A" (S-468)

This amendment, which is the majority report of the committee, sets a reimbursement rate for medical services provided to a resident of a state institution off the premises of the state institution at the level of Medicare rather than at the rates set by the Department of Health and Human Services for the MaineCare program. It also adds an appropriations and allocations section to the bill.

Committee Amendment "B" (S-469)

This amendment, which is the minority report of the committee, limits the amount that the Commissioner of Health and Human Services may pay a provider for medical services provided to a resident of a state institution off the premises of the state institution to the amount payable under insurance, including Medicare, for residents that have insurance; to the amount established by rule by the Department of Health and Human Services under the MaineCare program, divided by 75% for physicians and hospitals other than critical access hospitals; or to the MaineCare rate for all other providers. It also adds an appropriations and allocations section to the bill.

This amendment was not adopted.

Enacted Law Summary

Public Law 2011, chapter 674 limits the amount that a provider may charge the State for medical services provided to a resident of a state institution outside of the state institution to the level of Medicare reimbursement. It also removes from statute references to the Homestead facility, which closed in 2007.

LD 1629 An Act To Allow for a Contingency Fee Agreement with a MaineCare Program Integrity Recovery Audit Contractor PUBLIC 593 EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MCCORMICK	OTP-AM MAJ ONTP MIN	S-470

Joint Standing Committee on Health and Human Services

This bill authorizes the Department of Health and Human Services to enter into agreements with a MaineCare audit recovery contractor, including contingency fee agreements, as required under Section 6411 of the federal Patient Protection and Affordable Care Act, Public Law 111-148.

Committee Amendment "A" (S-470)

This amendment is the majority report of the committee. This amendment adds an emergency preamble and emergency clause to the bill. It changes the title of the bill. It retains the provisions of the bill that authorize the Department of Health and Human Services to enter into agreements for the purpose of ensuring Maine Care program integrity with a recovery audit contractor as required under Section 6411 of the federal Patient Protection and Affordable Care Act, Public Law 111-148. It clarifies that the audits are intended to identify and correct underpayments and identify and recoup overpayments. It requires an agreement to provide that the contractor may be paid only from amounts recovered and that payments for identifying underpayments and collecting overpayments must be made on a contingent fee basis. It adds a requirement that the overpayments collected, less the contingent fees paid to the contractor, are paid into the Medical Care - Payments to Providers program, Other Special Revenue Funds account in the Department of Health and Human Services.

Enacted Law Summary

Public Law 2011, chapter 593 authorizes the Department of Health and Human Services to enter into agreements for the purpose of ensuring Maine Care program integrity with a recovery audit contractor as required under Section 6411 of the federal Patient Protection and Affordable Care Act, Public Law 111-148. The law states that the audits are intended to identify and correct underpayments and identify and recoup overpayments. The law requires an agreement to provide that the contractor may be paid only from amounts recovered and that payments for identifying underpayments and collecting overpayments must be made on a contingent fee basis. The law requires that overpayments collected, less the contingent fees paid to the contractor, are paid into the Medical Care - Payments to Providers program, Other Special Revenue Funds account in the Department of Health and Human Services.

Public Law 2011, chapter 593 was enacted as an emergency measure effective April 5, 2012.

LD 1679 An Act To Conform Maine's Prescription Drug Privacy Laws with the PUBLIC 494
United States Constitution

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MCCORMICK	OTP-AM	S-397

This bill repeals provisions of Maine's laws providing confidentiality for certain prescription drug information relating to prescribers to conform state law to the United States Supreme Court decision in *Sorrell v. IMS Health Inc.*, 131 S. Ct. 2653 (2011), which held unconstitutional similar provisions in the laws of Vermont.

Committee Amendment "A" (S-397)

This amendment incorporates a fiscal note.

Enacted Law Summary

Public Law 2011, chapter 494 repeals provisions of Maine's laws providing confidentiality for certain prescription drug information relating to prescribers to conform state law to the United States Supreme Court decision in *Sorrell v. IMS Health Inc.*, 131 S. Ct. 2653 (2011). The Sorrell case declared invalid similar prescription drug information provisions in the laws of Vermont.