

# MAINE STATE LEGISLATURE

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**STATE OF MAINE**  
126<sup>TH</sup> LEGISLATURE  
FIRST REGULAR SESSION



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

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

July 2013

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\*Rep. Jane P. Pringle temporarily appointed for the duration of the absence of Rep. Matthew Peterson on the Health and Human Services Committee

# STATE OF MAINE

126<sup>TH</sup> LEGISLATURE

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## LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contains summaries of all LDs and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 126<sup>th</sup> 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 126<sup>th</sup> Legislature is October 9, 2013. 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*

**Committee Amendment "A" (S-34)**

This amendment is the minority report of the committee and replaces the bill. It allows a tobacco specialty store to be licensed as a cigar lounge and to be licensed to sell alcoholic beverages. A tobacco specialty store that is a cigar lounge may not sell cigarettes or prepare food on premises for sale. A tobacco specialty store that is a cigar lounge must provide notice about the dangers of environmental tobacco smoke to applicants for employment and employees.

**LD 23      An Act To Lower the Cost of Copies of Medical Records**

**PUBLIC 32**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HASKELL FARNSWORTH	OTP	

This bill reduces the maximum amount that a hospital may charge for copies of medical records for the first page from \$10 to \$5.

**Enacted Law Summary**

Public Law 2013, chapter 32 reduces the maximum amount that a hospital may charge for copies of medical records for the first page from \$10 to \$5.

See also LD 1500, enacted as Public Law 2013, chapter 158.

**LD 29      An Act To Provide Support Services to Adults with Intellectual Disabilities or Autistic Disorder**

**DIED ON  
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FLOOD SANBORN	OTP	

This bill provides a General Fund appropriation of \$1,000,000 in fiscal years 2013-14 and 2014-15 for the Department of Health and Human Services to serve individuals on the waiting list for services under the MaineCare Benefits Manual, Chapter II, Section 29, Support Services for Adults with Intellectual Disabilities or Autistic Disorder. It also provides corresponding Federal Expenditures Fund allocations.

See also Public Law 2013, chapter 368, the biennial budget, pages 266 and 359.

**LD 30      An Act To Provide Home and Community Services for Individuals with Intellectual Disabilities or Autism**

**DIED ON  
ADJOURNMENT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FLOOD SANBORN	OTP	

This bill provides a General Fund appropriation of \$1,000,000 in fiscal years 2013-14 and 2014-15 for the Department of Health and Human Services to serve individuals on the waiting list for services under the MaineCare Benefits Manual, Chapter II, Section 21, Home and Community Benefits for Members with Intellectual Disabilities

***Joint Standing Committee on Health and Human Services***

or Autistic Disorder. It also provides corresponding Federal Expenditures Fund allocations.

See also Public Law 2013, chapter 368, the biennial budget, page 357.

**LD 62      Resolve, Directing the Department of Health and Human Services To      **CARRIED OVER**  
**Increase Reimbursement Rates for Adult Day Services****

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MALABY MILLETT	OTP-AM	

This bill provides additional General Fund appropriations of \$130,000 in fiscal year 2013-14 and \$330,000 in fiscal year 2014-15 for the Department of Health and Human Services to fund respite services in the adult day services program. This appropriation is intended to increase funding for this program to \$450,000 in fiscal year 2013-14 and to \$650,000 in fiscal year 2014-15.

**Committee Amendment "A" (H-372)**

This amendment replaces the bill with a resolve. It requires the Department of Health and Human Services to increase reimbursement rates for adult day services programs within Chapter 101: MaineCare Benefits Manual, Chapter II, Sections 19 and 26 and Chapter 5: Office of Elder Services Policy Manual, Sections 61 and 63 to \$12 an hour beginning October 1, 2013. It also adds an appropriations and allocations section.

This bill was committed to the Joint Standing Committee on Appropriations and Financial Affairs and carried over to any special or regular session of the 126th Legislature by joint order, H.P. 1145, as amended by H-B (H-580) and H-C (H-582).

**LD 77      An Act To Require Health Care Practitioners To Distribute Free      **ONTP**  
**Samples of Medication in Certain Circumstances****

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

This bill requires health care practitioners to distribute free samples of medication to a patient in order to test the reaction of the patient and the effectiveness in treatment of the patient's disease or condition. The requirement to distribute free samples depends on availability, appropriateness and timeliness.

**LD 78      An Act To Expand Transitional Assistance for Families      **PUBLIC 97****

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BEAUDOIN	OTP-AM	H-69

This bill expands transitional benefits for families that lose eligibility for assistance under the Temporary Assistance for Needy Families program and the MaineCare program because of increased income and for certain working families that receive supplemental nutrition assistance as follows.

1. For families that were eligible for MaineCare because their income was below 150% of the federal poverty level, it expands the upper limit of financial eligibility for transitional Medicaid from 185% to 200% of the federal poverty guidelines, extends the time period during which payment of premiums for transitional Medicaid is not