

MAINE STATE LEGISLATURE

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STATE OF MAINE
126TH 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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126TH 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 126th 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 126th 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

This bill removes the ability of the department to authorize an extension of the 24-month limit for either Suboxone or methadone and specifies that the 24-month limit on Suboxone is a lifetime maximum limit. This lifetime limit is already in place for methadone.

LD 909 Resolve, To Establish MaineCare Eligibility for Parents Participating in Reunification Activities RESOLVE 61

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HAMANN MILLETT	OTP-AM	H-248

This resolve directs the Department of Health and Human Services to submit to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services an application for a MaineCare waiver to cover parents who are MaineCare members or are eligible to be MaineCare members who are participating in rehabilitation and family reunification activities in accordance with a rehabilitation and reunification plan. Under the waiver, coverage would last until the parent ceases to participate in reunification activities or until parental rights are terminated.

Committee Amendment "A" (H-248)

This amendment incorporates a fiscal note.

Enacted Law Summary

Resolve 2013, chapter 61 directs the Department of Health and Human Services to submit to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services an application for a MaineCare waiver to cover parents who are MaineCare members or are eligible to be MaineCare members who are participating in rehabilitation and family reunification activities in accordance with a rehabilitation and reunification plan. Under the waiver, coverage would last until the parent ceases to participate in reunification activities or until parental rights are terminated.

LD 928 An Act To Improve MaineCare Nursing Home Reimbursement To Preserve Access and Promote Quality CARRIED OVER

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

This bill provides supplemental MaineCare payments to nursing homes that serve a high percentage of MaineCare residents and establishes a pay-for-performance program in nursing homes. The Department of Health and Human Services is authorized to adopt emergency rules to take effect retroactively to July 1, 2013 for the establishment of the supplemental MaineCare payments to nursing homes that serve a high percentage of MaineCare residents.

The bill also appropriates state funds and allocates matching federal funds for cost-of-living increases for MaineCare reimbursement to nursing facilities in the 2014-2015 biennium.

Committee Amendment "A" (H-365)

This amendment is the majority report of the committee. This amendment deletes all of the provisions of the bill and inserts an appropriation and an allocation sufficient to grant to nursing facilities a 2% rate increase in MaineCare reimbursement rates for nursing facilities.

Joint Standing Committee on Health and Human Services

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).

See also LD 986.

LD 929 An Act To Amend the Requirements for the Reporting of New Hires

**PUBLIC 279
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MALABY HAMPER	OTP-AM	H-249

Current law requires an employer, upon notice by the Department of Health and Human Services, to report the hiring, rehiring or return to work of an employee. The department transmits the information to the National Directory of New Hires maintained by the federal Department of Health and Human Services.

This bill requires an employer to forward the information, including the date the person starts work, within seven days of the employee's beginning or returning to service, without being notified by the Department of Health and Human Services.

Committee Amendment "A" (H-249)

This amendment provides a definition of "newly hired employee" that conforms with federal law. It defines a newly hired employee as a person who has not been previously employed by the employer or who has been separated from prior employment by the same employer for a period of at least 60 consecutive days.

Enacted Law Summary

Public Law 2013, chapter 279 provides a definition of "newly hired employee" that conforms with federal law. It defines a newly hired employee as a person who has not been previously employed by the employer or who has been separated from prior employment by the same employer for a period of at least 60 consecutive days. It requires an employer to forward information on newly hired employees and the date the person starts work, within seven days of the employee's beginning or returning to service, without notification by the Department of Health and Human Services.

Public Law 2013, chapter 279 was enacted as an emergency measure effective June 18, 2013.

LD 951 Resolve, Requiring the Department of Health and Human Services To Provide Methadone Clinic Data

CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CASSIDY CRAVEN	OTP-AM OTP-AM	

Current law limits to 24 months MaineCare coverage or reimbursement for buprenorphine and naloxone combination drugs, also known as Suboxone, and methadone for the treatment of addiction to opioids. This bill repeals the 24-month limit.

Committee Amendment "A" (H-559)

This amendment replaces the bill and is the majority report of the committee. The amendment amends the prior authorization process for methadone and so-called Suboxone treatments under MaineCare. It allows for the continuation of coverage, without prior authorization, if the individual receiving the treatment is pregnant, has