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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STATE OF MAINE

126TH LEGISLATURE FIRST REGULAR SESSION



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
CONF CMTE UNABLE TO AGREECommittee of Conference unable to agree; legislation died
DIED BETWEEN HOUSES
DIED IN CONCURRENCEdefeated 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 ENACTMENTlegislation proposing local mandate failed required 2/3 vote
HELD BY GOVERNORGovernor has not signed; final disposition to be determined at subsequent session
LEAVE TO WITHDRAWsponsor's request to withdraw legislation granted
NOT PROPERLY BEFORE THE BODYruled 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
PUBLIC XXX
RESOLVE XXX
VETO SUSTAINEDLegislature 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 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

Sponsor(s)	Committee Report	Amendments Adopted
MALABY	OTP-AM	H-249
HAMPER		

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

Sponsor(s)	Committee Report	Amendments Adopted
CASSIDY	OTP-AM	
CRAVEN	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

Joint Standing Committee on Health and Human Services

serious and persistent mental illness or resides with a child under 3 years of age for whom the individual is primarily responsible. It also allows an individual who is on a low daily dose that is considered a maintenance dose to continue coverage without prior authorization. For Suboxone, this amount is 4 milligrams. The maintenance dose for methadone will be determined in the Department of Health and Human Services rules. The amendment also directs the department to increase the reimbursement rates paid to methadone clinics from \$60 a week to \$70 a week.

Committee Amendment "B" (H-560)

This amendment, which is the minority report of the committee, requires the office of substance abuse and mental health services within the Department of Health and Human Services to prepare a report using data from 2009 to 2013 from methadone clinics in this State. The report must be submitted to the Joint Standing Committee on Health and Human Services no later than January 1, 2014. The report must include, but is not limited to, data on the number of clients at the clinics, the number of clients receiving at-home doses of methadone, the average doses and range of doses of methadone received by clients both at the clinic and receiving at-homes doses, the incidence of tapering of the dosage, including any changes in tapering resulting from the enactment of a lifetime limit of two years, the frequency of drug use and the number of arrests in the last 30 days of clients at the clinics, the number of clients discharged and the reasons for the discharges and the number of deaths of clients.

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 967 An Act Regarding Residency Requirements for General Assistance ONTP

Sponsor(s)	Committee Report	Amendments Adopted
BEAUDOIN HAMPER	ONTP	

This bill amends the municipal general assistance requirements to establish criteria to determine residency in a municipality, including the requirement that a person be registered to vote in that municipality or have a Maine driver's license. This bill also permits a municipality to establish a durational residency requirement of up to six months before a person who is not a resident of the State may apply for general assistance.

LD 968 An Act To Provide Needed Psychiatric Hospitalization for Persons with Mental Illness CARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
DION		
LACHOWICZ		

This bill requires the Commissioner of Health and Human Services to make psychiatric hospitalization available to a person with mental illness who is experiencing a psychiatric crisis and who has been determined by a health care practitioner to be in need of hospitalization.

This bill was 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).