

# 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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# STATE OF MAINE

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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.

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person does not need a license to sell wild mushrooms that had been originally received from a licensed person. Fees currently required for certification are shifted to the annual licensing system. This bill adds a requirement that license holders maintain liability insurance, provides for a civil penalty of \$1,000 to \$5,000 for each violation of the license or insurance requirement and provides for license suspension for repeat offenses.

**LD 1343     An Act To Improve Work Readiness for Families Facing Significant Barriers to Employment**

**PUBLIC 376**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EVES FLOOD	OTP-AM	H-345

This bill provides that if the case manager of a participant in the ASPIRE-TANF program determines that the participant has physical or mental health impairments, learning disabilities, cognitive impairments or limitations, the case manager must explore with the participant whether the participant wishes to undergo a comprehensive screening with possible referral to alternative services, supports and benefits. Following the assessment, the case manager, in coordination with the participant, is directed to establish a plan for the participant and the participant's family that includes appropriate services, supports and programs.

**Committee Amendment "A" (H-345)**

This amendment clarifies the role of the case manager in the comprehensive screening and assessment process. It also clarifies that a person who fails to participate without good cause may be sanctioned by the Department of Health and Human Services.

**Enacted Law Summary**

Public Law 2013, chapter 376 provides for a participant in the ASPIRE-TANF program to be screened for physical or mental health impairments, learning disabilities, cognitive impairments or limitations related to providing care for a household member with a disability or serious illness or a child with a serious behavioral condition. If it is determined that barriers to economic self-sufficiency and well-being exist, the participant must be offered the opportunity for a comprehensive assessment that may result in referral for alternative services, supports and income benefits. The participant's case manager shall ensure that any accommodation or support services necessary for the participant to participate in the assessment are made available to the participant. A person who fails to participate without good cause may be sanctioned by the Department of Health and Human Services.

**LD 1364     An Act To Amend the Laws Governing Hospital Leave Days for MaineCare Recipients**

**PUBLIC 423  
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SANDERSON HAMPER	OTP-AM	H-370 S-360 HILL

This bill amends Public Law 2013, chapter 1 to clarify that the number of hospital and therapeutic leave days for MaineCare recipients is limited to 4 hospital leave days per hospital visit and one therapeutic leave day per year.

**Committee Amendment "A" (H-370)**

This amendment changes the number of hospital leave days per hospital visit to 7 and the number of therapeutic leave days to 20 per year. The amendment adds an appropriations and allocations section.

**Senate Amendment "A" To Committee Amendment "A" (S-360)**

This amendment amends Committee Amendment "A" to strike the substance of the bill and instead changes the

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retroactive application date contained in Public Law 2013, chapter 368 regarding the number of hospital leave days and therapeutic leave days from March 25, 2013 to April 1, 2013.

See also Public Law 2013, chapter 368, page 365 for an appropriation and an allocation to fund the initiative in the bill and page 681, Part LLLLL, to apply the initiative retroactively to March 25, 2013.

### **Enacted Law Summary**

Public Law 2013, chapter 423 changes the retroactive application date contained in Public Law 2013, chapter 368 regarding the number of hospital leave days and therapeutic leave days from March 25, 2013 to April 1, 2013.

See also Public Law 2013, chapter 368, page 365 for an appropriation and an allocation to fund the initiative in LD 1364 and page 681, Part LLLLL, to apply the initiative retroactively to March 25, 2013.

Public Law 2013, chapter 423 was enacted as an emergency measure effective July 16, 2013.

### **LD 1383     An Act To Improve the Delivery of Early Child Care and Education Services**

**VETO  
SUSTAINED**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BERRY CRAVEN	OTP-AM	H-464 S-362    HILL

This bill requires the Department of Health and Human Services to pay child care services at the 75th percentile of the most current local market rate survey and pay a 10% premium to providers who meet tiered quality rating standards. It requires all providers of home visiting services to collaborate to better define rules and service parameters, directs Head Start program funding to the Early Head Start program, requires the department and the Child Care Advisory Council to establish a definition of "at-risk child" for the purposes of child care eligibility and diversifies the funding and uses of the early childhood professional development registry. It contains funding appropriations for child care, home visiting and Head Start.

#### **Committee Amendment "A" (H-464)**

This amendment makes a number of changes to the bill.

1. It removes all references to the Temporary Assistance for Needy Families program from the bill.
2. It removes the section that would have required the Department of Health and Human Services to amend its rules regarding child care rates.
3. It requires, in the provision regarding home visiting services collaboration, the providers of home visiting and other home-based family services that receive funding from the department to report annually to the department and requires the department to report to the joint standing committee of the Legislature with jurisdiction over health and human services matters.
4. It replaces the section that would have directed all new Head Start program funding to the Early Head Start program with a requirement for state Head Start program funding to be targeted to the most at-risk children and families. Early Head Start program funding must be used for center-based services except when otherwise negotiated by the department.
5. It replaces the section that would have required the Child Care Advisory Council to develop a definition of "at-risk child." Instead, the council is required to make recommendations to the department regarding specific