

MAINE STATE LEGISLATURE

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STATE OF MAINE
126TH LEGISLATURE
SECOND REGULAR SESSION



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

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

May 2014

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STATE OF MAINE
126TH LEGISLATURE
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LEGISLATIVE DIGEST OF BILL SUMMARIES AND
ENACTED LAWS

The *Digest* is arranged 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.

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 HOUSESHouse & 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
EMERGENCYenacted 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 Second Regular Session of the 126th Legislature is August 1, 2014. 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

LD 1642 An Act To Clarify the Law Governing Public Disclosure of Health Care Prices

PUBLIC 515

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WOODBURY	OTP-AM OTP-AM	S-431

This bill amends the law governing the public disclosure of health care prices. It specifies that it is a health care entity that must maintain a price list and defines "health care entity" to mean a health care practitioner, a group of health care practitioners or a health care facility. It clarifies the information that must be included with the price list and it eliminates the requirement that health care entities make available copies of the price list upon request.

Committee Amendment "A" (S-431)

This amendment, which is the majority report of the committee, replaces the bill. It retains the substance of the bill and adds the following.

1. It requires health care entities to maintain prices rather than price lists to reflect that prices are typically retained in databases.
2. It requires health care entities to display a notice informing patients of their ability to obtain estimates of costs from the Maine Health Data Organization.
3. It allows health care entities that do not render their services directly to patients in an office setting to satisfy the requirements of notice by providing information on their publicly accessible websites.

Committee Amendment "B" (S-432)

This amendment, which is the minority report of the committee, replaces the bill. It retains the substance of the bill and adds the following.

1. It requires health care entities to maintain prices rather than price lists to reflect that prices are typically retained in databases.
2. It requires health care entities to display a notice informing patients of their ability to obtain estimates of costs from the Maine Health Data Organization.

Enacted Law Summary

Public Law 2013, chapter 515 amends the law governing the public disclosure of health care prices. It defines "health care entity" to mean a health care practitioner, a group of health care practitioners or a health care facility. It requires a health care entity to maintain prices rather than a price list to reflect that prices are typically retained in databases and to display a notice informing patients of their ability to obtain estimates of costs from the Maine Health Data Organization. It allows health care entities that do not render their services directly to patients in an office setting to satisfy the requirements of notice by providing information on their publicly accessible websites.

LD 1663 Resolve, To Require New Contracts for MaineCare Nonemergency Transportation

Veto Sustained

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
JACKSON T GATTINE	OTP-AM ONTP	S-441 H-754 FARNSWORTH

Joint Standing Committee on Health and Human Services

This resolve directs the Department of Health and Human Services to terminate its August 1, 2013 agreement to purchase nonemergency medical transportation services to MaineCare and Children's Health Insurance Program recipients.

Committee Amendment "A" (S-441)

This amendment, which is the majority report of the committee, replaces the resolve. It prohibits the Department of Health and Human Services from renewing the contracts for MaineCare nonemergency transportation beyond June 30, 2014. It also cancels the request for proposals that was issued on February 26, 2014. The department is required to develop a new request for proposals that maximizes the scoring criteria evaluating a bidder's economic impact on the Maine economy and employment, reconnects with existing regional transportation resources and infrastructure and penalizes any bidders with a previous contract for MaineCare nonemergency transportation services that have a record of poor performance or for whom there was a corrective action plan in place. The request for proposals must include a transition period of no more than three months after June 30, 2014 if it is necessary for the current brokers to continue to provide services on a temporary basis as long as suitable contractual protections are in place. The department is required to provide monthly reports that include performance data on the new system to the joint standing committee of the Legislature having jurisdiction over health and human services matters from one month after the effective date of this resolve until one year after the new contracts are in place.

House Amendment "A" To Committee Amendment "A" (H-754)

This amendment strikes the emergency preamble and the emergency clause and adds a retroactivity clause.

LD 1682 An Act To Preserve Head Start and Child Care Services

**Died On
Adjournment**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FREY LANGLEY	OTP-AM ONTP	H-624

This bill provides for the allocation of funding among Maine's 11 nontribal Head Start programs based on a formula that provides a base allocation to each program and distributes all remaining funding based on the number of children in poverty in each program's service area. The bill also provides a \$2,000,000 appropriation to state Head Start programs in fiscal year 2014-15, fully replacing the cut that was made in fiscal year 2012-13. These funds will allow the State to maximize child care development fund block grants to provide child care vouchers.

Committee Amendment "A" (H-624)

This amendment, which is the majority report, incorporates a fiscal note.

LD 1683 An Act To Improve Degree and Career Attainment for Former Foster Children

PUBLIC 577

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BERRY VALENTINO	OTP-AM	S-539 HILL

This bill raises the upper age limit, from 20 years of age to 26 years of age, for voluntary participation in extended care for persons who attained 18 years of age while in the care and custody of the State. The bill also directs the joint standing committee of the Legislature having jurisdiction over health and human services matters to annually request an organization with expertise in foster care to provide to the committee a report and briefing on the