

## STATE OF MAINE 126<sup>th</sup> 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

**MEMBERS:** 

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# STATE OF MAINE

## 126th Legislature SECOND REGULAR SESSION 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 OVERcarried 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
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 PASSAGEemergency 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 GOVERNOR
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
<i>P&amp;S XXX chapter # of enacted private &amp; special law</i>
PUBLIC XXX chapter # of enacted public Law
RESOLVE XXX chapter # of finally passed resolve
VETO SUSTAINEDLegislature failed to override Governor's veto

The effective date for non-emergency legislation enacted in the Second Regular Session of the 126<sup>th</sup> 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

implement the recommendations of the department.

#### House Amendment "A" To Committee Amendment "A" (H-732)

This amendment removes the exclusion of hashish from the definition of "prepared marijuana" as proposed in Committee Amendment "A."

#### **Enacted Law Summary**

Public Law 2013, chapter 516 amends the Maine Medical Use of Marijuana Act. The law does the following:

1. It authorizes certified nurse practitioners to certify the medical use of marijuana.

2. It adds to the definition of "prepared marijuana" by-products of the dried leaves and flowers.

3. It authorizes caregivers and dispensaries to prepare tinctures of marijuana.

4. It changes the language on the number of patients who a caregiver may assist from "no more than 5 patients at any one time" to "a maximum of 5 patients who have designated the primary caregiver to cultivate marijuana for their medical use".

5. It authorizes the Department of Health and Human Services to take action necessary to ensure compliance with the medical use of marijuana chapter.

6. It directs the department to develop a framework for processing, documenting and investigating complaints concerning the medical use of marijuana chapter. In so doing, it directs the department to review mechanisms for processing, documenting and investigating and to report its recommendations to the joint standing committee having jurisdictions over health and human services matters by December 1, 2014. It directs the department to include in its report whether new laws or rules are required.

See Public Law 2013, Chapter 595 Part D on taxation issues and Part 1 on oversight and technology and Public Law 2013, Chapter 502 on oversight and technology.

#### **LD 1740** An Act To Amend Laws Relating to Health Care Data

PUBLIC 528

Sponsor(s)	Committee Report	Amendments Adopted
MALABY	OTP-AM	Н-733
GRATWICK	ONTP	

This bill conforms state law as it relates to the release of protected health information to the restrictions established in federal law and regulations. The bill requires the Maine Health Data Organization to adopt rules for the release of protected health information.

#### Committee Amendment "A" (H-733)

This amendment makes the following changes to the bill.

1. It adds a definition of "HIPAA," which is the federal Health Insurance Portability and Accountability Act of 1996.

2. The bill amends the definition of "health care information" as it regards hospitals and medical care. The amendment strikes that change and instead inserts those provisions into the definition of "protected health information" for the Maine Health Data Organization.

### Joint Standing Committee on Health and Human Services

3. It adds privacy protections to prevent the release of protected health information for individuals with HIV and individuals undergoing mental health or substance abuse treatment.

4. It requires the Board of Directors of the Maine Health Data Organization to adopt rules to ensure privacy and security protections of data that are equivalent to the requirements in the federal Health Insurance Portability and Accountability Act of 1996.

5. It requires the Board of Directors of the Maine Health Data Organization to provide a definition of "breach" and notifications regarding breaches that are equivalent to the requirements in the federal Health Insurance Portability and Accountability Act of 1996. It requires a breach to be reported to the joint standing committee of the Legislature having jurisdiction over health and human services matters within 30 days of the breach.

6. It requires the Board of Directors of the Maine Health Data Organization to develop rules to establish a complaints procedure for individuals who believe their protected health information has been released inappropriately.

7. It prohibits the Maine Health Data Organization from collecting any clinical data that are different from the data the organization collects as of March 1, 2014 without rulemaking. These rules are major substantive rules.

8. It adds an effective date so that the sections limiting the collection of clinical data and granting rule-making authority go into effect 90 days after adjournment and the rest of the Act goes into effect upon final adoption of major substantive rules.

#### **Enacted Law Summary**

Public Law 2013, chapter 528 allows for the release of protected health information by the Maine Health Data Organization under certain conditions. It prevents the release of protected health information for individuals with HIV and individuals undergoing mental health or substance abuse treatment. It requires the Board of Directors of the Maine Health Data Organization to adopt rules to ensure privacy and security protections of data that are equivalent to the requirements in the federal Health Insurance Portability and Accountability Act of 1996. It requires the Board of Directors of the Maine Health Data Organization to provide a definition of "breach" and notifications regarding breaches that are equivalent to the requirements in the federal to the requirements in the federal Health Data Organization to provide a definition of "breach" and notifications regarding breaches that are equivalent to the requirements in the federal Health Data Organization to be reported to the joint standing committee of the Legislature having jurisdiction over health and human services matters within 30 days of the breach. It requires the Board of Directors of the Maine Health Data Organization to develop rules to establish a complaints procedure for individuals who believe their protected health information has been released inappropriately. It prohibits the Maine Health Data Organization from collecting any clinical data that are different from the data the organization collects as of March 1, 2014 without rulemaking; these rules are major substantive rules. It adds an effective date so that the sections limiting the collection of clinical data and granting rule-making authority go into effect 90 days after adjournment and the rest of the Act goes into effect upon final adoption of major substantive rules.

#### LD 1745 An Act To Preserve Maine's Long-term Care Facilities

Died On Adjournment

<u>Sponsor(s)</u>	Committee Report	Amendments Adopted
CASSIDY BURNS	OTP-AM	H-690

This bill provides funds to give MaineCare Appendix C private nonmedical institutions a 2 percent cost-of-living rate increase in funding.