

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
127<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**

August 2015

**STAFF:**

ANNA BROOME, LEGISLATIVE ANALYST  
MICHAEL O'BRIEN, LEGISLATIVE ANALYST  
OFFICE OF POLICY AND LEGAL ANALYSIS  
13 STATE HOUSE STATION  
AUGUSTA, ME 04333  
(207) 287-1670

AND

LUKE LAZURE, LEGISLATIVE ANALYST  
OFFICE OF FISCAL AND PROGRAM REVIEW  
5 STATE HOUSE STATION  
AUGUSTA, ME 04333  
(207) 287-1635

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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 127<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. An appendix provides a summary of relevant session statistics.

Final action on each LD is noted to the right of the LD title. The following describes the various final actions.

<i>CARRIED OVER</i> .....	<i>carried over to a subsequent session of the Legislature</i>
<i>CON RES XXX</i> .....	<i>chapter # of constitutional resolution passed by both houses</i>
<i>CONF CMTE UNABLE TO AGREE</i> .....	<i>Committee of Conference unable to agree; legislation died</i>
<i>DIED BETWEEN HOUSES</i> .....	<i>House &amp; Senate disagreed; legislation died</i>
<i>DIED IN CONCURRENCE</i> .....	<i>defeated in each house, but on different motions; legislation died</i>
<i>DIED ON ADJOURNMENT</i> .....	<i>action incomplete when session ended; legislation died</i>
<i>EMERGENCY</i> .....	<i>enacted law takes effect sooner than 90 days after session adjournment</i>
<i>FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE</i> .....	<i>emergency failed to receive required 2/3 vote</i>
<i>FAILED, ENACTMENT or FINAL PASSAGE</i> .....	<i>failed to receive final majority vote</i>
<i>FAILED, MANDATE ENACTMENT</i> .....	<i>legislation proposing local mandate failed required 2/3 vote</i>
<i>HELD BY GOVERNOR</i> .....	<i>Governor has not signed; final disposition to be determined at subsequent session</i>
<i>LEAVE TO WITHDRAW</i> .....	<i>sponsor's request to withdraw legislation granted</i>
<i>NOT PROPERLY BEFORE THE BODY</i> .....	<i>ruled out of order by the presiding officer; legislation died</i>
<i>INDEF PP</i> .....	<i>indefinitely postponed; legislation died</i>
<i>ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X</i> ....	<i>ought-not-to-pass report accepted; legislation died</i>
<i>P&amp;S XXX</i> .....	<i>chapter # of enacted private &amp; special law</i>
<i>PUBLIC XXX</i> .....	<i>chapter # of enacted public law</i>
<i>RESOLVE XXX</i> .....	<i>chapter # of finally passed resolve</i>
<i>VETO SUSTAINED</i> .....	<i>Legislature failed to override Governor's veto</i>

The effective date for non-emergency legislation enacted in the First Regular Session of the 127<sup>th</sup> Legislature is October 15, 2015. 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**

supplemental reimbursement.

Resolve 2015, chapter 45 was finally passed as an emergency measure effective July 12, 2015.

**LD 75      Resolve, To Strengthen Health Care Services for Maine Residents      ONTP**  
**Affected by Neurodegenerative Diseases**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GRATWICK HYMANSON	ONTP	

This resolve directs the Department of Health and Human Services to convene a stakeholder group to conduct a feasibility study assessing the need for and costs of developing a network of in-state health care services, including home care and care in long-term care facilities, for residents of the State affected by neurodegenerative diseases. The resolve requires the department to report to the Joint Standing Committee on Health and Human Services in the Second Regular Session of the 127th Legislature and authorizes the committee to report out a bill based on the group's report.

The substance of this resolve was included in Resolve 2015, chapter 44 (see LD 155).

**LD 84      An Act Concerning Screening of Newborns for Lysosomal Storage      ONTP**  
**Disorders**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HASKELL HERBIG	ONTP	

This bill requires the Department of Health and Human Services to amend its rules in Chapter 283, Rules and Regulations Relating to Testing Newborn Infants for Detection of Causes of Cognitive Disabilities and Selected Genetic Conditions, by January 1, 2016 to add to the newborn screening program the lysosomal storage disorders known as Krabbe, Pompe, Gaucher, Fabry and Niemann-Pick diseases. The bill authorizes the department to explore options to enter into contracts with other states to test samples collected for lysosomal storage disorders.

**LD 87      Resolve, To Implement the Recommendations of the Commission To      RESOLVE 34**  
**Continue the Study of Long-term Care Facilities      EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
STUCKEY BURNS	OTP-AM OTP-AM	H-77 S-173 BURNS

This resolve directs the Department of Health and Human Services to amend Rule Chapter 101, MaineCare Benefits Manual, Chapter III, Section 67, Principles of Reimbursement for Nursing Facilities to:

1. Decrease the occupancy percentage threshold required for a nursing facility with more than 60 beds from 90 percent to 80 percent and for a nursing facility with 60 beds or fewer from 85 percent to 75 percent;
2. Provide that the cost of continuing education for direct care staff is included as a direct care cost component rather than a routine cost component;
3. Restore crossover payments to nursing facilities related to the nondual Qualified Medicare Beneficiary program

## *Joint Standing Committee on Health and Human Services*

population of the Medicare Savings Program for whom coverage was eliminated in Public Law 2013, chapter 368; and

4. Create a critical access nursing facility designation using criteria that are sensitive to the unique access challenges in remote areas of the State and provide that a critical access nursing facility designation qualifies as an allowable exception to MaineCare budget neutrality.

### **Committee Amendment "A" (H-77)**

This amendment, which is the majority report of the committee, strikes the emergency preamble and emergency clause. It requires the Department of Health and Human Services to amend the rules on principles of reimbursement for nursing facilities in the MaineCare Benefits Manual by January 1, 2016. The amendment removes the provision of the resolve that requires the rules to be amended to restore the crossover payments to nursing facilities related to nondual qualified Medicare beneficiaries because the crossover payments are not part of the principles of reimbursement. The amendment also adds an appropriations and allocations section. The appropriations and allocations section includes an appropriation and an allocation to restore the crossover payments.

### **Committee Amendment "B" (H-78)**

This amendment, which is the minority report of the committee, replaces the resolve and changes the title. It requires the Department of Health and Human Services to explore the use of Medicare Part C plans for the nondual qualified Medicare beneficiaries population served by the Medicare Savings Program to determine if the plans could provide a financial advantage with respect to crossover payments and copayments to nursing facilities as well as to the individuals compared to the current situation. The department is required to report its findings to the Joint Standing Committee on Health and Human Services no later than January 1, 2016.

### **Senate Amendment "A" To Committee Amendment "A" (S-173)**

This amendment amends Committee Amendment "A" to remove the requirement that the Department of Health and Human Services amend the rules as proposed in the resolve, except for the requirement to amend the rules so that the cost of continuing education for direct care staff is included as a direct care cost component. This amendment also removes the appropriations and allocations and restores the emergency preamble and emergency clause as in the resolve.

### **Enacted Law Summary**

Resolve 2015, chapter 34 requires the Department of Health and Human Services to amend its Rule Chapter 101, MaineCare Benefits Manual, Chapter III, Section 67, Principles of Reimbursement for Nursing Facilities so that the cost of continuing education for direct care staff is included as a direct care cost component.

Resolve 2015, chapter 34 was finally passed as an emergency measure effective June 23, 2015.

<b>LD 90</b>	<b>Resolve, To Ensure Appropriate Personal Needs Allowances for Persons Residing in Long-term Care Facilities</b>	<b>CARRIED OVER</b>
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
STUCKEY BURNS	ONTP OTP-AM	H-65

This resolve directs the Department of Health and Human Services to amend its rules to provide for increases in the personal needs allowances of residents in nursing facilities and residential care facilities. The rules are designated as routine technical rules.

### **Committee Amendment "A" (H-65)**