MAINE STATE LEGISLATURE

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STATE OF MAINE

127th 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

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STATE OF MAINE

127TH 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 127th 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.

CARRIED OVER	carried over to a subsequent session of the Legislature
	chapter # of constitutional resolution passed by both houses
	Committee of Conference unable to agree; legislation died
	House & Senate disagreed; legislation died
	eated in each house, but on different motions; legislation died
	action incomplete when session ended; legislation died
EMERGENCYenacted l	aw takes effect sooner than 90 days after session adjournment
FAILED, EMERGENCY ENACTMENT or FINAL PA	ASSAGE 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
	gned; 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
	PORT Xought-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 127th 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

This amendment, which is the minority report of the committee, strikes out the emergency preamble and emergency clause. It changes the date the Department of Health and Human Services must adopt rules implementing the increased personal needs allowance from October 1, 2015 to January 1, 2016. It also adds an appropriations and allocations section to the bill.

This bill was carried over on the Special Appropriations Table to any special or regular session of the 127th Legislature by joint order, S.P. 555.

LD 101 An Act To Strengthen and Reform Maine's Welfare System

ONTP

Sponsor(s)	Committee Report	Amendments Adopted
ALFOND	ONTP	

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to strengthen and reform the State's welfare system.

LD 123 An Act To Reduce Youth Cancer Risk

Died Between Houses

Sponsor(s)	Committee Report	Amendments Adopted
GRATWICK	OTP	
SANBORN	ONTP	

This bill prohibits tanning facilities and operators from allowing individuals who have not attained 18 years of age to use tanning devices.

LD 133 Resolve, To Establish the Task Force on Independence from Public Assistance

ONTP

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

This resolve establishes the Task Force on Independence from Public Assistance. The task force is directed to review and make evidence-based recommendations on initiatives needed to help families receiving public assistance to move out of poverty to independence through employment. The task force must meet up to eight times, consists of 13 members and must report by December 2, 2015 with its findings and recommendations and suggested legislation to the Joint Standing Committee on Health and Human Services.

LD 139 An Act To Allow the Electronic Transfer of Marriage Certificates

PUBLIC 104

Sponsor(s)	Committee Report	Amendments Adopted
DUCHESNE	ОТР	

This bill allows both the municipal clerk that issued a marriage license and the clerk from the municipality where the marriage occurred to issue a certified copy of the marriage certificate electronically using the State's registration

Joint Standing Committee on Health and Human Services

system.

Enacted Law Summary

Public Law 2015, chapter 104 allows both the municipal clerk that issued a marriage license and the clerk from the municipality where the marriage occurred to issue a certified copy of the marriage certificate electronically using the State's registration system.

LD 140 An Act To Expand Access To Lifesaving Opioid Overdose Medication

PUBLIC 351

Sponsor(s)	Committee Report	Amendments Adopted
BECK	OTP-AM	H-248
GRATWICK	ONTP	H-278 BECK

This bill allows for the prescription of naloxone hydrochloride by standing order. It allows for the prescription of naloxone hydrochloride to friends of and other persons in a position to assist an individual at risk of experiencing an opioid-related drug overdose in addition to immediate family members. It provides for immunity from civil and criminal liability for the prescription and administration of naloxone hydrochloride for prescribers and those who administer the drug. It creates a limited immunity from criminal prosecution for those who seek medical assistance when a person is experiencing an opioid-related drug overdose.

Committee Amendment "A" (H-248)

This amendment, which is the majority report of the committee, retains the provisions from the bill that allow for the prescription of naloxone hydrochloride by standing order and allow for the prescription of naloxone hydrochloride to friends of and other persons in a position to assist an individual at risk of experiencing an opioid-related drug overdose, in addition to immediate family members as currently permitted in law. Like the bill, it creates a limited immunity from criminal prosecution for those who seek medical assistance when a person is experiencing an opioid-related drug overdose. The amendment also allows for the prescription of naloxone hydrochloride by standing order to a public health agency operating an overdose prevention program in accordance with rules adopted by the Department of Health and Human Services. The amendment provides immunity from civil or criminal prosecution to persons acting on behalf of an overdose prevention program for providing education on opioid-related drug overdose prevention or for purchasing, acquiring, distributing or possessing naloxone hydrochloride unless the person's actions constitute recklessness, gross negligence or intentional misconduct.

House Amendment "A" To Committee Amendment "A" (H-278)

This amendment removes the provisions of Committee Amendment "A" that provide limited immunity from criminal prosecution for those who seek medical assistance when a person is experiencing an opioid-related drug overdose and the immunity from civil or criminal prosecution for providing education on opioid-related drug overdose prevention or for purchasing, acquiring, distributing or possessing naloxone hydrochloride unless the person's actions constitute recklessness, gross negligence or intentional misconduct.

Enacted Law Summary

Public Law 2015, chapter 351 allows for the prescription of naloxone hydrochloride by standing order. It allows for the prescription of naloxone hydrochloride to friends of and other persons in a position to assist an individual at risk of experiencing an opioid-related drug overdose in addition to immediate family members. It also allows for the prescription of naloxone hydrochloride by standing order to a public health agency operating an overdose prevention program in accordance with rules adopted by the Department of Health and Human Services.