

# 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

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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*

**LD 154**      **An Act To Promote Greater Flexibility in the Provision of Long-term Care Services**      **ONTP**

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

Current law precludes facilities licensed pursuant to the Maine Revised Statutes, Title 22, chapter 405 from providing certain services under one license to residents living in a facility under a lower level license on the same campus. The purpose of this bill is to allow facilities licensed under Title 22, chapter 405 to provide a continuum of care and services to clients residing in those facilities without requiring the clients to leave the facility, without requiring the creation of a licensed home health agency and without having to seek approval of area licensed home health agencies.

**LD 155**      **Resolve, To Establish the Commission To Study Difficult-to-place Patients**      **RESOLVE 44 EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MALABY	OTP-AM	H-249

This bill is a concept draft pursuant to Joint Rule 208. The purpose of this bill is to help ensure that patients with complex medical conditions who are in hospitals are placed in more appropriate nonhospital settings.

The bill proposes to fund the ongoing costs associated with beds in nonhospital settings for:

1. Patients with severe brain injuries;
2. Bariatric patients;
3. Patients who are dependent on a ventilator for the long-term;
4. Young adult patients with substance abuse issues who receive extended intravenous therapy due to infections;
5. Young adult patients with spinal cord injuries;
6. Young adult patients who have had strokes;
7. Homeless patients who need preoperative care such as feeding tubes; and
8. Patients who are violent and have been previously discharged from a health care facility due to violence.

**Committee Amendment "A" (H-249)**

This amendment replaces the bill, changes it into a resolve and adds an emergency preamble and emergency clause. The amendment establishes the Commission To Study Difficult-to-place Patients in order to study certain issues related to difficult-to-place patients with complex medical conditions and the feasibility of making policy changes to the long-term care system for those patients. The commission comprises 13 members, including five legislators; the Commissioner of Health and Human Services; the director of the long-term care ombudsman program; representatives of organizations representing people with disabilities, people with mental illness, the promotion of independent living for individuals with disabilities, long-term care facilities and hospitals; and a patient or family member of a patient with complex medical needs. The amendment requires the commission to report to the Joint

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

Standing Committee on Health and Human Services by December 2, 2015.

### **Enacted Law Summary**

Resolve 2015, chapter 44 establishes the Commission to Study Difficult-to-place Patients in order to study certain issues related to difficult-to-place patients with complex medical conditions and the feasibility of making policy changes to the long-term care system for those patients. The commission comprises 13 members, including five legislators; the Commissioner of Health and Human Services; the director of the long-term care ombudsman program; representatives of organizations representing people with disabilities, people with mental illness, the promotion of independent living for individuals with disabilities, long-term care facilities and hospitals; and a patient or family member of a patient with complex medical needs. The commission is required to report to the Joint Standing Committee on Health and Human Services by December 2, 2015.

Resolve 2015, chapter 44 was finally passed as an emergency measure effective July 12, 2015.

**LD 179      Resolve, Directing the Department of Health and Human Services To      **ONTP**  
Provide Coverage under the MaineCare Program for Routine Male  
Newborn Circumcisions**

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

This resolve directs the Department of Health and Human Services to amend its MaineCare rules to provide for coverage for routine male newborn circumcisions rather than only for those considered medically necessary under existing rules.

**LD 180      An Act To Allow Terminally Ill Patients To Choose To Use Experimental      **CARRIED OVER**  
Treatments**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LONGSTAFF BRAKEY		

This bill authorizes manufacturers of drugs, biological products and devices that have completed Phase I of a United States Food and Drug Administration-approved clinical trial but have not yet been approved for general use and remain under clinical investigation to make them available to eligible terminally ill patients. It does not require health insurers to provide coverage for the cost of such a drug, biological product or device but authorizes insurers to provide such coverage.

The bill prohibits licensing boards from revoking, refusing to renew or suspending the license of or taking any other action against a health care practitioner based solely on the practitioner's recommendation to an eligible patient regarding access to or treatment with such a drug, biological product or device. It also prohibits any official, employee or agent of the State from blocking or attempting to block access by an eligible patient to such a drug, biological product or device.

This bill was carried over to any special or regular session of the 127th Legislature by joint order, H.P. 992.