MAINE STATE LEGISLATURE

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STATE OF MAINE

127th Legislature Second Regular Session



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

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

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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 Second 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 OVERcarried over to a subsequent session of the Legislature	C
CON RES XXXchapter # of constitutional resolution passed by both houses	
CONF CMTE UNABLE TO AGREE	
OIED 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 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 Governor has not signed; final disposition to be determined at subsequent session	
LEAVE TO WITHDRAWsponsor's request to withdraw legislation granted	
NOT PROPERLY BEFORE THE BODYruled out of order by the presiding officer; legislation died	
NDEF PP indefinitely postponed; legislation died	II
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X ought-not-to-pass report accepted; legislation died	O
P&S XXXchapter # of enacted private & special law	P
PUBLIC XXX	P
RESOLVE XXX	R
VETO SUSTAINEDLegislature failed to override Governor's veto	V

The effective date for non-emergency legislation enacted in the First Regular Session of the 127th Legislature is July 29, 2016. 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 90 Resolve, To Ensure Appropriate Personal Needs Allowances for Persons Residing in Long-term Care Facilities

Died On Adjournment

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY P	ONTP	H-65
BURNS D	OTP-AM	

This resolve was reported out of committee in the First Regular Session of the 127th Legislature and carried over on the Special Appropriations Table.

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)

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.

LD 180

An Act To Allow Terminally Ill Patients To Choose To Use Experimental Treatments

PUBLIC 418

Sponsor(s)	Committee Report	Amendments Adopted
LONGSTAFF T	OTP-AM	H-577
BRAKEYE	ONTP	

This bill was carried over from the First Regular Session of the 127th Legislature.

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. The bill 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 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.

Committee Amendment "A" (H-577)

This amendment, which is the majority report of the committee, does the following.

- 1. It amends the definition of "eligible patient" in the bill by eliminating the condition that requires a patient to have been unable to participate in a clinical trial for treatment of the terminal illness within 100 miles of that person's home address.
- 2. It amends the definition of "terminal illness" in the bill to provide that the condition need not reasonably be expected to result in death within six months but instead will soon result in death or in a state of permanent unconsciousness from which recovery is unlikely.

Joint Standing Committee on Health and Human Services

- 3. It amends the definition of "written, informed consent" in the bill to remove certain requirements involving insurance implications, home health care services and hospice care and patient liability for certain expenses.
- 4. It amends the provision that provides for the costs that are allowed to be charged by the manufacturer to ensure that the patient is being charged only for the costs of manufacturing the dosage of an investigational drug, a biological product or a device dispensed to that patient.
- 5. It strikes the section of the bill related to insurance implications.
- 6. It provides protection to health care providers who choose to provide care to an eligible patient using an investigational drug, biological product or device.
- 7. It eliminates the penalty for blocking an eligible patient from access to an investigational drug, biological product or device.
- 8. It makes it clear that the provision of services related to an investigational drug, biological product or device by health care practitioners and providers is optional.

Enacted Law Summary

Public Law 2015, chapter 418 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.

LD 213 An Act To Ensure the Comprehensive Medical, Dental, Educational and Behavioral Assessment of Children Entering State Custody

Veto Sustained

Sponsor(s)	Committee Report	Amendments Adopted
GRATWICK G	OTP-AM	S-362
HAMANN S		

This bill was carried over from the First Regular Session of the 127th Legislature.

Current law regarding the physical examination and psychological assessment of children entering state custody requires the physical examination of a child within 10 working days after the child enters into the custody of the Department of Health and Human Services and a psychological assessment within 30 days of the examination if an assessment is determined appropriate by the doctor or nurse practitioner performing the physical examination. This bill shortens the time requirement for the physical examination to three working days and replaces the language regarding the psychological examination with language requiring a comprehensive medical, dental, behavioral and educational assessment meeting the standards of a national academy of pediatrics within 30 days after the department's custody of the child commences.

Committee Amendment "A" (S-362)

This amendment strikes and replaces the bill. Like the bill, it shortens the time requirement for the physical examination of a child ordered into the custody of the Department of Health and Human Services from 10 days after the department's custody of the child commences to three days. The bill strikes the provision requiring under certain conditions a psychological assessment within 30 days of the required physical examination. This amendment restores that requirement. It also requires the department to adopt routine technical rules that allow for reimbursement under MaineCare for a comprehensive medical, dental, educational and behavioral assessment, which includes obtaining relevant records, when a child enters the custody of the department.