

# 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*

**Enacted Law Summary**

Public Law 2015, chapter 137 makes the following changes to the practice of interstate telemedicine.

1. The Board of Licensure in Medicine may register a physician not licensed to practice in the State to provide consultative services through interstate telemedicine.
2. The physician to be registered must be fully licensed without restriction to practice medicine in the state from which the physician provides telemedicine services.
3. The physician to be registered may provide only consultative services and a physician, advanced practice registered nurse or physician assistant in this State must retain ultimate authority over the diagnosis, care and treatment of the patient.
4. The physician to be registered registers with the board every two years and pay a registration fee no more than \$500.

**LD 663      Resolve, To Require That the Department of Health and Human Services Determine Whether Testing for Krabbe Disease Should Be Required for Newborns**

**Leave to Withdraw Pursuant to Joint Rule**

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

This resolve requires the Department of Health and Human Services to conduct a study to determine whether newborn infants should be tested for Krabbe disease as part of the screening process for detection of causes of cognitive disabilities and congenital, genetic and metabolic disorders. The department is required to submit its findings and a recommendation to the Joint Standing Committee on Health and Human Services, which is authorized to submit legislation to the Second Regular Session of the 127th Legislature regarding the findings and recommendation.

**LD 664      Resolve, To Direct the Department of Health and Human Services To Submit a State Plan Amendment To Allow Community-based and Other Health Care Providers To Be Reimbursed by MaineCare**

**ONTP**

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

This resolve requires the Department of Health and Human Services to submit a state plan amendment to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to seek approval to reimburse for preventive tests and services that are currently reimbursed by MaineCare when administered by a licensed enrolled physician or other licensed practitioner when those preventive tests and services are administered by other practitioners acting within their scope of practice, including, but not limited to, community-based health care providers. Upon approval of the state plan amendment, the Department of Health and Human Services is directed to amend its rules to reflect the state plan amendment.