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

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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

LD 928 Resolve, To Enhance Consumer Awareness of Expenditures and Gifts by Manufacturers of Prescribed Products ONTP

Sponsor(s)	Committee Report	Amendments Adopted
WARREN	ONTP	
CYRWAY		

This resolve requires the Department of Health and Human Services to develop a fact sheet that provides information to the public regarding the publicly searchable database of payments and gifts to physicians by medical product manufacturers developed by the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services under Secion 6002 of the federal Patient Protection and Affordable Care Act, Public law 111-148.

LD 940 Resolve, To Require Hospitals To Provide Information to Parents of Infants Regarding Testing for Krabbe Disease

Leave to Withdraw Pursuant to Joint Rule

Sponsor(s)	Committee Report	Amendments Adopted
SAVIELLO		

This resolve requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention to develop an information pamphlet on testing for Krabbe disease for dissemination by a hospital to all parents of newborn infants born at the hospital or to the parents of any child up to six months of age being treated at the hospital. The Maine Center for Disease Control and Prevention is required to develop the pamphlet by December 1, 2015.

LD 949

An Act To Enact the Recommendations of the Commission on Independent Living and Disability

CARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
MCCLELLAN		

This bill includes the final recommendations of the Commission on Independent Living and Disability and does the following.

- 1. Part A replaces the requirement in current law for biennial plans for regional transit with a requirement for quinquennial plans, which is consistent with federal requirements. It eliminates the Interagency Transportation Coordinating Committee and replaces it with a new public transit advisory council. It also specifies the role of the council and requires reporting every two years. It requires the Department of Health and Human Services to convene a work group to develop a statewide transportation voucher program for persons with disabilities.
- 2. Part B adds new transition planning requirements for students with disabilities to include team meetings that must begin at 14 years of age with community partners, community service providers, the students and their families, the division of vocational rehabilitation within the Department of Labor, Bureau of Rehabilitation Services and the agency that is designated by the Governor to serve as the protection and advocacy agency for persons with disabilities. It requires that the transition planning include independent living assessments for the students. For students who receive services from the Department of Health and Human Services, Office of Child and Family

Joint Standing Committee on Health and Human Services

Services, it requires the school administrative unit to work in consultation with the division of vocational rehabilitation within the Department of Labor, Bureau of Rehabilitation Services to include postsecondary preparation strategies for the students during transition planning.

- 3. Part C requires the Statewide Independent Living Council to provide an annual report to the Legislature on the State's strategic planning efforts to increase opportunities for persons with disabilities to live independently within the community. It also requires the Commissioner of Labor to provide an annual report to the Legislature on the State's efforts to improve vocational rehabilitation outcomes and reduce the length of time it takes the department to enter into an individualized plan of employment with individuals eligible to receive rehabilitation services.
- 4. Part D amends the Maine Human Rights Act to require an on-site inspection by a representative of the Office of the State Fire Marshal to ensure that new public buildings and certain buildings to which the public has access are constructed in compliance with the Maine Human Rights Act. It also requires the Technical Building Codes and Standards Board to adopt the most recent federal Americans with Disabilities Act of 1990 accessibility guidelines as published by the International Code Council. It also authorizes the agency that is designated by the Governor to serve as the protection and advocacy agency for persons with disabilities in Maine to bring a civil action in Superior Court for violations of the Maine Human Rights Act regarding public accommodations and allows the agency to receive reasonable attorney's fees and costs.
- 5. Part E requires a housing authority to post all rental housing vacancies that are readily accessible to and usable by persons with disabilities on the Maine State Housing Authority's publicly accessible rental housing listing service website.
- 6. Part F requires the Department of Health and Human Services to amend the federally approved Medicaid state plan to include and broaden coverage for assistive technology without the restrictions currently applied to telehealth; cover assistive technology within all Department of Health and Human Services waivers; include telemedicine; broaden telehealth use; and broaden telehealth home-based care.

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

LD 966 An Act To Assist Patients in Need of Psychiatric Services

CARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
MALABY		

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to take steps to help provide acute psychiatric care in an inpatient setting by increasing the availability of inpatient beds. The bill will seek to do the following:

- 1. Create and fund additional psychiatric beds for geriatric patients;
- 2. Review and make changes to the bed hold regulations for nursing homes and group homes to create incentives to take difficult mental health patients back after a hospital stay;
- 3. Review and make changes to the bed hold regulations for nursing homes and group homes to create penalties for facilities that refuse to take difficult mental health patients back after a hospital stay;
- 4. Provide psychiatric urgent care centers with accompanying medically supervised crisis beds;
- 5. Create and fund additional psychiatric observation units;