

# MAINE STATE LEGISLATURE

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**STATE OF MAINE**  
127<sup>TH</sup> LEGISLATURE  
SECOND REGULAR SESSION



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

**JOINT STANDING COMMITTEE ON HEALTH AND  
HUMAN SERVICES**

May 2016

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# STATE OF MAINE

127<sup>TH</sup> LEGISLATURE

SECOND 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 Second 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.

*CARRIED OVER*..... *carried over to a subsequent session of the Legislature*  
*CON RES XXX*..... *chapter # of constitutional resolution passed by both houses*  
*CONF CMTE UNABLE TO AGREE*..... *Committee of Conference unable to agree; legislation died*  
*DIED BETWEEN HOUSES*..... *House & 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*  
*EMERGENCY*..... *enacted law takes effect sooner than 90 days after session adjournment*  
*FAILED, EMERGENCY ENACTMENT or PASSAGE*..... *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*  
*HELD BY GOVERNOR*..... *Governor has not signed; 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*  
*ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X*... *ought-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 127<sup>th</sup> 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*

screenings for eligibility include but are not limited to prescription assistance programs.

3. It strikes references to managed care, including in the title of the bill.
4. It clarifies that the long-term care ombudsman program established pursuant to the Maine Revised Statutes, Title 22, section 5106, subsection 11-C continues to provide services for those receiving long-term care home-based and community-based or institutional services.
5. It requires the Medicaid ombudsman program to provide annual reports to the joint standing committee of the Legislature having jurisdiction over health and human services matters.
6. It clarifies that the program may only be contracted for with nonstate funding and removes any references to state seed match.

### **Enacted Law Summary**

Public Law 2015, chapter 511 establishes the Medicaid ombudsman program in statute. It establishes the duties of the ombudsman program, including providing services and outreach services and outreach for members and eligible members of the Medicaid program and the state children's health insurance program is also known as Cubcare, CHIP and S-CHIP. It requires the ombudsman program to provide annual reports to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The program, operated by contract, may only be contracted for with nonstate funding.

**LD 1522      Resolve, Regarding Legislative Review of the Final Repeal of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 32: Allowances for Waiver Services for Children with Intellectual Disabilities or Pervasive Developmental Disorders, a Major Substantive Rule of the Department of Health and Human Services**

**RESOLVE 61  
EMERGENCY**

Sponsor(s)

Committee Report

Amendments Adopted

OTP

This resolve provides for legislative review of the repeal of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 32: Allowances for Waiver Services for Children with Intellectual Disabilities or Pervasive Developmental Disorders, a major substantive rule of the Department of Health and Human Services.

### **Enacted Law Summary**

Resolve 2015, chapter 61 authorizes final adoption of the repeal of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 32: Allowances for Waiver Services for Children with Intellectual Disabilities or Pervasive Developmental Disorders, a major substantive rule of the Department of Health and Human Services.

Resolve 2015, chapter 61 was finally passed as an emergency measure effective March 16, 2016.

**LD 1527      An Act To Facilitate MaineCare Assisted Living by Providing a Cost-of-living Adjustment to Private Nonmedical Institutions and Adult Family Care Homes**

**Died On  
Adjournment**

Sponsor(s)

Committee Report

Amendments Adopted

BURNS D  
POULIOT M

OTP-AM

S-402

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

This bill provides funds to give adult family care homes, residential care facilities and Appendix C private nonmedical institutions a 4% cost-of-living rate increase in funding in the fiscal year beginning July 1, 2016. Annual cost-of-living adjustments are to be provided by rule for each fiscal year thereafter in accordance with the United States Department of Labor, Bureau of Labor Statistics Consumer Price Index medical care services index.

**Committee Amendment "A" (S-402)**

This amendment provides for two cost-of-living rate increases in funding rather than an annual ongoing increase. The 4% cost-of-living rate increase in funding in the fiscal year beginning July 1, 2016 remains the same as in the bill but with updated appropriation and allocation amounts. The second rate increase, for fiscal year 2017-18, is based on the Consumer Price Index medical care services index.

The substance of this bill and amendment was incorporated in Public Law 2015, chapter 481, Part C (LD 1606).

<p><b>LD 1533    An Act To Provide an Annual Cost-of-living Adjustment to Nursing Facilities To Further Implement the Recommendations of the Commission To Study Long-term Care Facilities</b></p>	<p><b>Died On Adjournment</b></p>
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BURNS D POULIOT M	OTP-AM	S-381

This bill provides funds to provide an annual cost-of-living adjustment to nursing facilities under the MaineCare program.

**Committee Amendment "A" (S-381)**

This amendment adjusts the funding amounts in the bill to reflect more accurate estimates. It also directs the Department of Health and Human Services to amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Section 67, Principles of Reimbursement for Nursing Facilities to remove the requirement that cost-of-living adjustments received by nursing facilities must be applied to the wages and benefits of front line employees.

<p><b>LD 1547    An Act To Facilitate Access to Naloxone Hydrochloride</b></p>	<p><b>PUBLIC 508</b></p>
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GIDEON S BREEN C	OTP-AM ONTP	H-619 S-473    HASKELL A

This bill establishes the Naloxone Bulk Purchase Fund administered by the Office of the Attorney General for the purpose of providing funding to the Office of the Attorney General to make bulk purchases of naloxone hydrochloride that may be purchased by municipalities for use by first responders.

**Committee Amendment "A" (H-619)**

This amendment, which is the majority report of the committee, replaces the bill. It directs the Maine Board of Pharmacy to establish by rule procedures and standards for authorizing pharmacists to dispense naloxone hydrochloride. The rules must establish adequate training requirements and protocols for dispensing naloxone hydrochloride by prescription drug order, standing order or pursuant to a collaborative practice agreement. The amendment also clarifies current law to allow first responders to obtain the naloxone hydrochloride that they are authorized to administer. It provides criminal, civil and professional disciplinary immunities for persons who, acting in good faith and with reasonable care, possess, store, prescribe, dispense or administer naloxone hydrochloride in accordance with the governing law. The amendment also adds an emergency preamble and