MAINE STATE LEGISLATURE

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STATE OF MAINE

128th Legislature

FIRST SPECIAL, SECOND REGULAR AND SECOND SPECIAL SESSIONS



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

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

October 2018

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STATE OF MAINE

 $128^{\text{th}}\,Legislature$ First Special, Second Regular and Second Special Sessions



LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contain summaries of all LDs and adopted amendments and all laws enacted or finally passed during the First Special, Second Regular and Second Special Sessions of the 128th 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
CONF CMTE UNABLE TO AGREE
DIED BETWEEN HOUSES
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 FINAL PASSAGEemergency failed to receive required 2/3 vote
FAILED, ENACTMENT or FINAL PASSAGE
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
INDEF PP indefinitely postponed; legislation died
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X ought-not-to-pass report accepted; legislation died
P&S XXX
PUBLIC XXX chapter # of enacted public law
RESOLVE XXX
VETO SUSTAINEDLegislature failed to override Governor's veto

The effective dates for non-emergency legislation enacted in the First Special, Second Regular or Second Special Sessions of the 128th Legislature are: Monday, February 5, 2018; Wednesday, August 1, 2018; and Thursday, December 13, 2018, respectively. 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

This bill was carried over from the First Regular Session of the 128th Legislature to the Second Regular Session. The bill was then carried over on the Special Appropriations Table from the Second Regular Session to the next special session by joint order S.P. 748.

This bill provides for a mental health liaison in each county or regional jail to oversee inmates with serious mental illness and connect them to the services for which they qualify, to work with the court system to ensure that they receive due process and speedy trials and to assist inmates who qualify for MaineCare to apply for and receive MaineCare benefits and services. This bill directs the Department of Health and Human Services to issue a request for proposals to private providers of behavioral health services and advocacy to replace intensive case manager positions within the department to staff the 15 mental health liaison positions in the county and regional jails.

Committee Amendment "A" (H-700)

This amendment replaces the bill. It establishes the Statewide Criminal Justice Coordinating Council to accept and review data on encounters between law enforcement agencies and members of the public and data gathered through the use of nationally validated screening and assessment tools when persons are admitted to jail. The council is required to collect and review data submitted by law enforcement agencies, sheriffs, regional jail administrators and intensive case managers, summarize and review the data and provide an annual report to the joint standing committees of the Legislature having jurisdiction over criminal justice and public safety matters and health and human services matters beginning January 15, 2021. The report must contain any recommendations for legislative action. A legislative committee that receives a report from the Statewide Criminal Justice Coordinating Council may report out legislation to the Legislature based on the report.

The amendment requires each law enforcement agency in the State to submit to the Department of Public Safety on a quarterly basis beginning January 15, 2020, data that identifies law enforcement calls for service and encounters between law enforcement officers and certain members of the public and requires the department to forward that data to the Statewide Criminal Justice Coordinating Council.

The amendment requires a person admitted to a jail, regional jail or correctional facility to be assessed for mental health conditions and substance use disorders through use of a nationally validated screening and assessment tool. It requires that an intensive case manager assigned by the Department of Health and Human Services to a jail, regional jail or correctional facility submit in summary form to the department information gathered from an encounter with such a person. The amendment requires the department to forward this information to the Statewide Criminal Justice Coordinating Council.

The amendment also adds a mandate preamble and an appropriations and allocations section.

Senate Amendment "A" To Committee Amendment "A" (S-441)

This amendment adds the Commissioner of Corrections or the commissioner's designee to the Statewide Criminal Justice Coordinating Council and corrects a cross-reference.

The substance of this bill was incorporated in LD 1268.

LD 967

An Act To Ensure Access to Community Services for Persons with Intellectual Disabilities or Autism

Died On Adjournment

Sponsor(s)	<u>Committee Report</u>	Amendments Adopted
HERBIG E	OTP-AM	H-342
HAMPER J		

Joint Standing Committee on Health and Human Services

This bill was reported out of committee in the First Regular Session of the 128th Legislature and then carried over to the Second Regular Session on the Special Appropriations Table. This bill was again carried over, still on the Special Appropriations Table, from the Second Regular Session to the next special session by joint order S.P. 748.

This bill requires the Department of Health and Human Services to reimburse services provided to MaineCare member adults with intellectual disabilities or autistic disorder under a waiver granted by the federal Centers for Medicare and Medicaid Services for home-based and community-based care on the basis of rates and a methodology for application of the rates that reflects assessment of individual need and applies criteria for resource allocation established by the department pursuant to criteria established in the bill. The bill also directs the department to adopt rules providing reimbursement rates that take into account specified costs of care and service; are sufficient to ensure access, including compliance with federal standards; are based on a 2007 report of the department adjusted for cost increases from 2007 to 2016; provide future annual inflation adjustments; and consider competitive wage markets, training and qualification requirements and increased costs of new technologies.

Committee Amendment "A" (H-342)

This amendment directs the Department of Health and Human Services to increase reimbursement rates by 10% over the reimbursement levels implemented in 2007 pursuant to Public Law 2005, chapter 12, Part CCCC, section 1 for services provided under Chapter 101: MaineCare Benefits Manual, Chapter III, Sections 21 and 29 no later than October 1, 2017. The amendment narrows the services that are reimbursed to codes that provide direct support services to the MaineCare members receiving services under the waiver programs. It also directs the department and representatives of organizations of providers of community support services for individuals with intellectual disabilities and autism to examine reimbursement rates, costs of providing services and other costs to determine opportunities for efficiencies and savings. The department and the providers are required to report findings to the Joint Standing Committee on Health and Human Services no later than January 1, 2018. This amendment also adds an appropriations and allocations section.

Funding to increase reimbursement rates under Sections 21 and 29 for the first year of the biennium was included in Public Law 2017, chapter 284, the biennial budget. An amended version of this bill was incorporated into Public Law 2017, chapter 459.

LD 998 An Act To Adequately Pay for Emergency Medical Services

Died On Adjournment

Sponsor(s)	Committee Report	Amendments Adopted
SANDERSON D	OTP-AM ONTP	Н-296

This bill was reported out of committee in the First Regular Session of the 128th Legislature and then carried over to the Second Regular Session on the Special Appropriations Table. This bill was again carried over, still on the Special Appropriations Table, from the Second Regular Session to the next special session by joint order S.P. 748.

This bill requires the Department of Health and Human Services to work with emergency medical services providers in the State to define, and provide reimbursement under MaineCare for, community paramedicine services that do not involve transporting patients.

Committee Amendment "A" (H-296)

This amendment is the majority report of the committee. It removes the provisions in the bill that relate to community paramedicine services. It increases beginning March 1, 2018 the reimbursement rate for ambulance services under the MaineCare program under current law from 65% to 70% of the average allowable reimbursement rate under Medicare. It provides that the Department of Health and Human Services may not lower any