

MAINE STATE LEGISLATURE

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STATE OF MAINE
128TH LEGISLATURE
FIRST REGULAR SESSION



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

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

August 2017

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*Committee member for a portion of the session

STATE OF MAINE

128TH LEGISLATURE
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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 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..... 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 FINAL 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 128th Legislature is Wednesday, November 1, 2017. 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 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.

This bill was carried over to any special or regular session of the 128th Legislature by joint order, H.P. 1138.

LD 967 An Act To Ensure Access to Community Services for Persons with Intellectual Disabilities or Autism CARRIED OVER

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

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 were included in Public Law 2017, chapter 284, the biennial budget.

This bill was reported out of committee and then carried over to the next special or regular session of the 128th Legislature on the Special Appropriations Table by joint order, S.P. 601.

LD 998 An Act To Adequately Pay for Emergency Medical Services CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SANDERSON D	OTP-AM ONTP	H-296

Joint Standing Committee on Health and Human Services

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, which is the majority report of the committee, 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 reimbursement rates for ambulance services below the rates as of January 1, 2017. The amendment also adds an appropriations and allocations section.

This resolve was reported out of committee and then carried over to the next special or regular session of the 128th Legislature on the Special Appropriations Table by joint order, S.P. 601.

**LD 999 An Act To Provide a Healthy Learning Environment in Early Care CARRIED OVER
 Settings by Requiring Rules Concerning Nutrition and Physical Activity**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TERRY M		

This bill provides that rules adopted by the Department of Health and Human Services for child care facilities and family child care providers must include rules pertaining to physical activity and recreational screen time and the provision of nutritious foods that contribute to the wellness, healthy growth and development of young children.

This bill was carried over to any special or regular session of the 128th Legislature by joint order, H.P. 1138.

LD 1000 Resolve, To Increase Access to Brain Injury Waiver Services CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MALABY R LANGLEY B	OTP-AM	H-295

This resolve directs the Department of Health and Human Services to increase the rates for services provided to MaineCare members receiving Home Support (Residential Habilitation) Level I under the brain injury waiver, rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 18, to no less than \$8.63 per quarter hour. It also allows up to 400 units of care coordination each year rather than only in the first year of receiving services under the waiver. The Department of Health and Human Services is directed to explore opportunities to provide additional telehealth services, including care coordination services, provided by both licensed medical personnel and nonlicensed personnel.

Committee Amendment "A" (H-295)

This amendment clarifies that the Department of Health and Human Services must seek approval from the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to amend the brain injury waiver to increase Home Support (Residential Habilitation) Level I rates to no less than \$8.63 per quarter hour. It requires the increase in reimbursement to go to direct support employees. This amendment also includes an appropriations and allocations section.

This bill was reported out of committee and then carried over to any special or regular session of the 128th