

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
128<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 2017

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\*Committee member for a portion of the session

# STATE OF MAINE

128<sup>TH</sup> 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 128<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 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 128<sup>th</sup> 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*

**LD 1111      Resolve, To Establish a Task Force To Study the Causes of and Solutions to the Epidemic of Childhood Obesity in Maine      ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GRATWICK G DENNO D	ONTP	

This resolve directs the Commissioner of Health and Human Services to convene a task force to study the epidemic of childhood obesity in Maine.

**LD 1112      An Act Regarding the Maternal and Infant Death Review Panel      PUBLIC 203**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KEIM L	OTP-AM	S-189

This bill gives the maternal and infant death review panel the power to request the Commissioner of Health and Human Services to issue subpoenas to require disclosure of records and information. This is the same authority allowed the child death and serious injury review panel. It requires the panel to meet twice per year and to study the causes of the increase in infant mortality in the State within the past ten years. The bill requires the panel to report its findings by February 7, 2018, to the Department of Health and Human Services and the Joint Standing Committee on Health and Human Services in the Second Regular Session of the 128th Legislature.

**Committee Amendment "A" (S-189)**

This amendment replaces the bill. It changes the maternal and infant death review panel to the maternal, fetal and infant mortality review panel. It provides that "director" in the laws governing the review panel refers to the medical director of the Maine Center for Disease Control and Prevention because of the recent reorganization of personnel within the center. It allows the panel coordinator of the review panel to obtain, without the individual's or family's consent, the health information of a woman who died during pregnancy or within 42 days of giving birth, a child who died within one year of birth or a mother of a child who died within one year of birth, including fetal deaths after 28 weeks of gestation. It provides that the review panel is required to meet at least twice per year.

**Enacted Law Summary**

Public Law 2017, chapter 203 changes the maternal and infant death review panel to the maternal, fetal and infant mortality review panel. It provides that "director" in the laws governing the review panel refers to the medical director of the Maine Center for Disease Control and Prevention because of the recent reorganization of personnel within the center. It allows the panel coordinator of the review panel to obtain, without the individual's or family's consent, the health information of a woman who died during pregnancy or within 42 days of giving birth, a child who died within one year of birth or a mother of a child who died within one year of birth, including fetal deaths after 28 weeks of gestation. It provides that the review panel is required to meet at least twice per year.

**LD 1119      An Act To Ensure Safe Drinking Water in Public Buildings      ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROOKS H	ONTP	

*Joint Standing Committee on Health and Human Services*

This bill expands the requirement to test drinking water in schools that take drinking water from sources other than public water systems to include all public buildings that take water from a source other than a public water system, except that public buildings less than ten years old are exempt from this requirement. Under the bill, the Department of Health and Human Services must provide test results to the Department of Environmental Protection. The bill requires that the Department of Environmental Protection must make the results available on the department's publicly accessible website.

**LD 1133 An Act Regarding Access to Appropriate Residential Services for Individuals Being Discharged from Psychiatric Hospitalization**

**CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MCCREIGHT J HILL D		

This bill provides that, if a patient in a hospital who received treatment for a psychiatric condition and who the hospital has determined is clinically ready for discharge requests admission or readmission from the hospital to a facility operated by a residential service provider and that request is denied, the residential service provider must provide the patient the reasons for the denial in writing no later than three business days after the request is denied.

The bill directs the Department of Health and Human Services to develop a standardized form for use by residential service providers to state the specific reasons for denial. It requires a residential service provider to provide the standardized form to the patient or the patient's parent or guardian or designated representative. It requires a residential service provider to annually send to the department's division of licensing and regulatory services a report of all patients who are denied admission or readmission and the reasons given the patients that were contained in the standardized forms.

The bill allows a patient or a patient's parent or guardian or designated representative to recover \$500 from a residential service provider that violates these provisions. It also provides for the revocation of the license of a residential service provider that violates these provisions three times or more in a calendar year.

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

**LD 1134 An Act To Amend the Laws Governing Nursing Facilities To Permit Nurse Practitioners, Clinical Nurse Specialists and Physician Assistants To Perform Certain Physician Tasks**

**PUBLIC 145  
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
STEWART H CARPENTER M	OTP-AM	H-258 S-144 BRAKEY E

This bill provides that, in accordance with federal regulations:

1. For nursing home residents receiving skilled nursing facility level services, a physician assistant, nurse practitioner or clinical nurse specialist may provide medically necessary visits, certifications and recertifications and required visits that alternate with those performed by a physician; and
2. For nursing home residents receiving nursing facility level services, a physician assistant, nurse practitioner or clinical nurse specialist may perform any physician task.

**Committee Amendment "A" (H-258)**