MAINE STATE LEGISLATURE

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STATE OF MAINE

129th Legislature First Regular Session



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

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

August 2019

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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 129th 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	e
CON RES XXX	S
CONF CMTE UNABLE TO AGREE	
DIED BETWEEN HOUSES	d
DIED IN CONCURRENCE defeated in each house, but on different motions; legislation died	d
DIED ON ADJOURNMENT action incomplete when session ended; legislation died	d
EMERGENCYenacted law takes effect sooner than 90 days after session adjournment	t
FAILED, EMERGENCY ENACTMENT or FINAL PASSAGEemergency failed to receive required 2/3 vote	e
FAILED, ENACTMENT or FINAL PASSAGE failed to receive final majority vote	e
FAILED, MANDATE ENACTMENTlegislation proposing local mandate failed required 2/3 vote	e
HELD BY GOVERNOR Governor has not signed; final disposition to be determined at subsequent session	η
LEAVE TO WITHDRAWsponsor's request to withdraw legislation granted	d
NOT PROPERLY BEFORE THE BODYruled out of order by the presiding officer; legislation died	
INDEF PP indefinitely postponed; legislation died	d
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X ought-not-to-pass report accepted; legislation died	
P&S XXX	v
PUBLIC XXX	v
RESOLVE XXX	
VETO SUSTAINEDLegislature failed to override Governor's veto	9

The effective date for non-emergency legislation enacted in the First Regular Session of the 129th Legislature is Thursday, September 19, 2019. 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

Spectrum Disorder, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2019, chapter 20 authorizes the Department of Health and Human Services to adopt the major substantive rules for portions of Chapter 101: MaineCare Benefits Manual, Chapter III, Section 21: Allowances for Home and Community Benefits for Adults with Intellectual Disabilities or Autism Spectrum Disorder, a major substantive rule of the Department of Health and Human Services.

Resolve 2019, chapter 20 was finally passed as an emergency measure effective April 30, 2019.

LD 284 An Act To Improve Care Provided to Forensic Patients

CARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
GATTINE D		
BREEN C		

This bill establishes a residential forensic step-down facility, which provides treatment of forensic patients who no longer require hospital level care but cannot be safely treated in a community setting, in Augusta in the Capitol Area. It authorizes the Commissioner of Health and Human Services to maintain and operate the 21-bed forensic step-down facility. It provides that the facility must be licensed and that the Department of Health and Human Services must adopt rules that apply specifically to the licensure of a forensic step-down facility and that include the admission and discharge standards of the facility, the staffing model, security, patients' access to treatment and patient rights protections. It requires that the department provisionally adopt rules to implement the licensure of the forensic step-down facility no later than January 11, 2020. It creates an advisory committee to participate in and guide the planning process for the facility and to report to the Joint Standing Committee on Health and Human Services. It authorizes the committee to report out a bill based on the advisory committee's report. It requires the department to report to the committee on the progress of creating the facility and developing rules. It provides that the transfer of a forensic patient into the forensic step-down facility must be approved by a court of appropriate jurisdiction. It includes the forensic step-down facility in the Maine Revised Statutes, Title 34-B, chapter 1 as a "state institution."

This bill was carried over to any special or regular session, or both, of the 129th Legislature by joint order, H.P. 1322.

LD 297

An Act To Strengthen Brain Injury Resources for Underserved Populations, Including Opioid Overdose Brain Injury Survivors

PUBLIC 488

Sponsor(s)	<u>Committee Report</u>	Amendments Adopted
HEPLER A	OTP-AM	H-134
GRATWICK G		

This bill authorizes the Department of Health and Human Services to enter into contracts with organizations representing individuals with a brain injury and their families, bringing together state and national expertise to provide core brain injury support for underserved populations of individuals with an acquired brain injury.

Committee Amendment "A" (H-134)

This amendment adds victims of domestic violence to the list of underserved populations of individuals with an acquired brain injury. It also clarifies that the Department of Health and Human Services may adopt rules rather than being required to adopt rules.

Joint Standing Committee on Health and Human Services

Enacted Law Summary

Public Law 2019, chapter 488 authorizes the Department of Health and Human Services to enter into contracts with organizations to provide core brain injury support services to underserved populations of individuals with an acquired brain injury. These support services include access to a helpline, information and resource education, and family caregiver training.

LD 303 An Act To Require Recovery Residences for Persons with Substance Use Disorder Be Equipped with Naloxone and To Exempt from Criminal Liability Persons Administering Naloxone

PUBLIC 292

Sponsor(s)	<u>Committee Report</u>	Amendments Adopted
STEWART T	OTP-AM	H-406
DILL J		

This bill requires organizations that provide housing to persons with substance use disorder to store one unit of naloxone hydrochloride for every three residents. It also requires these organizations to provide training to full-time employees so that an employee may possess and administer naloxone hydrochloride to an individual who appears to be experiencing an opioid-related drug overdose. It directs the Department of Health and Human Services to adopt rules to implement these requirements.

Committee Amendment "A" (H-406)

This amendment, which is the unanimous report of the committee, strikes and replaces the bill and does the following.

- 1. It makes the requirements of the bill apply only to recovery residences and not to other housing-based programs and expands the definition of "recovery residence."
- 2. It changes the requirement for on-site storage of naloxone hydrochloride from at least one unit for every three residents of a housing-based program to at least two units for each floor of a recovery residence.
- 3. It exempts from arrest or prosecution a person who in good faith administers naloxone hydrochloride to another person experiencing a drug-related overdose. The person may not be arrested or prosecuted for a violation of laws prohibiting the unlawful possession of scheduled drugs, acquiring drugs by deception, the illegal possession of hypodermic apparatuses or the use of drug paraphernalia or a violation of probation if the grounds for arrest or prosecution are obtained as a result of the person's administering naloxone hydrochloride.
- 4. It removes the requirement that full-time employees of a housing-based program receive training and provides instead that residents of a recovery residence, employees of a recovery residence and all other persons involved in the administration of a recovery residence are required to successfully complete training in the administration of naloxone hydrochloride that meets the protocols and criteria established by the Department of Health and Human Services.

Enacted Law Summary

Public Law 2019, chapter 292 requires recovery residences to store on-site at least two units of naloxone hydrochloride for each floor of the recovery residence and requires that residents of a recovery residence, employees of a recovery residence and all other persons involved in the administration of a recovery residence are required to successfully complete training in the administration of naloxone hydrochloride that meets the protocols and criteria established by the Department of Health and Human Services. It also exempts from arrest or prosecution a person who in good faith administers naloxone hydrochloride to another person experiencing a drug-related overdose.