

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**

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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..... 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 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

LD 1007 Resolve, To Change the Educational Requirements of Certain Behavioral Health Professionals

RESOLVE 99

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| GATTINE D SANBORN L | OTP-AM | H-499 |

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to enact measures to expand and enhance the State's behavioral health direct care workforce, including, but not limited to, community-based mental health rehabilitation technicians, direct support professionals and behavioral health professionals.

Committee Amendment "A" (H-499)

This amendment replaces the concept draft with a resolve. It changes the educational requirements for behavioral health professionals providing children's home and community-based treatment to replace the requirement for a bachelor's degree to a minimum of 60 credit hours in a related field, 90 credit hours in an unrelated field combined with a plan for supervision and training or a high school diploma or equivalent with three years of experience working in the field combined with a plan for supervision and training. The educational requirements do not change the required behavioral health professional training or the prescribed time frames for that training. It also requires the Department of Health and Human Services to amend or establish contracts for training behavioral health professionals to train any additional individuals within existing resources, and authorizes the department to opt to charge individuals or their employers fees for training.

Enacted Law Summary

Resolve 2019, chapter 99 changes the educational requirements for behavioral health professionals providing children's home and community-based treatment from requiring a bachelor's degree to a minimum of 60 credit hours in a related field, 90 credit hours in an unrelated field combined with a plan for supervision and training or a high school diploma or equivalent with three years of experience working in the field combined with a plan for supervision and training. The resolve also requires the Department of Health and Human Services to amend or establish contracts for training behavioral health professionals to train any additional individuals within existing resources, and authorizes the department to opt to charge individuals or their employers fees for training.

LD 1012 An Act To Provide Stable Funding and Support for Child Care Providers

CARRIED OVER

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| MILLETT R GATTINE D | OTP-AM OTP-AM | S-211 |

This bill amends the child care services provisions in the following ways.

1. It establishes graduated quality differential rates for steps two to four in the four-step child care quality rating system currently required by law.
2. It requires that contracts with providers of child care services prioritize infants, toddlers and preschool children up to four years of age in a variety of ways.
3. It directs the Department of Health and Human Services to develop a shared services program for providers of child care services to realize efficiencies and achieve financial sustainability by sharing administrative and program services and costs.

Joint Standing Committee on Health and Human Services

Committee Amendment "A" (S-211)

This amendment, which is the majority report, lowers the increases to graduated quality differential rates for child care services for children other than infants from the bill. It also clarifies that the Department of Health and Human Services may use state funds to pay a quality differential rate for high-quality child care services if it chooses to do so. It allows the Department of Health and Human Services to use up to 25% of the State's federal child care and development block grant funding for contracts for high-quality child care to underserved children and areas of the State rather than requiring use of funding for contracts. The department is required to submit an annual report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the number of contracts, the percentage of block grant funding used for the contracts and the number of children served. It allows, rather than requires as in the bill, the department to develop a shared services program.

Committee Amendment "B" (S-212)

This amendment, which is the minority report, removes the sections of the bill that require increased reimbursement levels for graduated quality differential rates for child care. It allows the Department of Health and Human Services to use up to 25% of the State's federal child care and development block grant funding for contracts for high-quality child care to underserved children and areas of the State rather than requiring the use of contracts. The department is required to submit an annual report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the number of contracts, the percentage of block grant funding used for the contracts and the number of children served. It allows, rather than requires as in the bill, the department to develop a shared services program.

This amendment was not adopted.

This bill was reported out of committee and then carried over to any special or regular session, or both, of the 129th Legislature on the Special Appropriations Table by joint order, H.P. 1322.

LD 1030 An Act To Amend the Laws Governing the Substance Use Disorder Services Commission

PUBLIC 432

Sponsor(s)

PERRY A

Committee Report

OTP-AM

Amendments Adopted

H-295

This bill revises the membership and duties of the Substance Use Disorder Services Commission.

Committee Amendment "A" (H-295)

This amendment, which is the unanimous report of the committee, amends the bill to require the Substance Use Disorder Services Commission to make recommendations related to substance use disorder to the Department of Health and Human Services and the Governor based on the commission's activities.

The amendment also adds an appropriations and allocations section.

Enacted Law Summary

Public Law 2019, chapter 432 revises the membership and duties of the Substance Use Disorder Services Commission and requires the Substance Use Disorder Services Commission to make recommendations related to substance use disorder to the Department of Health and Human Services and the Governor based on the commission's activities.