

$\begin{array}{c} \textbf{STATE OF MAINE} \\ 129^{\text{TH}} \text{ Legislature} \\ \text{First Regular Session} \end{array}$



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

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

August 2019

STAFF:

ANNA BROOME, SENIOR LEGISLATIVE ANALYST ERIN DOOLING, LEGISLATIVE ANALYST OFFICE OF POLICY AND LEGAL ANALYSIS 13 STATE HOUSE STATION AUGUSTA, ME 04333 (207) 287-1670 AND LUKE LAZURE, SENIOR LEGISLATIVE ANALYST OFFICE OF FISCAL AND PROGRAM REVIEW 5 STATE HOUSE STATION AUGUSTA, ME 04333 (207) 287-1635 http://legislature.maine.gov/legis/opla/ Members: Sen. Geoffrey M. Gratwick, Chair Sen. Ned Claxton Sen. Marianne Moore

> REP. PATRICIA HYMANSON, CHAIR REP. MARGARET CRAVEN REP. ANNE C. PERRY REP. COLLEEN M. MADIGAN REP. RACHEL TALBOT ROSS REP. MICHELE MEYER REP. HOLLY B. STOVER REP. BETH A. O'CONNOR REP. KATHY IRENE JAVNER REP. ABIGAIL W. GRIFFIN

STATE OF MAINE

 $129^{\text{TH}} LEGISLATURE$ FIRST REGULAR SESSION



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 | arried over to a subsequent session of the Legislature |
|---|--|
| CON RES XXX | |
| CONF CMTE UNABLE TO AGREE | π of constitutional resolution passed by both noises |
| | |
| DIED BETWEEN HOUSES | |
| DIED IN CONCURRENCE defeated in a | |
| DIED ON ADJOURNMENT ac | tion incomplete when session ended; legislation died |
| EMERGENCYenacted 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 ENACTMENTlegislat | ion proposing local mandate failed required 2/3 vote |
| HELD BY GOVERNOR Governor has not signed; fin | al disposition to be determined at subsequent session |
| LEAVE TO WITHDRAW | sponsor'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 | |
| RESOLVE XXX | |
| VETO SUSTAINED | |
| | Le gisidiare juilea io overnue Oovernor s velo |

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

This bill requires the Department of Health and Human Services to annually set aside 20% of each federal block grant it receives for the most vulnerable communities in the State and 10% of each federal block grant it receives for federally recognized Indian nations, tribes and bands in the State.

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

LD 1135 Resolve, To Increase Funding for Assertive Community Treatment CARRIED OVER

| Sponsor(s) | Committee Report | Amendments Adopted |
|----------------|------------------|--------------------|
| MADIGAN C | OTP-AM | Н-253 |
| DESCHAMBAULT S | ONTP | S-170 GRATWICK G |

This resolve requires the Department of Health and Human Services to increase the MaineCare reimbursement rates for assertive community treatment by 25%, contract with a third party to conduct a rate study of reimbursement rates for assertive community treatment and report with findings by January 30, 2020. The department is authorized to set new rates based on the rate study as long as the rates are no lower than those in effect on April 1, 2019.

The resolve also includes an appropriations and allocations section.

Committee Amendment "A" (H-253)

This amendment, which is the majority report of the committee, amends the resolve to provide that the 25% rate increase for assertive community treatment is ongoing. It removes the directive to the Department of Health and Human Services to contract with a third party to conduct a rate study. It also replaces the appropriations and allocations section to reflect a change in funding.

Senate Amendment "A" To Committee Amendment "A" (S-170)

This amendment removes the emergency preamble and emergency clause and removes the fiscal year 2018-19 appropriation and reduces the fiscal year 2019-20 appropriation due to the delayed implementation.

This resolve 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 1137 An Act To Clarify the Background Check Process for Certain Child ONTP Care Workers

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| MADIGAN C | ONTP | |
| MILLETT R | | |

This bill removes the requirement that the Department of Health and Human Services, Background Check Center be used to screen prospective employees of child care facilities and family child care providers. Instead, this bill allows the criminal background check used for new and continuing school employees to fulfill the state and federal requirements for a mandatory criminal background check for a person who provides child care in a child care facility, a family child care provider and a person who provides day care in that person's home for one or two children whose care is paid for by state or federal funds.