

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
129<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 2019

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# STATE OF MAINE

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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 129<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 129<sup>th</sup> 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*

condition that impairs judgment. If the attending or consulting physician, in the physician's professional opinion, believes such a condition exists, the patient must be evaluated and treated by a state-licensed psychiatrist, psychologist, clinical social worker or clinical professional counselor. Medication to end a patient's life in a humane and dignified manner may not be prescribed until the person performing the counseling determines that the patient is not suffering from a psychiatric or psychological disorder or depression causing impaired judgment.

The law prohibits a provision in a contract, will or other agreement from being conditioned upon, or affected by, a person's making or rescinding a request for medication under the Act. It prohibits the sale, procurement or issuance of any life, health or accident insurance or annuity policy or the rate charged for any life, health or accident insurance or annuity policy from being conditioned upon or affected by the making or rescinding of such a request.

The law authorizes a health care provider to prohibit its employees, independent contractors or other persons or entities, including other health care providers, from participating in activities under the Act while on premises owned by or under the management or direct control of that prohibiting health care provider or while acting within the course and scope of any employment by, or contract with, the prohibiting health care provider. An individual health care provider may choose not to participate in providing medication to end a qualified patient's life but, if the patient requests the medical records be provided to another health care provider, the records must be transferred.

The law creates in the Maine Criminal Code affirmative defenses to prosecution for aggravated attempted murder, for murder and for aiding or soliciting suicide. A person may raise an affirmative defense to prosecution for these crimes if that person's conduct was expressly authorized by the Maine Revised Statutes, Title 22, chapter 418.

The law requires health care providers to submit specified information to the Department of Health and Human Services upon their writing a prescription for or dispensing medication under the Act and after the death of the qualified patient. The department shall generate and make available to the public an annual statistical report of information collected regarding compliance with the Act. A copy of the report must be submitted to the joint standing committee of the Legislature having jurisdiction over health matters annually by March 1st.

**LD 1315      An Act To Support Medically Monitored Crisis Support and Intervention**

**HELD BY  
GOVERNOR**

Sponsor(s)  
GATTINE D

Committee Report  
OTP-AM

Amendments Adopted  
H-351

This bill directs the Department of Health and Human Services to provide for an enhanced crisis stabilization reimbursement rate under the MaineCare program for medically monitored crisis support and intervention provided to persons 18 years of age or older with mental health and co-occurring substance use disorders who voluntarily seek treatment.

**Committee Amendment "A" (H-351)**

This amendment clarifies that the Department of Health and Human Services must establish a rate under the MaineCare program that is sufficient to provide medically monitored crisis support and intervention to an adult. The rate must be established in rule by December 31, 2019.