

MAINE STATE LEGISLATURE

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STATE OF MAINE
129TH LEGISLATURE
FIRST SPECIAL AND SECOND REGULAR SESSIONS



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

**JOINT STANDING COMMITTEE ON HEALTH AND
HUMAN SERVICES**

November 2020

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STATE OF MAINE

129TH 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..... 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

This bill:

1. Defines "behavioral health needs" to mean a wide range of mental health disorders and illnesses, substance use disorder, developmental disabilities and autism spectrum disorder;
2. Directs the Department of Health and Human Services to take measures to address the issue of extended stays in hospital emergency departments by minors with behavioral health needs by:
 - A. Maintaining a daily updated online statewide list of available mental health facility or program and community service provider placements for referral purposes by hospital emergency departments;
 - B. Maintaining a quarterly updated online resource list of mental health programs or facilities and community service providers that treat behavioral health needs; and
 - C. Collecting monthly data on and study the issue of extended stays of minors with behavioral health needs in hospital emergency departments and annually submitting a report with a summary of the study along with any recommendations to the joint standing committee of the Legislature having jurisdiction over health and human services matters;
3. Directs the department to study the data and analysis on extended stays in hospital emergency departments by minors with behavioral health needs and submit an annual report to the Legislature that identifies:
 - A. Reasons for the extended stays;
 - B. Specific behavioral health needs treatment programs and the waiting list for admission to each program; and
 - C. Funding mechanisms to provide short-term transitional assistance to minors with behavioral health needs discharged from a hospital emergency department to residential placements, partial hospitalizations or home-based programs; and
4. Directs the department to study the feasibility of adding a child behavioral needs advocate within the department to coordinate the department's activities with those of various agencies and programs that provide behavioral health needs services to minors and to submit a report to the Legislature by January 1, 2020.

This bill, which had been voted but had not yet been reported out by the committee, was carried over in committee to any special session of the 129th Legislature by joint order, S.P. 788.

LD 1429 An Act To Fund Opioid Use Disorder Prevention and Treatment ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
JACKSON T MCCREIGHT J	ONTP	

This bill was carried over in committee from the First Regular Session of the 129th Legislature by joint order, H.P. 1322.

This bill establishes the Opioid Use Disorder Prevention and Treatment Fund administered by the Department of Health and Human Services for the purpose of supporting opioid use disorder analysis, prevention and treatment. The fund is funded by a 2¢ fee per morphine milligram equivalent assessed against prescription opioid drug

Joint Standing Committee on Health and Human Services

manufacturers for prescription opioid drugs distributed in the State as well as appropriations, allocations and contributions from private and public sources.

LD 1461 An Act To Support Early Intervention and Treatment of Mental Health Disorders **CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BREEN C WARREN C	OTP-AM	S-244 S-300 BREEN C

This bill was carried over from the First Regular Session of the 129th Legislature on the Special Appropriations Table by joint order, H.P. 1322.

This bill requires the Department of Health and Human Services to establish a funding mechanism and reimbursement rate for the treatment of individuals showing early signs of a psychotic disorder using a coordinated specialty care model. Services must be evidence-based and treat both the individual and the family. The Department of Health and Human Services is directed to establish a funding mechanism to reimburse for the treatment of individuals in cooperation with the Department of Education and the Department of Labor. The Department of Health and Human Services is directed to apply to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services for any necessary waivers and state plan amendments and to seek federal funding under the community mental health services block grant.

Committee Amendment "A" (S-244)

This amendment clarifies that the department must establish a bundled rate for coordinated specialty care. It also provides that the department may review, develop or apply for any source of funds that may be available to implement reimbursement for the coordinated specialty care model. The amendment also adds an appropriations and allocations section.

Senate Amendment "A" To Committee Amendment "A" (S-300)

This amendment amends the committee amendment. This amendment retains the emergency preamble and emergency clause and, as in the committee amendment and the bill, requires the Department of Health and Human Services to establish a reimbursement rate for a coordinated specialty care model to treat individuals showing early signs of psychotic disorder. Services must be evidence-based and treat both the individual and the family. Under this amendment, the Department of Health and Human Services is directed, in cooperation with the Department of Education and the Department of Labor and no later than July 1, 2020, to establish a bundled rate to reimburse for services provided under the coordinated specialty care model that are not otherwise covered under the MaineCare program. This amendment moves the statutory requirements for the reimbursement to the Maine Revised Statutes, Title 22. This amendment retains the requirement that the Department of Health and Human Services apply to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services for any necessary waivers and state plan amendments and to seek federal funding under the community mental health services block grant but changes cross-references and requires that necessary applications be submitted no later than 90 days after the effective date of this legislation. The amendment also changes the appropriations and allocations section.

This bill was again carried over, still on the Special Appropriations Table, to any special session of the 129th Legislature by joint order, S.P. 788.