

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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STATE OF MAINE

129TH LEGISLATURE
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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

Human Services, which is directed to adopt rules governing the method of inspection.

Committee Amendment "A" (S-178)

This amendment adds an appropriations and allocations section.

Enacted Law Summary

Public Law 2019, chapter 444 eliminates the requirement that the State Fire Marshal inspect a family foster home and certify that it meets all elements of the fire safety code before the Department of Health and Human Services may issue a license to operate as a family foster home. It moves the inspection responsibility to the Department of Health and Human Services, which is directed to adopt rules governing the method of inspection.

LD 1539

An Act To Provide Maine Children Access to Affordable Health Care

CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CARNEY A MILLETT R	OTP-AM OTP-AM	H-578

This bill makes the following changes to the Cub Care program.

1. It changes the maximum eligibility level for family income from 200% of the federal poverty level to 325% of the federal poverty level.
2. It removes the three-month waiting period for enrollment in the Cub Care program following the loss of health insurance or coverage under an employer-based plan.
3. It establishes that eligibility is not subject to an asset test.
4. It provides coverage to persons 19 and 20 years of age and to noncitizens under 21 years of age. The Department of Health and Human Services is required to use state funds to fund the program but may apply for waivers or state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to receive federal matching funds.
5. It repeals the provisions regarding premium payments for the Cub Care program.
6. It requires the department to contract for outreach activities rather than providing them directly. The department must have a contract or contracts in place no later than January 1, 2020. The department is also required to seek federal grant funds for additional outreach activities under the federal Helping Ensure Access for Little Ones, Toddlers, and Hopeful Youth by Keeping Insurance Delivery Stable Act, Public Law 115-120 and the federal Advancing Chronic Care, Extenders and Social Services (ACCESS) Act, Public Law 115-123.
7. It requires the department to submit a state plan amendment to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to implement the use of the express lane eligibility option no later than January 1, 2020 and to implement it no later than six months after receiving approval.

Committee Amendment "A" (H-578)

This amendment, which is the majority report of the committee, makes the following changes to the bill.

1. It changes the maximum eligibility level for family income from 325% of the federal poverty level to 300% of the federal poverty level.

Joint Standing Committee on Health and Human Services

2. It directs the Department of Health and Human Services to submit any waivers or state plan amendments to accomplish the eligibility criteria established in this legislation, including but not limited to removing the three-month waiting period for enrollment in the Cub Care program following the loss of health insurance or coverage under an employer-based plan.
3. It removes the provision that eligibility is not subject to an asset test because current rules do not make eligibility subject to an asset test.
4. It removes the requirement to provide coverage to persons 19 and 20 years of age and to noncitizens under 21 years of age.
5. It removes the requirement that the department contract for outreach activities and removes the reference to specific federal grant funds the department must seek for additional outreach activities.
6. It removes the requirement for the department to submit a state plan amendment to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to implement the use of the express lane eligibility option.
7. It makes the repeal of the waiting period and premium payment requirements under the Cub Care program contingent on the approval of a waiver of those requirements by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services.
8. It adds an appropriations and allocations section.

Committee Amendment "B" (H-579)

This amendment, which is the minority report of the committee, makes the following changes to the bill.

1. It keeps the maximum eligibility level for family income at 200% of the federal poverty level, which is the amount established in current law.
2. It directs the Department of Health and Human Services to submit any waivers or state plan amendments to accomplish the eligibility criteria established in this legislation, including but not limited to removing the three-month waiting period for enrollment in the Cub Care program following the loss of health insurance or coverage under an employer-based plan.
3. It removes the provision that eligibility is not subject to an asset test because current rules do not make eligibility subject to an asset test.
4. It removes the requirement to provide coverage to persons 19 and 20 years of age and to noncitizens under 21 years of age.
5. It removes the requirement that the department contract for outreach activities and removes the reference to specific federal grant funds the department must seek for additional outreach activities.
6. It removes the requirement for the department to submit a state plan amendment to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to implement the use of the express lane eligibility option.
7. It makes the repeal of the waiting period and premium payment requirements under the Cub Care program contingent on the approval of a waiver of those requirements by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services.

Joint Standing Committee on Health and Human Services

8. It adds an appropriations and allocations section.

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 1548 Resolve, To Promote Quality and Transparency in the Provision of
Services by Assisted Housing Programs That Provide Memory Care**

RESOLVE 106

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LIBBY N	OTP-AM	S-142 S-346 BREEN C

This resolve requires the Department of Health and Human Services to contract with the University of Southern Maine's Edmund S. Muskie School of Public Service to conduct a study to determine the amount of time assisted housing program staff devote to meeting the needs of residents in assisted housing programs, with a focus on residents with Alzheimer's disease or dementia. It requires the department to amend certain provisions in the department's rule governing the licensing and functioning of assisted housing programs. It requires the department to establish a work group to review department rules governing training for direct care staff in Alzheimer's or dementia care units and other memory care units to determine the adequacy of the training.

Committee Amendment "A" (S-142)

This amendment requires the Department of Health and Human Services to issue a request for proposals to conduct the time study. It also requires the Department of Health and Human Services to submit a report, together with recommendations and suggested legislation, to the Joint Standing Committee on Health and Human Services describing the department's activities and actions regarding the time study and of the Alzheimer's and dementia care and other memory care work group established to review training of direct care staff. The amendment also adds an appropriations and allocations section.

Senate Amendment "A" To Committee Amendment "A" (S-346)

This amendment requires the State Controller to transfer \$355,501 from available balances in Other Special Revenue Funds accounts within the Department of Professional and Financial Regulation to the General Fund unappropriated surplus at the close of fiscal year 2019-20. The amendment also requires the Commissioner of Professional and Financial Regulation to determine from which accounts the funds will be transferred so that the sum equals \$355,501 and to notify the State Controller and the Joint Standing Committee on Appropriations and Financial Affairs of the amounts to be transferred from each account on or before June 30, 2020.

Enacted Law Summary

Resolve 2019, chapter 106 requires the Department of Health and Human Services to issue a request for proposals for a contract to conduct a time study to determine the amount of time assisted housing program staff devote to meeting the needs of residents in assisted housing programs, with a focus on residents with Alzheimer's disease or dementia. The time study is funded by available balances in Other Special Revenue Funds accounts within the Department of Professional and Financial Regulation.

Resolve 2019, chapter 106 also requires the Department of Health and Human Services to amend certain provisions in the department's rule governing the licensing and functioning of assisted housing programs and to establish a work group to review department rules governing training for direct care staff in Alzheimer's or dementia care units and other memory care units to determine the adequacy of the training. The department shall submit a report, together with recommendations and suggested legislation, to the Joint Standing Committee on Health and Human Services describing the department's activities and actions regarding the time study and of the Alzheimer's and