

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

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/>

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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

This resolve directs the Department of Health and Human Services to set the weekly MaineCare reimbursement rate paid to outpatient opioid treatment providers at \$110 per week, or at a higher rate if the department determines a higher rate is justified.

Public Law 2019, chapter 343 (the biennial budget) increased the weekly reimbursement rate for medication assisted treatment.

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

**LD 1635 Resolve, To Improve Access to Early and Periodic Screening, Diagnostic and Treatment Services for Children from Birth to 8 Years of Age RESOLVE 66
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CARSON B FARNSWORTH D	OTP-AM	S-182

This resolve requires the Department of Health and Human Services, in consultation with the Department of Education, to convene the participants of the federally funded Developmental Systems Integration initiative to determine the capacity of the State to provide child find and early and periodic screening, diagnostic and treatment services to children from birth to eight years of age, the gaps in services and the costs of addressing those gaps. The report must be submitted to the Joint Standing Committee on Health and Human Services no later than December 30, 2019.

Committee Amendment "A" (S-182)

This amendment requires the Department of Health and Human Services to convene a stakeholder group rather than convene the participants of the federally funded Developmental Systems Integration initiative. It also adds additional requirements to the report submitted to the Joint Standing Committee on Health and Human Services.

Enacted Law Summary

Resolve 2019, chapter 66 requires the Department of Health and Human Services, in consultation with the Department of Education, to convene a stakeholder group to determine the capacity of the State to provide child find and early and periodic screening, diagnostic and treatment services to children from birth to eight years of age, the gaps in services and the costs of addressing those gaps. The report must be submitted to the Joint Standing Committee on Health and Human Services no later than December 30, 2019.

Resolve 2019, chapter 66 was finally passed as an emergency measure effective June 13, 2019.

**LD 1637 An Act To Prevent Medicaid Payment from a Savings Account PUBLIC 348
Established under the Federal ABLÉ Act of 2014**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LIBBY N RILEY T	OTP-AM	S-179

This bill:

1. Prohibits the State, or any agency or instrumentality of the State, from seeking payment from an ABLÉ account or its proceeds for MaineCare benefits provided to a beneficiary, unless otherwise required by federal law;

Joint Standing Committee on Health and Human Services

- 2. Provides that funds held in an ABLÉ account must be disregarded when determining the designated beneficiary's eligibility for any means-tested public assistance program; and
- 3. Provides that earnings on funds held in an ABLÉ account are exempt from taxation by the State.

Committee Amendment "A" (S-179)

This amendment, which is the unanimous report of the committee, clarifies the provisions regarding the exemption of an account established under a qualified ABLÉ program that complies with the requirements of the federal Achieving a Better Life Experience Act of 2014, Public Law 113-295 from Medicaid estate recovery to the extent permitted under federal law.

Enacted Law Summary

Public Law 2019, chapter 348:

- 1. Prohibits the State, or any agency or instrumentality of the State, from seeking payment from an ABLÉ account or its proceeds for MaineCare benefits provided to a beneficiary, unless otherwise required by federal law;
- 2. Provides that funds held in an ABLÉ account must be disregarded when determining the designated beneficiary's eligibility for any means-tested public assistance program; and
- 3. Provides that earnings on funds held in an ABLÉ account are exempt from taxation by the State.

LD 1655 An Act To Improve and Modernize Home-based Care

CARRIED OVER

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MEYER M MOORE M	OTP-AM	H-524

This bill:

- 1. Establishes the Social Determinants of Health Stakeholder Advisory Group to collaborate with providers of home health care services and other services relating to the social determinants of health and make recommendations to the Department of Health and Human Services;
- 2. Provides for reimbursement for telehealth or telemonitoring private duty nursing, home health services and personal care services for an adult MaineCare member with a physical disability or an adult who is elderly who is receiving MaineCare services under a waiver granted by the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services for home-based and community-based services or state-funded home-based and community-based support services. The services must include:
 - A. Services that support a member's ability to remain in the member's home, including, but not limited to, telehealth and telemonitoring services that support a member's safety, mobility or medication compliance, or that support virtual home visits and clinical consultation; and
 - B. Services of a pharmacist to provide medication evaluation or consultation to a member;
- 3. Expands the duties of the Maine Telehealth and Telemonitoring Advisory Group to include making recommendations about home technology to the Department of Health and Human Services;
- 4. Directs the Department of Health and Human Services, beginning in 2020 and at least every two years thereafter and whenever legislation is enacted that affects the costs of providing private duty nursing, home health services