

# $\begin{array}{c} \textbf{STATE OF MAINE} \\ 129^{\text{TH}} \text{ Legislature} \\ \textbf{First Special and Second Regular Sessions} \end{array}$



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**

 $129^{\text{TH}} LEGISLATURE$ 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 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	arried over to a subsequent session of the Legislature
CON RES XXX	
CONF CMTE UNABLE TO AGREE	$\pi$ 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 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.

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on these subjects and on initial pilot implementation of the Low Barrier Opioid Treatment Response Program to the Joint Standing Committee on Health and Human Services no later than January 15, 2020.

#### Committee Amendment "A" (S-398)

This amendment replaces the bill with a resolve. The resolve requires the Department of Health and Human Services to establish a 24-month pilot project to provide low barrier opioid treatment response in Maine's federally qualified health centers to improve the availability of medication-assisted therapy and enhance the effectiveness and sustainability of acute care responses to persons in urgent need of treatment for substance use disorder, including opioid use disorder. The resolve provides funding of \$460,000 for implementing the first year of the 24-month pilot project in eight federally qualified health centers. It is anticipated that the same amount of funding will be required in fiscal year 2021-22.

It also directs the department to submit reports by December 1, 2021 and at the conclusion of the pilot project regarding the implementation of the pilot project to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The joint standing committee of the Legislature having jurisdiction over health and human services matters may submit legislation relating to the pilot project to the Second Regular Session of the 130th Legislature.

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

# LD 1689An Act To Address the Opioid Crisis through Evidence-based PublicCARRIED OVERHealth PolicyCARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN L	OTP-AM	S-177
MCCREIGHTJ		

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 expands the scope and capabilities of hypodermic apparatus exchange programs certified by the Department of Health and Human Services, Maine Center for Disease Control and Prevention. This bill requires the center to adopt rules that:

1. Allow the programs to distribute naloxone hydrochloride and other safer drug use supplies; and

2. Expand the criteria a program must meet in order to be awarded funds, including distributing naloxone hydrochloride and other safer drug use supplies; providing HIV, AIDS and hepatitis C testing; and maintaining referral agreements or having the capacity to provide counseling services, medication-assisted treatment services and infectious disease care.

The center is also required to consider geographic distribution of services provided by a program when allocating funding.

This bill also amends the Maine Criminal Code to remove the crimes of furnishing hypodermic apparatuses and illegal possession of hypodermic apparatuses and makes changes to other statutes to reflect that decriminalization.

#### Committee Amendment "A" (S-177)

This amendment removes the sections of the bill that decriminalize the crimes of furnishing or possessing

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hypodermic apparatuses. It removes the changes to the requirement to distribute educational materials. It removes the requirement to distribute naloxone hydrochloride and other safer drug use supplies. Instead of requiring that a hypodermic apparatus exchange program have a board, the amendment requires a program to have a process or system to regularly seek input from persons with a history of drug use. The amendment also makes changes to the allocation of funds appropriated for hypodermic apparatus exchange programs. The amendment also adds an 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.

#### LD 1737 An Act Relating to the Retention and Hiring of Mental Health Staff at the Department of Health and Human Services

Leave to Withdraw Pursuant to Joint Rule

Sponsor(s)

Committee Report

Amendments Adopted

JACKSONT

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

This bill is a concept draft pursuant to Joint Rule 208.

This bill proposes to enact measures designed to promote the hiring and retention of mental health professionals at the Department of Health and Human Services.

# LD 1758An Act To Clarify and Amend MaineCare Reimbursement ProvisionsPUBLIC 533for Nursing and Residential Care FacilitiesEMERGENCY

<u>Sponsor(s)</u>	Committee Report	Amendments Adopted
JACKSONT	OTP-AM	S-265
		S-368 BREEN C

This bill was passed to be enacted by the Legislature and then held by the Governor at the end of the First Regular Session of the 129th Legislature. It became law without signature at the beginning of the Second Regular Session.

This bill is an emergency bill amending statutory and unallocated provisions to require the Department of Health and Human Services to amend the department's rules regarding MaineCare reimbursement of nursing facility and residential care facility costs, including:

1. Clarifying and requiring additional cost-of-living adjustments to reimbursed costs based upon:

A. The costs paid by nursing facilities for goods and services required to provide patient care;

B. The forecasted increase in the skilled nursing facility market basket index for the coming federal fiscal year published by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services; and

C. Any further changes to the United States Department of Labor, Bureau of Labor Statistics Consumer Price