

# MAINE STATE LEGISLATURE

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**STATE OF MAINE**  
129<sup>TH</sup> 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

129<sup>TH</sup> 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*..... 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*

allow for reimbursement for this service beginning July 1, 2019.

The substance of this resolve was incorporated into Public Law 2019, chapter 616 (the supplemental budget).

The resolve 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 1856      Resolve, To Support Individuals with Acute Mental Health Needs      CARRIED OVER**

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|-------------------|-------------------------|---------------------------|
| MASTRACCIO A      |                         |                           |

This resolve requires the Department of Health and Human Services to amend its rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 45.03 to provide reimbursement for patients discharged from Southern Maine Health Care's psychiatric inpatient unit in the amount of \$13,396.47 per distinct discharge; the amended rule must be submitted to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services in time for the increased rate of reimbursement to apply beginning July 1, 2020.

This bill, which had been voted but not yet 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 1883      An Act Regarding the Recommendations of the Federal Traumatic Brain Injury State Partnership Program Concerning the Membership of the Acquired Brain Injury Advisory Council      PUBLIC 566**

| <u>Sponsor(s)</u>   | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|---------------------|-------------------------|---------------------------|
| HEPLER A<br>MOORE M | OTP                     |                           |

This bill expands the membership of the Acquired Brain Injury Advisory Council who are persons with acquired brain injury or family caregivers to 50% of the voting membership of the council and adds representatives from the long-term care ombudsman program, an aging and disability resource center and a center for independent living.

**Enacted Law Summary**

Public Law 2019, chapter 566 expands the membership of the Acquired Brain Injury Advisory Council who are persons with acquired brain injury or family caregivers to 50% of the voting membership of the council and adds representatives from the long-term care ombudsman program, an aging and disability resource center and a center for independent living.

**LD 1934      An Act Regarding Prior Authorization for Treatment for Opioid Use Disorder under the MaineCare Program      PUBLIC 645**

| <u>Sponsor(s)</u>      | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| STOVER H<br>GRATWICK G | OTP-AM                  | H-751                     |

This bill prohibits the Department of Health and Human Services from requiring under the MaineCare program prior authorization for medication-assisted treatment for opioid use disorder for the prescription of at least one drug