MAINE STATE LEGISLATURE

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STATE OF MAINE

 129^{th} 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	e
CON RES XXX	S
CONF CMTE UNABLE TO AGREE	d
DIED BETWEEN HOUSES	d
DIED IN CONCURRENCE defeated in each house, but on different motions; legislation died	d
DIED ON ADJOURNMENT action incomplete when session ended; legislation died	d
EMERGENCYenacted law takes effect sooner than 90 days after session adjournment	t
FAILED, EMERGENCY ENACTMENT or FINAL PASSAGEemergency failed to receive required 2/3 vote	e
FAILED, ENACTMENT or FINAL PASSAGE failed to receive final majority vote	e
FAILED, MANDATE ENACTMENTlegislation proposing local mandate failed required 2/3 vote	e
HELD BY GOVERNOR Governor has not signed; final disposition to be determined at subsequent session	η
LEAVE TO WITHDRAWsponsor's request to withdraw legislation granted	d
NOT PROPERLY BEFORE THE BODYruled out of order by the presiding officer; legislation died	
INDEF PP indefinitely postponed; legislation died	d
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X ought-not-to-pass report accepted; legislation died	
P&S XXX	v
PUBLIC XXX	v
RESOLVE XXX	
VETO SUSTAINEDLegislature failed to override Governor's veto	9

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

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

Sponsor(s)	Committee Report	Amendments Adopted
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 committe, 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

Sponsor(s)	Committee Report	Amendments Adopted
HEPLER A	ОТР	
MOORE M		

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

Sponsor(s)	Committee Report	Amendments Adopted
STOVER H	OTP-AM	H-751
GRATWICK G		

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

Joint Standing Committee on Health and Human Services

for each therapeutic class of medication used in medication-assisted treatment, except that the department may not require prior authorization for medication-assisted treatment for opioid use disorder for a pregnant woman.

Committee Amendment "A" (H-751)

This amendment makes the following changes to the bill.

- 1. It clarifies that the prior authorization limitations in the bill apply to medication-assisted treatment and intensive outpatient therapy services for a diagnosis of opioid use disorder.
- 2. It allows the Department of Health and Human Services to require prior authorization under the MaineCare program when a dosage increase exceeds the department's dosing criteria as identified on the department's MaineCare preferred drug list.
- 3. It authorizes the department to adopt routine technical rules to implement the prior authorization limitations.
- 4. It states that the prior authorization limitations must be applied in a manner that is not inconsistent with the requirements of the Medicaid drug rebate program.

Enacted Law Summary

Public Law 219, chapter 645 prohibits the Department of Health and Human Services from requiring, under the MaineCare program, prior authorization for the prescription of at least one drug for each therapeutic class of medication used for medication-assisted treatment for opioid use disorder, or for intensive outpatient therapy services for a diagnosis of opioid use disorder. Prior authorization is also prohibited for medication-assisted treatment for opioid use disorder when treating a pregnant woman. The department may require prior authorization when a dosage increase exceeds the department's dosing criteria as identified on the department's MaineCare preferred drug list. Prior authorization limitations must be applied in a manner that is not inconsistent with the requirements of the Medicaid drug rebate program.

LD 1935 An Act To Address the Needs of Pregnant Women Affected by Opioid Use Disorder ONTP

Sponsor(s)	Committee Report	Amendments Adopted
ROBERTS T	ONTP	
CHENETTE J		

This bill directs the Department of Health and Human Services to administer a program to provide grants for the treatment of pregnant women with opioid use disorder. It establishes the Fund for the Treatment of Pregnant Women with Opioid Use Disorder and directs the State Controller to transfer \$1,000,000 from the General Fund unappropriated surplus to that fund.

LD 1936 An Act To Allow Parents of Minors Who Qualify for In-home Personal Care under the MaineCare Program To Be Employed as Caregivers for Those Minors

CARRIED OVER

Sponsor(s)	Committee Report	Amendments Adopted
RILEYT		
LIBBY N		

This bill allows for the reimbursement of a parent providing in-home personal care services to the parent's child by