

MAINE STATE LEGISLATURE

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STATE OF MAINE
130TH LEGISLATURE
SECOND REGULAR SESSION



Disposition of bills and summaries of all laws enacted or finally passed

**JOINT STANDING COMMITTEE ON HEALTH AND
HUMAN SERVICES**

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JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

LD 1722 An Act To Ensure Access to All Paths to Recovery for Persons Affected by Opioids Using Money Obtained through Litigation against Opioid Manufacturers

ENACTED LAW SUMMARY

Public Law 2021, chapter 661 provides that funds received from opioid litigation may be deposited into the account described by a memorandum of understanding between the Attorney General's office and local stakeholders to receive funding from recently settled litigation. The memorandum establishes the terms under which these funds may be spent. The law establishes the Maine Recovery Council to direct fund disbursement and requires the Attorney General, by February 1st of each year, to submit a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters describing the activities of the council and the status of the Maine Recovery Fund and listing information on fund disbursements and information related to the outcomes of funded activities.

Public Law 2021, chapter 661 was enacted as an emergency measure effective April 25, 2022.

LD 1729 Resolve, To Assess the Feasibility of the Production of Insulin and Insulin Analogs in Maine

ENACTED LAW SUMMARY

Resolve 2021, chapter 166 requires the Department of Health and Human Services to convene a commission consisting of representatives of other government agencies or entities and interested groups to assess the feasibility of having the University of Maine System and other appropriate institutions or a public-private partnership between the University of Maine System, other appropriate institutions and a licensed drug manufacturer produce insulin in the State and provide such insulin at reduced, low or no cost to low-income residents of the State. The resolve requires the commission to assess the feasibility of such a program by reviewing factors including potential savings and additional costs to the University of Maine System and the State, the number of individuals who would benefit from such a program, potential regulatory or legal obstacles, available alternatives to providing insulin to low-income individuals at low or no cost and to seek input from members of the Legislature when making its assessment. It also requires that the commission explore options for capping copayments for insulin and insulin analogs provided through private insurers, the potential for the State to engage in volume purchasing of insulin and insulin analogs at reduced cost, the mechanisms by which the State could establish a program to distribute insulin and insulin analogs to residents of the State, opportunities to establish an interstate compact with other New England states to reduce insulin and insulin analog costs in compact states, opportunities to establish a public entity to manage the purchasing and distribution of insulin and insulin analogs with the possibility of eventual transition to a private entity, opportunities to establish a model facility to affordably manufacture insulin and insulin analogs and to distribute insulin and insulin analogs to Maine residents, and opportunities to procure dedicated funding to support the manufacture of insulin and insulin analogs and the distribution of insulin and insulin analogs to Maine residents. The resolve requires the commission to provide a

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report to the Joint Standing Committee on Health and Human Services by November 2, 2022 and authorizes the committee to introduce legislation based on that report during the First Regular Session of the 131st Legislature.

LD 1747 An Act to Require Screening for Cytomegalovirus in Certain Newborn Infants

ENACTED LAW SUMMARY

Public Law 2021, chapter 698 requires the Department of Health and Human Services to establish a cytomegalovirus screening program for newborn infants. It provides that the department may not require that a newborn infant be tested for the presence of cytomegalovirus if the parents of that infant object on the grounds that a test conflicts with their religious tenets and practices. It requires testing providers to report aggregate results to the department. It requires the Department of Health and Human Services to provide information to people who may become pregnant on the risks of cytomegalovirus. It directs the department to adopt routine technical rules to implement the requirements of the law and to report on its progress to the joint standing committee of the Legislature having jurisdiction over health and human services matters by February 1, 2023. It provides that no later than three years after the final adoption of rules, the Department of Health and Human Services shall convene a stakeholder group of clinicians and researchers with knowledge of cytomegalovirus screening to review the cytomegalovirus screening program and to consider changes to the program. No later than February 1, 2026, the department shall provide an update on this review process to the joint standing committee of the Legislature having jurisdiction over health and human services matters.

LD 1748 An Act Regarding the So-called Leveraging Investments so Families Can Thrive Report Produced by the Department of Health and Human Services

ENACTED LAW SUMMARY

Public Law 2021, chapter 648 makes the following changes to the Temporary Assistance for Needy Families program, or TANF, and the Additional Support for People in Retraining and Employment - Temporary Assistance for Needy Families program, or ASPIRE-TANF:

1. It requires the addition of qualitative survey data from participants in the TANF and ASPIRE-TANF programs, in the report that is submitted to the joint standing committee of the Legislature having jurisdiction over health and human services matters pursuant to the Maine Revised Statutes, Title 22, section 3109. It changes the report from an annual report to a biennial report beginning January 15, 2023.
2. It requires the Department of Health and Human Services to provide culturally and linguistically appropriate and trauma-informed services to TANF and ASPIRE-TANF recipients. It requires the rule-making process to implement these services to include consultation with current and former TANF and ASPIRE-TANF participants.