

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
130<sup>TH</sup> LEGISLATURE  
SECOND REGULAR SESSION



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

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

July 2022

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years ending in 2018 and 2019, adjusted for any change in scope adjustments approved since the base year and for inflation measured by the federally qualified health center market basket percentage published by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services. Each federally qualified health center must be given the option to be reimbursed under the method provided by this subsection or under the method provided by federal law. After December 31, 2023, the department may update the base year described in this subsection to a more recent base year;

2. Adjustments to federally qualified health center rates for changes in the scope of services provided by a federally qualified health center must adjust the center's reimbursement rate to reflect changes in its costs of providing services whenever the center establishes that it has experienced a material change in either the type, intensity, duration or quantity of services provided or the characteristics of the population receiving a service that affect the cost of the service. Adjustments must reflect costs incurred retroactive to the date that the department received the federally qualified health center request for the adjustment, unless the department determines that the change in scope was due to conditions or events that were beyond the control of the federally qualified health center, in which case the adjustment must be retroactive to the more recent of the date that the federally qualified health center incurred the cost increases requiring an adjustment and the date that is one year prior to the date the department received the federally qualified health center change in scope request; and
3. The Department of Health and Human Services may develop an alternative payment model. The alternative payment model must be consistent with the requirements of 42 United States Code, Section 1396a(bb). As long as federal law continues to require that the department allow a federally qualified health center to elect to use the prospective payment system set forth in 42 United States Code, Section 1396a(bb)(3), the alternative payment model must be an additional option and not a replacement of the updated base year option. In developing the alternative payment model, the department is required to consult with federally qualified health centers and provide a reasonable opportunity for dialogue and exchange of data before any rule implementing such a model is proposed.

Public Law 2021, chapter 747 was enacted as an emergency measure effective May 8, 2022.

### **LD 1824 Resolve, To Establish the Commission To Develop a Pilot Program To Provide Legal Representation to Families in the Child Protection System**

#### **ENACTED LAW SUMMARY**

Resolve 2021, chapter 181 establishes the Commission To Develop a Pilot Program To Provide Legal Representation to Families in the Child Protection System. The commission is required to develop a pilot program to provide legal counsel to parents and custodians as soon as the Department of Health and Human Services has begun a safety assessment to determine if a child is at risk of harm. The commission is required to submit a report, no later than November 2, 2022,

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with findings and a proposed pilot program, to the joint standing committees of the Legislature having jurisdiction over judiciary matters and health and human services matters.

Resolve 2021, chapter 181 was finally passed as an emergency measure effective May 8, 2022.

### **LD 1841 Resolve, Regarding Legislative Review of Portions of Chapter 283: Newborn Bloodspot Screening Rules, Section 14, a Major Substantive Rule of the Department of Health and Human Services, Maine Center for Disease Control and Prevention**

#### **ENACTED LAW**

Resolve 2021, chapter 124 authorizes the final adoption of Chapter 283: Newborn Bloodspot Screening Rule, Section 14, a major substantive rule of the Department of Health and Human Services, Maine Center for Disease Control and Prevention. The changes increase the bloodspot filter paper fees.

Resolve 2021, chapter 124 was finally passed as an emergency measure effective February 17, 2022.

### **LD 1848 An Act To Increase the Availability of Assertive Community Treatment Services**

#### **ENACTED LAW**

Public Law 2021, chapter 540 amends the behavioral and developmental services law regarding mental health hospitalization to add the definition of "prescriber," which is defined to mean a licensed health care provider with authority to prescribe, including a licensed physician, certified nurse practitioner or licensed physician assistant who has training or experience in psychopharmacology. It also amends the definition of "assertive community treatment" to change the composition of the multidisciplinary team that provides assertive community treatment by removing reference to the term "psychiatrist" and replacing it with the term "prescriber" and by providing that a licensed practical nurse may be a member of the team in lieu of a registered nurse.

Public Law 2021, chapter 540 was enacted as an emergency measure effective February 17, 2022.