STATE OF MAINE

125TH LEGISLATURE
FIRST REGULAR SESSION

Summaries of bills, adopted amendments and laws enacted or finally passed

JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES

July 2011

STAFF:
JANE ORBETON, SENIOR ANALYST
ANNA BROOME, LEGISLATIVE ANALYST
OFFICE OF POLICY AND LEGAL ANALYSIS
13 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1670
&
CHRIS NOLAN
OFFICE OF FISCAL AND PROGRAM REVIEW
5 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1635

MEMBERS:
SEN. EARLE L. MCCORMICK, CHAIR
SEN. NICHI S. FARNHAM
SEN. MARGARET M. CRAVEN

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LD 28 **Resolve, To Improve Access to Employment Opportunities for Persons with Intellectual Disabilities and Autistic Disorders** **RESOLVE 49 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
FLOOD CRAVEN	OTP-AM	H-139

This resolve directs the Department of Health and Human Services to amend the MaineCare Benefits Manual to remove the language that restricts the number of persons with intellectual disabilities and autistic disorders who may work at any given work site or location to 50 percent of a business's workforce at that work site or location.

Committee Amendment "A" (H-139)

This amendment requires the rule to be amended on an emergency basis and requires routine technical rulemaking following the expiration of the emergency rule.

Enacted Law Summary

Resolve 2011, chapter 49 directs the Department of Health and Human Services to amend the MaineCare Benefits Manual to remove the language that restricts the number of persons with intellectual disabilities and autistic disorders who may work at any given work site or location to 50 percent of a business's workforce at that work site or location. The resolve directs that the rules be amended on an emergency basis and that the rules be adopted as routine technical rules.

Resolve 2011, chapter 49, was finally passed as an emergency measure effective May 25, 2011.

LD 29 **An Act To Limit Salaries of Hospital Administrators** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
BOLDUC	ONTP	

This bill limits the annual salary and compensation package of hospital administrators to the level of the salary of the Governor beginning January 1, 2012.

LD 65 **Resolve, To Establish a Working Group of Stakeholders To Review the Current and Future Dementia Training Needs of Long-term Care Providers** **RESOLVE 28 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP-AM	S-24

This resolve requires the Department of Health and Human Services to amend the rules for licensing long-term care facilities and adult day care programs and for certifying residential care facilities and supported living arrangements

to require that all administrators and direct care staff complete eight hours of dementia care training in order to work in those long-term care facilities, adult day care programs, residential care facilities and supported living arrangements and to require that documentation of satisfaction of the training requirement is a condition of their licensure or certification.

Committee Amendment "A" (S-24)

This amendment replaces the resolve and adds an emergency preamble and emergency clause to the resolve. It directs the Department of Health and Human Services to establish within existing resources a working group of stakeholders to review the current and future dementia training needs of long-term care providers. It directs the working group to make recommendations to the Commissioner of Health and Human Services. It directs the commissioner to report to the Joint Standing Committee on Health and Human Services by November 30, 2011.

Enacted Law Summary

Resolve 2011, chapter 28 directs the Department of Health and Human Services to establish within existing resources a working group of stakeholders to review the current and future dementia training needs of long-term care providers. It directs the working group to make recommendations to the Commissioner of Health and Human Services. It directs the commissioner to report to the Joint Standing Committee on Health and Human Services by November 30, 2011.

Resolve 2011, chapter 28 was passed as an emergency measure effective April 28, 2011.

LD 70 **An Act To Include Independent Practice Dental Hygienists in MaineCare** **PUBLIC 457**

Sponsor(s)	Committee Report	Amendments Adopted
RICHARDSON W	OTP-AM	H-49
		S-339 ROSEN R

This bill provides for reimbursement under the MaineCare program to directly reimburse dental hygienists practicing independently as authorized under the Maine Revised Statutes, Title 32, section 1094-I for all procedures performed under Title 32, section 1094-Q, subsection 1. The bill directs the Department of Health and Human Services to adopt rules to implement this provision and designates the rules as routine technical rules.

Committee Amendment "A" (H-49)

This amendment removes the requirement that rules be adopted by April 1, 2012 and adds a provision to reimburse a federally qualified health center that employs an independent practice dental hygienist as a core provider.

Senate Amendment "A" To Committee Amendment "A" (S-339)

This amendment limits the procedures for which the Department of Health and Human Services, by October 1, 2012, must provide reimbursement to 6 specified procedures.

Enacted Law Summary

Public Law 2011, chapter 457 provides for reimbursement under the MaineCare program to directly reimburse dental hygienists practicing independently as authorized under the Maine Revised Statutes, Title 32, section 1094-I for 6 specified dental procedures by October 1, 2012. The law provides reimbursement for independent practice dental hygienists who are core providers at federally qualified health centers. The law directs the Department of

Health and Human Services to adopt rules to implement this provision by April 1, 2012 and designates the rules as routine technical rules.

LD 75 **Resolve, Directing the Department of Health and Human Services To Amend Its Rules Governing Electronic Benefits Transfer Cards** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
WOOD MASON	ONTP	

This bill requires the Department of Health and Human Services to amend its rules governing the electronic benefits transfer system to provide that a person may not receive cash back in connection with a transaction made with an electronic benefits transfer card that is drawing on the person's food supplement benefit account and to require that a photograph of the owner of an electronic benefits transfer card appear on that card.

LD 105 **Resolve, Regarding Legislative Review of Chapter 13: Municipal Service Fee, a Major Substantive Rule of the Department of Health and Human Services** **RESOLVE 21 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
	OTP-AM	H-50

This resolve provides for legislative review of Chapter 13: Municipal Service Fee, a major substantive rule of the Department of Health and Human Services.

Committee Amendment "A" (H-50)

This amendment authorizes the final adoption of Chapter 13: Municipal Service Fee, a provisionally adopted major substantive rule of the Department of Health and Human Services, only if the name of the fee is changed to the state share of vital records fee, municipalities remit the state portion of the fees by the 30th of each month and any increase beyond the capped state share is removed from the rule.

Enacted Law Summary

Resolve 2011, chapter 21 provides for legislative review of Chapter 13: Municipal Service Fee, a major substantive rule of the Department of Health and Human Services. The rule had been adopted by the department as an emergency with an effective date of October 5, 2010 to allow the department to assess a fee on municipal governments related to administering vital records. Resolve 2011, chapter 21 approves the rule as long as the rule is amended to change the name of the fee to the state share of vital records fee, municipalities remit the state portion of the fees by the 30th of each month, and any increase beyond the capped state share is removed from the rule.

Resolve 2011, chapter 21 was finally passed as an emergency measure effective April 15, 2011.

LD 121 **An Act To Amend the Laws Regarding Public Health Infrastructure** **PUBLIC 306**

Sponsor(s)	Committee Report	Amendments Adopted
SOCTOMAH RAYE	OTP-AM	H-459

This bill extends to the federally recognized Indian nations, tribes and bands in the State and to their health departments and health clinics the laws on comprehensive community health coalitions, district coordinating councils for public health, district public health units, Healthy Maine Partnerships, the universal wellness initiative and health risk assessment.

Committee Amendment "A" (H-459)

This amendment replaces the bill. It creates a new tribal district in the public health infrastructure system composed of any lands belonging to Indian tribes in the State and including any member of a tribe living outside of tribal lands. It allows the tribal district to apply for Healthy Maine Partnerships funding. It allows for clear data assessments for the tribal district and tribal members that are separate from data available for other districts.

Enacted Law Summary

Public Law 2011, chapter 306 creates a new tribal district in the public health infrastructure system composed of any lands belonging to Indian tribes in the State and including any member of a tribe living outside of tribal lands. It allows the tribal district to apply for Healthy Maine Partnerships funding. It allows for clear data assessments for the tribal district and tribal members that are separate from data available for other districts.

LD 127 **Resolve, To Align Child-to-staff Ratios in Child Care Facilities** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HARVELL	ONTP	

This resolve directs the Department of Health and Human Services to amend the rules for licensing child care facilities in order to increase the child-to-staff ratios of child care centers to the child-to-staff ratios of small child care facilities. The resolve designates the rules as routine technical rules.

LD 146 **An Act To Prohibit the Use of Mercury Amalgams in Dental Procedures for Children, Pregnant Women and Nursing Mothers** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
FITZPATRICK	ONTP	

This bill prohibits a dentist from knowingly using mercury or a mercury amalgam in any dental procedure involving a person 17 years of age or younger, a woman who is pregnant or a woman who is nursing a child.

LD 150 **An Act To Require Drug Testing for Medicaid Recipients with Prescriptions for Scheduled Drugs** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CEBRA SNOWE-MELLO	ONTP	

This bill requires the Department of Health and Human Services to develop a program that requires Medicaid recipients with prescriptions for scheduled drugs to be tested periodically to ensure that they are taking the prescribed scheduled drugs.

LD 157 **An Act To Encourage Access to Health Care in Maine** **INDEF PP**

Sponsor(s)	Committee Report	Amendments Adopted
TRAHAN		

This bill amends the Hospital and Health Care Provider Cooperation Act, which applies to mergers of covered entities, which are defined as hospitals and health care providers. Currently the Act applies only to a merger of a hospital with a hospital or of a health care provider with a health care provider. This bill makes the Act apply also to a merger of a hospital with a health care provider. This bill was indefinitely postponed prior to referral to any committee.

LD 193 **An Act To Require an Applicant for State Assistance To Show Proof of Legal Residence in the United States and Proof of Residency for at Least the Previous 90 Days in This State** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CEBRA	ONTP	

This bill provides that an applicant for state assistance under the Temporary Assistance for Needy Families program, the MaineCare program or the food stamp program must be a legal resident of the United States and a resident of this State.

LD 216 **Resolve, Regarding MaineCare Tobacco Treatment and Smoking Cessation Benefits** **RESOLVE 24**

Sponsor(s)	Committee Report	Amendments Adopted
SAVIELLO	OTP-AM	S-17

This resolve directs the Department of Health and Human Services to amend its rules governing the MaineCare program to provide that a person who smokes is not eligible to receive benefits under the program.

Committee Amendment "A" (S-17)

This amendment changes the title of the resolve and changes the resolve to focus on MaineCare tobacco cessation and treatment. The amendment directs the Department of Health and Human Services, through the Partnership for a Tobacco-Free Maine, the Maine Center for Disease Control and Prevention and the Office of MaineCare Services, to work to address and reduce tobacco use by MaineCare members, to identify best practice measures for reducing the smoking rate of MaineCare members and to determine ways to increase use of the MaineCare tobacco treatment benefit while working within existing resources to fund projects necessary to reach MaineCare members. The amendment requires the department to submit a written report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on its progress by November 30th each year through 2014.

Enacted Law Summary

Resolve, 2011, chapter 24 directs the Department of Health and Human Services, through the Partnership for a Tobacco-Free Maine, the Maine Center for Disease Control and Prevention and the Office of MaineCare Services, to work to address and reduce tobacco use by MaineCare members, to identify best practice measures for reducing the smoking rate of MaineCare members and to determine ways to increase use of the MaineCare tobacco treatment benefit while working within existing resources to fund projects necessary to reach MaineCare members. The resolve requires the department to submit a written report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on its progress by November 30th each year through 2014.

LD 248 **An Act To Provide for a Temporary License To Operate Certain Eating and Lodging Establishments** **LEAVE TO WITHDRAW**

Sponsor(s)	Committee Report	Amendments Adopted
MALABY LANGLEY	LTW	

This bill allows an initial applicant for a license for a currently licensed eating establishment, eating and lodging place, lodging place, recreational camp, youth camp or camping area that needs a new license due to a change in ownership to also apply for a temporary license until a determination on the initial license application is reached or for 60 days, whichever is shorter. The fee for a temporary license is $100.

LD 258 **An Act Relating to Access to Vital Records** **PUBLIC 58**

Sponsor(s)	Committee Report	Amendments Adopted
SANDERSON	OTP-AM	H-77

This bill makes more accessible to the public birth records, marriage records, domestic partnership registrations and death records while maintaining safeguards regarding certified copies of those records.

Committee Amendment "A" (H-77)

This amendment replaces the bill. It clarifies that informational copies of vital records are noncertified copies. It shortens the time period for access to vital records. It opens to inspection and allows for purchase of noncertified copies of vital records created prior to 1892. It requires custodians of vital records to permit inspection of the records by a person who has a direct and legitimate interest and by a researcher engaged in genealogical research who holds a researcher identification card.

Enacted Law Summary

Public Law 2001, chapter 58 clarifies that informational copies of vital records are noncertified copies. It shortens the time period for access to vital records. It opens to inspection and allows for purchase of noncertified copies of vital records created prior to 1892. It requires custodians of vital records to permit inspection of the records by a person who has a direct and legitimate interest and by a researcher engaged in genealogical research who holds a researcher identification card.

LD 267 **An Act To Strengthen the Laws on Methicillin-resistant Staphylococcus Aureus and To Improve Health Care** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
GOODE CRAVEN	ONTP MAJ OTP-AM MIN	

This bill strengthens the laws on the collection and dissemination of information regarding methicillin-resistant Staphylococcus aureus and screening requirements and procedures to control the spread of the infection. The bill requires reporting on multidrug-resistant organism infections and provides for a patient's right to personal advocacy in hospital and other health care settings.

Committee Amendment "A" (H-415)

This amendment is the minority report of the committee. The amendment adds mandatory screening for methicillin-resistant Staphylococcus aureus on transfer into an intensive care unit in a hospital and screening up to 3 weeks prior to elective admission. It requires screening of certain lesions. It requires screening of patients admitted for surgical implantation of any medical device or hardware and of patients who have had those procedures in the past. It qualifies the authority of a patient advocate, making it dependent on the discretion of the patient. It makes other changes in the proposed law on patient advocates.

LD 286 **An Act To Allow the Operation of Crematoriums at Oak Grove Cemetery and the Kelley Family Cemetery** **P & S 10 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
HANLEY MCCORMICK	OTP-AM MAJ ONTP MIN	H-142 S-131 RAYE

This bill authorizes Oak Grove Cemetery to construct a crematorium on land that it owns or is owned by the City of Gardiner and that is in an area zoned for industrial or commercial use or zoned as rural in the greater Gardiner area. Current law allows crematoriums only in cemeteries with 20 or more acres of land. This bill provides that the land on which the crematorium is constructed may be less than 20 acres, but not less than 3 acres.

Committee Amendment "A" (H-142)

This amendment requires that the site on which a crematorium is to be constructed be owned by Oak Grove Cemetery rather than owned by Oak Grove Cemetery or the City of Gardiner, as proposed in the bill.

Senate Amendment "B" (S-131)

This amendment authorizes the construction and operation of a crematorium in Steuben on land that meets the statutory criteria except that the cemetery has not included the full 20 acres for the full 2 years required under current law as interpreted by the Department of Health and Human Services.

Enacted Law Summary

Current law allows crematoriums to be built only in cemeteries with 20 or more acres of land and that have been in existence and used for burial for at least two years preceding the construction of the structure. Private and Special Law 2011, chapter 10 authorizes the construction of two crematoriums that do not meet the statutory criteria. It authorizes the Oak Grove Cemetery in Gardiner to construct a crematorium on land that it owns, is in an area zoned for industrial or commercial use or zoned as rural in the greater Gardiner area and on land smaller than 20 acres but larger than 3 acres. It also authorizes the construction and operation of a crematorium in Steuben on land that meets the statutory criteria except that the cemetery has not included the full 20 acres for the full 2 years required.

Private and Special Law 2011, chapter 10 was enacted as an emergency measure effective May 31, 2011.

LD 300 An Act To Increase the Availability of Lead Testing for Children PUBLIC 183

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP-AM	S-129

This bill allows a health care provider or health care facility or clinic that dispenses benefits of the Women, Infants and Children Special Supplemental Food Program of the federal Child Nutrition Act of 1966 approved by the Department of Health and Human Services to perform in-office blood lead analyses under the Lead Poisoning Control Act.

Committee Amendment "A" (S-129)

This amendment adds Head Start facilities to the facilities that may analyze a child's blood sample for blood lead level as long as the facility meets the requirements of the Department of Health and Human Services. The amendment repeals the Maine Revised Statutes, Title 22, section 1319-A and reorganizes its contents as section 1319-D for easier reading.

Enacted Law Summary

Public Law 2011, chapter 183 allows a health care provider or health care facility or clinic that dispenses benefits of the Women, Infants and Children Special Supplemental Food Program of the federal Child Nutrition Act of 1966 or Head Start facilities that are approved by the Department of Health and Human Services to perform in-office blood lead analyses under the Lead Poisoning Control Act.

LD 303 **An Act To Improve Hospital Transparency** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
GOODE BRANNIGAN	ONTP	

This bill makes medical organizations that receive over $250,000 annually in public funds for medical services subject to the freedom of access laws.

LD 332 **Resolve, Regarding Legislative Review of Portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program, a Major Substantive Rule of the Department of Health and Human Services** **RESOLVE 96 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
	OTP	

This resolve provides for legislative review of portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2011, chapter 96 provides for legislative review of portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program, a major substantive rule of the Department of Health and Human Services.

Resolve 2011, chapter 96 was passed as an emergency effective June 21, 2011.

LD 346 **An Act Regarding Pharmacy Reimbursement in MaineCare** **PUBLIC 458**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS DIAMOND	OTP-AM MAJ ONTP MIN	H-563 S-345 ROSEN R

This bill requires the Department of Health and Human Services to reimburse pharmacies for dispensing covered brand name and generic drugs under the MaineCare program based on a formula that includes calculated wholesale acquisition cost plus 6.7% and a dispensing fee of $3.35 per prescription and allows the department to adopt routine technical rules. The formula applies to drugs dispensed under the MaineCare program on or after September 26, 2011.

Committee Amendment "A" (H-563)

This amendment is the majority report of the committee. This amendment replaces the bill. The amendment:

1. Authorizes pharmacies to charge MaineCare members copayments for prescription drugs dispensed and allows pharmacies to refuse to dispense if copayments are not paid as long as certain procedures are in place and are followed by the Department of Health and Human Services and the pharmacies;

2. Adds a provision requiring notice to MaineCare members of copayment requirements;

3. Provides an effective date for the statutory changes upon amendment and federal approval of the Medicaid state plan but no earlier than October 1, 2011;

4. Directs the Department of Health and Human Services to review the cost of dispensing a prescription drug under the MaineCare program, to review other information available on pharmacy reimbursement and to report by January 15, 2012 to the Joint Standing Committee on Health and Human Services with recommendations regarding the dispensing fee; and

5. Adds an appropriations and allocations section.

Senate Amendment "A" To Committee Amendment "A" (S-345)

This amendment strikes the appropriations and allocations section.

Enacted Law Summary

Public Law 2011, chapter 458 amends MaineCare pharmacy benefits for MaineCare members, making the pharmacy copay mandatory by enacting the following:

1. Authorizing pharmacies to charge MaineCare members copayments for prescription drugs dispensed and allowing pharmacies to refuse to dispense if copayments are not paid as long as certain procedures are in place and are followed by the Department of Health and Human Services and the pharmacies;

2. Adding a provision requiring notice to MaineCare members of copayment requirements;

3. Providing an effective date for the statutory changes upon amendment and federal approval of the Medicaid state plan but no earlier than October 1, 2011; and

4. Directing the Department of Health and Human Services to review the cost of dispensing a prescription drug under the MaineCare program, to review other information available on pharmacy reimbursement and to report by January 15, 2012 to the Joint Standing Committee on Health and Human Services with recommendations regarding the dispensing fee.

LD 353 **An Act Regarding Agencies Contracted by the Department of Health and Human Services To Provide Regulatory Oversight and Billing Services** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN BRANNIGAN	ONTP	

This bill requires the Department of Health and Human Services to adopt rules regarding contracts for regulatory oversight and billing services for service providers to require proof that the contractor has obtained financial securitization for all financial obligations, even if the contractor ceases doing business.

LD 360 **An Act To Amend the Maine Certificate of Need Act of 2002** **PUBLIC 424**

Sponsor(s)	Committee Report	Amendments Adopted
MCKANE	OTP-AM MAJ	H-625
SNOWE-MELLO	OTP-AM MIN	H-661 STRANG BURGESS

Under current law, before introducing additional health care services and procedures in a market area, a person must apply for and receive a certificate of need from the Department of Health and Human Services. This bill eliminates that requirement.

Committee Amendment "A" (H-625)

This amendment is the majority report of the committee. The amendment replaces the bill and does the following.

Part A amends certificate of need laws by raising thresholds for review, providing for later threshold increases tied to the Consumer Price Index medical care services index and eliminating the certificate of need requirements for the purchase of replacement equipment. The amendment includes a threshold of $3,000,000 for capital expenditures for a new health service by a new or existing health care facility. The amendment exempts from the requirement of a certificate of need process certain capital expenditures by health care facilities that have been certified by the Efficiency Maine Trust as cost-effective and requires the trust to develop and implement a process for certification.

Part B amends the certificate of need laws by increasing the threshold for nursing facility projects, providing for later threshold increases tied to the Consumer Price Index, limiting MaineCare budget neutrality requirements and the MaineCare nursing facility funding pool to apply solely to projects that propose to add additional nursing facility beds to the total inventory of beds within the State, making other changes to certificate of need laws and clarifying that projects need to comply with the principles of the Maine Quality Forum only when such standards are directly applicable to nursing facility projects.

Part C requires the Department of Health and Human Services to amend its rules on certificate of need by January 1, 2012 to permit applications to be filed at any time, rather than on a cycle, and to allow applicants to waive having a technical assistance meeting. It also requires the Department of Health and Human Services to convene a stakeholder group to review certificate of need laws and rules.

Part D shortens by half the time periods in the laws on the application and review processes for certificate of need.

Part E adds an appropriations and allocations section.

Part F adds an effective date of February 15, 2012 except that the provision requiring the Department of Health and Human Services to amend its rules to permit certificate of need applications to be filed at any time takes effect December 1, 2011 and the provision requiring the department to convene a stakeholder group takes effect October 1, 2011.

Committee Amendment "B" (H-626)

This amendment is the minority report of the committee. The amendment replaces the bill and does the following.

Part A amends certificate of need laws by raising thresholds for review, providing for later threshold increases tied to the Consumer Price Index medical care services index and eliminating the certificate of need requirements for the purchase of replacement equipment. The amendment includes a threshold of $1,000,000 for capital expenditures for

a new health service by a new or existing health care facility. The amendment exempts from the requirement of a certificate of need process certain capital expenditures by health care facilities that have been certified by the Efficiency Maine Trust as cost-effective and requires the trust to develop and implement a process for certification.

Part B amends the certificate of need laws by increasing the threshold for nursing facility projects, providing for later threshold increases tied to the Consumer Price Index, limiting MaineCare budget neutrality requirements and the MaineCare nursing facility funding pool to apply solely to projects that propose to add additional nursing facility beds to the total inventory of beds within the State, making other changes to certificate of need laws and clarifying that projects need to comply with the principles of the Maine Quality Forum only when such standards are directly applicable to nursing facility projects.

Part C requires the Department of Health and Human Services to amend its rules on certificate of need by January 1, 2012 to permit applications to be filed at any time, rather than on a cycle, and to allow applicants to waive having a technical assistance meeting. It also requires the Department of Health and Human Services to convene a stakeholder group to review certificate of need laws and rules.

Part D shortens by half the time periods in the laws on the application and review processes for certificate of need.

Part E adds an appropriations and allocations section.

Part F adds an effective date of February 15, 2012 except that the provision requiring the Department of Health and Human Services to amend its rules to permit certificate of need applications to be filed at any time takes effect December 1, 2011 and the provision requiring the department to convene a stakeholder group takes effect October 1, 2011.

House Amendment "A" To Committee Amendment "A" (H-661)

This amendment lowers the threshold of capital expenditures for which a new health care facility other than a nursing facility must obtain a certificate of need from $10,000,000 to $3,000,000. This amendment reinforces the authority of the Department of Health and Human Services to approve the conversion of nursing facility beds to residential care beds and the delicensing, selling and transferring of nursing facility beds. It requires the department to determine that any increase in residential care costs for the MaineCare program are offset by reductions in nursing facility costs. It eliminates the costs for the committee amendment and the need for appropriations and allocations.

Enacted Law Summary

Public Law 2011, chapter 424 does the following.

Part A amends certificate of need laws by raising thresholds for review, providing for later threshold increases tied to the Consumer Price Index medical care services index and eliminating the certificate of need requirements for the purchase of replacement equipment. The law includes a threshold of $3,000,000 for capital expenditures for a new health service by a new or existing health care facility. The law exempts from the requirement of a certificate of need process certain capital expenditures by health care facilities that have been certified by the Efficiency Maine Trust as cost-effective and requires the trust to develop and implement a process for certification.

Part B amends the certificate of need laws by increasing the threshold for nursing facility projects, providing for later threshold increases tied to the Consumer Price Index, limiting MaineCare budget neutrality requirements and the MaineCare nursing facility funding pool to apply solely to projects that propose to add additional nursing facility beds to the total inventory of beds within the State, making other changes to certificate of need laws and clarifying that projects need to comply with the principles of the Maine Quality Forum only when such standards are directly applicable to nursing facility projects. The law reinforces the authority of the Department of Health and Human Services to approve the conversion of nursing facility beds to residential care beds and the delicensing, selling and transferring of nursing facility beds. It requires the department to determine that any increase in residential care costs for the MaineCare program are offset by reductions in nursing facility costs.

Part C requires the Department of Health and Human Services to amend its rules on certificate of need by January 1, 2012 to permit applications to be filed at any time, rather than on a cycle, and to allow applicants to waive having a technical assistance meeting. It also requires the Department of Health and Human Services to convene a stakeholder group to review certificate of need laws and rules.

Part D shortens by half the time periods in the laws on the application and review processes for certificate of need.

Part E adds an appropriations and allocations section.

Part F adds an effective date of February 15, 2012 except that the provision requiring the Department of Health and Human Services to amend its rules to permit certificate of need applications to be filed at any time takes effect December 1, 2011 and the provision requiring the department to convene a stakeholder group takes effect October 1, 2011.

LD 376 **Resolve, To Complete the Timely and Appropriate Redesign of Shared Living Services for Adults with Intellectual Disabilities and Autism** **RESOLVE 30 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY	OTP-AM	H-81

This resolve requires the Department of Health and Human Services to complete the redesign of shared living and other home foster care services for adults with cognitive and intellectual disabilities and autism by April 15, 2011.

Committee Amendment "A" (H-81)

This amendment replaces the resolve. It requires the Department of Health and Human Services to continue to work on the redesign of its shared living program and to report on its progress to the Joint Standing Committee on Health and Human Services by September 1, 2011 and December 15, 2011.

Enacted Law Summary

Resolve 2011, chapter 30 requires the Department of Health and Human Services to continue to work on the redesign of its shared living program and to report on its progress to the Joint Standing Committee on Health and Human Services by September 1, 2011 and December 15, 2011.

Resolve 2011, chapter 30 was passed as an emergency measure effective May 9, 2011.

LD 388 **An Act To Allow a Personal Representative To Obtain a Copy of a Death Certificate and To Direct the Department of Health and Human Services To Amend Its Rules Governing Vital Records Fees** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
KNAPP SULLIVAN	ONTP	

This bill allows a personal representative to obtain a copy of the death certificate of the person who made the will designating that personal representative. It also directs the Department of Health and Human Services, Maine

Center for Disease Control and Prevention, Office of Data, Research and Vital Statistics to amend its rules governing vital records fees to provide that a researcher identification card is valid for 2 years from the date of issuance and to reduce the fee for registration of a researcher identification card to $25 for a person who is a dues-paying member of a genealogical society or organization.

LD 390 **Resolve, To Implement Certain Recommendations of the Governor's Task Force on Expanding Access to Oral Health Care for Maine People** **DIED ON ADJOURNMENT**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM	H-170

This resolve increases MaineCare dental reimbursement rates in accordance with the recommendation of the 2008 Report of the Governor's Task Force on Expanding Access to Oral Health Care for Maine People.

Committee Amendment "A" (H-170)

This amendment replaces the resolve. It increases MaineCare dental reimbursement rates for 20 preventive, diagnostic and restorative dental procedures to the 10th percentile. The amendment also adds an appropriations and allocations section to the resolve.

This resolve died on the appropriations table on adjournment.

LD 424 **An Act To Revise the Laws Governing the Licensure of Public Water System Operators** **PUBLIC 45**

Sponsor(s)	Committee Report	Amendments Adopted
GOODALL	OTP-AM	S-18

This bill adds distribution facilities to the list of public water systems that the Board of Licensure of Water System Operators shall classify. The bill authorizes the board to license persons to serve as operators of only public water systems in the State and allows the board to design or approve examinations. The bill requires a person who fails to renew that person's license within 2 years following the expiration of the license to take an examination as a condition of licensure. The bill increases the fee limit for the various water system operator fees from $60 to $95. The bill also has a separate fee for the examination and licensure of public water system operators.

Committee Amendment "A" (S-18)

This amendment adds an appropriations and allocations section to the bill.

Enacted Law Summary

Public Law 2011, chapter 45 adds distribution facilities to the list of public water systems that the Board of Licensure of Water System Operators shall classify. The law authorizes the board to license persons to serve as operators of only public water systems in the State and allows the board to design or approve examinations. The law requires a person who fails to renew that person's license within 2 years following the expiration of the license to take an examination as a condition of licensure. The law increases the fee limit for the various water system operator fees from $60 to $95. The law also has a separate fee for the examination and licensure of public water

system operators.

LD 428 **An Act To Fund Special Education Advocacy** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
BRANNIGAN	ONTP	

This bill provides an appropriation directly to the Disability Rights Center, the State's designated protection and advocacy agency for persons with disabilities pursuant to the Maine Revised Statutes, Title 5, chapter 511. These funds must be used to provide advocacy services for children with disabilities in education-related matters.

LD 435 **An Act To Improve the Rate of Organ and Tissue Donation by Establishing the Organ Donation Advisory Council** **PUBLIC 168 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
LANGLEY	OTP-AM	S-57

This bill repeals a volunteer advisory committee to provide information and advice regarding anatomical gifts and replaces it with an appointed advisory council to advise the State on improving the rate of organ and tissue donation.

Committee Amendment "A" (S-57)

The amendment moves the Organ Donation Advisory Council in Title 5 from general government boards to the section on boards and commissions that are advisory with minimal authority. It clarifies the appointing authority of the members of the council and removes the requirement for some members to be confirmed by the Joint Standing Committee on Health and Human Services and the Senate. It appoints 4 members of the council to a 2-year initial term to allow for staggered terms of membership. It adds an emergency preamble and clause to the bill.

Enacted Law Summary

Public Law 2011, chapter 168 repeals a volunteer advisory committee to provide information and advice regarding anatomical gifts and replaces it with the Organ Donation Advisory Council consisting of 10 members appointed for three year terms to advise the State on improving the rate of organ and tissue donation.

Public Law 2011, chapter 168 was enacted as an emergency measure effective May 30, 2011.

LD 443 **An Act To Require Prompt MaineCare Decisions on Care for Children with Life-threatening Conditions** **PUBLIC 35**

Sponsor(s)	Committee Report	Amendments Adopted
DILL C BRANNIGAN	OTP-AM	H-51

This bill requires the Department of Health and Human Services to make decisions approving or disapproving MaineCare care or services for children with life-threatening conditions within one working day of receiving the complete request or order.

Committee Amendment "A" (H-51)

This amendment clarifies that the request for MaineCare care or services must be an urgent request from the health care provider or providers.

Enacted Law Summary

Public Law 2011, chapter 35 requires the Department of Health and Human Services to make decisions approving or disapproving urgent requests for MaineCare care or services for children with life-threatening conditions within one working day of receiving the complete request or order.

LD 452 **An Act To Provide MaineCare Reimbursement for Pastoral Counselors** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CHAPMAN	ONTP	

This bill requires the Department of Health and Human Services to provide reimbursement under the MaineCare program for services provided by a licensed pastoral counselor beginning January 1, 2012.

LD 466 **An Act To Require Hospitals To Adopt Employee Illness and Injury Prevention Programs and To Provide Lift Teams and To Require Reduced Workers' Compensation Insurance Rates for those Hospitals** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CELLI	ONTP	

This bill requires hospitals to adopt illness and injury prevention programs that include training in lifting patients and in the use of lifting equipment and the use of at least one lift team on each shift beginning January 1, 2012. The bill protects employees from disciplinary action in certain circumstances. The bill provides for a reduction in workers' compensation insurance rates for a hospital that provides lift teams and lifting equipment beginning with policies issued or renewed on July 1, 2012.

LD 472 **An Act To Enhance the Security of Hospital Patients, Visitors and Employees** **PUBLIC 254**

Sponsor(s)	Committee Report	Amendments Adopted
CELLI	OTP-AM	H-360

This bill requires the adoption of safety and security plans to protect patients, visitors and employees in hospitals. The plan would require training for employees, a system for reporting, investigation of incidents of violence, a guarantee of the employee's right to seek assistance and treatment, immunity for good faith reporting of incidents and reporting to the Department of Public Safety and from that department to the Department of Health and Human Services. It requires the State Board of Corrections to adopt standards for safety and security plans in correctional facilities and county jails. It also requires annual reporting from the Department of Health and Human Services to the Legislature on reports of violence in hospitals.

Committee Amendment "A" (H-360)

This amendment replaces the bill. It requires a licensed hospital to adopt a safety and security plan on an annual basis and prohibits interference with a person making a report as provided in the plan. It applies the provision to critical access hospitals beginning July 1, 2012 and to all other hospitals beginning January 1, 2012.

Enacted Law Summary

Public Law 2011, chapter 254 requires a licensed hospital to adopt a safety and security plan on an annual basis and prohibits interference with a person making a report as provided in the plan. It applies the provision to critical access hospitals beginning July 1, 2012 and to all other hospitals beginning January 1, 2012.

LD 475 **An Act Regarding Private Health Insurance Purchased by the State for Recipients of MaineCare** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
MCKANE THIBODEAU	ONTP	

This bill prohibits the Department of Health and Human Services from requiring an individual to complete a health assessment or considering an individual's health status as a condition of eligibility for the Private Health Insurance Premium Program. The bill also provides that the prohibition does not affect an individual or family enrolled in private health insurance pursuant to the program prior to the provision's effective date.

LD 492 **An Act To Ensure That Children's Products Are Free of Cadmium** **INDEF PP**

Sponsor(s)	Committee Report	Amendments Adopted
HINCK BLISS	REF ENR	

This bill prohibits the manufacture, sale and distribution in commerce of children's products containing cadmium at more than .004% by weight beginning July 1, 2013. In addition, the bill limits the substances that may be used as alternatives to cadmium in children's products. The bill directs the Department of Health and Human Services and the Maine Center for Disease Control and Prevention to enforce the cadmium limitation within available resources and provides penalties for violations. The Health and Human Services Committee voted to refer this bill to the Environment and Natural Resources Committee. The bill was indefinitely postponed prior to referral.

LD 499 **An Act To Protect Persons in Residential Care Who Are under Limited Guardianship** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CURTIS WHITTEMORE	ONTP	

This bill requires licensed residential care facilities that have as residents persons under limited guardianship under the Maine Revised Statutes, Title 18-A, section 5-105 to certify as a condition of licensure or renewal a knowledge and understanding of limited guardianship.

LD 509 **An Act To Establish Emergency Shelter Family Homes To Host Youth Referred by the Department of Corrections** **PUBLIC 385**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP-AM	S-255

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

This bill proposes to establish a category of licensing for host homes to provide short-term emergency shelter and care for youth who are 14 to 18 years of age and who cannot live at home because of family conflict or other concerns.

Committee Amendment "A" (S-255)

The bill is a concept draft. This amendment replaces the bill, changes the title and authorizes a licensed emergency shelter to operate an emergency shelter family home for youths in order to provide them with voluntary, safe, emergency housing with trained families or individuals in locations as close as reasonably possible to the home communities of the youths if the shelter has a contract with the Department of Corrections, the Department of Corrections refers the youths and the parents or legal guardians of the youths are in agreement.

Enacted Law Summary

Public Law 2011, chapter 385 authorizes a licensed emergency shelter to operate an emergency shelter family home for youths in order to provide them with voluntary, safe, emergency housing with trained families or individuals in locations as close as reasonably possible to the home communities of the youths if the shelter has a contract with the Department of Corrections, the Department of Corrections refers the youths and the parents or legal guardians of the youths are in agreement.

LD 531 **An Act To Specify Qualifications for the Director of the Office of Adult Mental Health Services within the Department of Health and Human Services** **VETO SUSTAINED**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN CRAVEN	OTP MAJ ONTP MIN	

This bill specifies that when the director of the Office of Adult Mental Health Services within the Department of Health and Human Services is not a psychiatrist licensed pursuant to the Maine Revised Statues, Title 32, chapter 56, subchapter 2, the Commissioner of Health and Human Services shall appoint a psychiatrist licensed pursuant to Title 32, chapter 56, subchapter 2 as a chief for clinical services.

LD 539 **An Act To Build Accountability into the General Assistance Laws** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS HASTINGS	ONTP	

This bill makes both initial and repeat applicants for general assistance who voluntarily abandon government or private resources without just cause ineligible to receive general assistance to replace the abandoned assistance for a period of 120 days from the date the applicant abandons the resource. The bill also makes an applicant who forfeits government or private resources due to fraud, misrepresentation or intentional violation or refusal to comply with program rules without just cause ineligible to receive general assistance to replace the forfeited assistance for the duration of the forfeiture or 120 days, whichever is greater. Current law provides that an applicant who forfeits government resources is ineligible to receive general assistance for the duration of the forfeiture.

LD 547 **Resolve, Directing the Maine Center for Disease Control and Prevention To Conduct a Review of Wood Smoke Laws** **VETO SUSTAINED**

Sponsor(s)	Committee Report	Amendments Adopted
BERRY	OTP-AM	H-407 S-296 CRAVEN

This resolve directs the Department of Health and Human Services, Maine Center for Disease Control and Prevention to examine the current public health nuisance laws and enforcement procedures to determine if they are sufficient to protect the public. The department is directed to convene a stakeholder group to identify problems with current public health nuisance laws and the enforcement of those laws and make recommendations for improvement to the Joint Standing Committee on Health and Human Services by November 30, 2011.

Committee Amendment "A" (H-407)

This amendment narrows the scope of the stakeholder group from public health nuisance laws to laws relating to wood smoke. It requires the Statewide Coordinating Council for Public Health, supported by the Department of Health and Human Services, Maine Center for Disease Control and Prevention, to assemble a stakeholder group to examine the current laws relating to the control of wood smoke and enforcement procedures to determine if they are sufficient to protect the public. The stakeholder group shall include the Department of Environmental Protection and the Maine Center for Disease Control and Prevention, public health organizations, environmental health experts, municipal officials and affected members of the public. The stakeholder group shall report to the Joint Standing Committee on Health and Human Services by January 1, 2012.

Senate Amendment "A" (S-296)

This amendment removes the emergency preamble and emergency clause.

LD 560 **Resolve, To Increase the Effectiveness of Accessibility Requirements for Persons with Disabilities** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
SAVIELLO	ONTP	

This resolve requires the Department of Health and Human Services and the Department of Administrative and Financial Services to convene a working group to study increasing the effectiveness of accessibility requirements for persons with disabilities for public buildings, public accommodations, restaurants and eating establishments, colleges and hospitals. The departments are required to provide staffing assistance to the working group and to report to the Legislature with recommendations for suggested legislation by November 1, 2011.

LD 572 **An Act To Amend the Laws Governing the Maine Health Data Organization Relating to Retail Pharmacies** **PUBLIC 233**

Sponsor(s)	Committee Report	Amendments Adopted
SNOWE-MELLO	ONTP MAJ OTP-AM MIN	S-138

This bill removes retail pharmacies from the list of entities funding and reporting to the Maine Health Data Organization.

Committee Amendment "A" (S-138)

This amendment, which is the minority report of the committee, incorporates a fiscal note.

Enacted Law Summary

Public Law 2011, chapter 233 removes retail pharmacies from the list of entities funding and reporting to the Maine Health Data Organization.

LD 581 **An Act To Repeal the Laws Governing the Capital Investment Fund** **PUBLIC 213**

Sponsor(s)	Committee Report	Amendments Adopted
MCCORMICK	OTP	H-295 RICHARDSON D

This bill repeals the laws governing the capital investment fund, which is a limit for resources allocated annually under the certificate of need program under the Maine Revised Statutes, Title 22, chapter 103-A.

House Amendment "A" (H-295)

This amendment was presented on behalf of the Committee on Bills in the Second Reading. Public Law 2011, chapter 90 repealed the sections of law that deal with state health planning, and this bill amends the same sections of law. The amendment is necessary to prevent a conflict.

Enacted Law Summary

Public Law 2011, chapter 213 repeals the laws governing the capital investment fund, which is a limit for resources allocated annually under the certificate of need program under the Maine Revised Statutes, Title 22, chapter 103-A.

LD 582 **An Act To Amend the Maine Certificate of Need Act of 2002** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
MCCORMICK	ONTP	

The bill amends the Maine Certificate of Need Act of 2002 as follows:

1. It raises the threshold for the review of purchases of major medical equipment to $3,200,000;

2. It raises the threshold for review of a health care facility's utilization of new health services to $300,000 and the 3rd-year costs associated with it to $1,000,000, and raises the threshold for the utilization of new health services in private practice to $3,200,000;

3. It strikes the certificate of need review threshold related to the purchase of replacement equipment;

4. It raises the threshold for the review of capital expenditures to $6,200,000;

5. It adds an inflation adjustment factor for threshold amounts for review; and

6. It establishes a stakeholder group to review the Department of Health and Human Services' rules implementing the Maine Certificate of Need Act of 2002.

LD 586 **An Act To Include the Record of Emergency Data Form as an Acceptable Instrument for the Disposition of Remains of a Service Member** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
FOSSEL	ONTP	

This bill clarifies that a United States Department of Defense record of emergency data form, which is currently identified as "DD Form 93," is an acceptable document to use to determine who has custody and control of the remains of a service member.

LD 589 **An Act To Increase the Legal Age To Purchase, Use or Sell Tobacco Products** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
FOSSEL	ONTP MAJ OTP-AM MIN	

This bill raises the legal age to purchase, use or sell tobacco products from 18 years of age to 21 years of age.

Committee Amendment "A" (H-614)

This amendment, which is the minority report of the committee, replaces the bill and raises the legal age to purchase or use tobacco products from 18 years of age to 19 years of age and allows a person 18 to 20 years of age to sell tobacco products at retail if supervised by an employee who is at least 21 years of age.

LD 596 **An Act To Allow Medical Records To Contain an Option Regarding HIV Status Disclosure** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
WHITTEMORE	ONTP MAJ OTP-AM MIN	

This bill allows the use of a general release form or check box on a form for a patient to authorize the release of HIV infection status information.

Committee Amendment "A" (S-65)

This amendment, which is the minority report of the committee, requires that the check box on a general release form to authorize the release of HIV infection status information be separately signed or initialed.

LD 605 **An Act To Require Random Drug Testing for MaineCare Recipients** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
SAVIELLO	ONTP	

This bill provides that a person who tests positive for use of illegal drugs may not receive benefits under the Medicaid program until the person tests negative.

LD 612 **An Act To Provide Reimbursement for Medication Therapy Management Services** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
RECTOR		

This bill creates a category of pharmacy services, designated as medication therapy management services, for which pharmacists may charge separately from a charge for the prescription drug or a dispensing fee. The bill defines "medication therapy management services," "qualified pharmacist" and "targeted patient." The bill authorizes the MaineCare program to reimburse for these services if they are found by the Commissioner of Health and Human Services to be cost-effective. The bill requires health insurance carriers to pay for medication therapy management services to targeted patients by qualified pharmacists if the carrier provides coverage for prescription drugs. This bill requires an evaluation by the Commissioner of Health and Human Services of the effect of medication therapy management services by January 1, 2017 and establishes the Medication Therapy Management Advisory Committee to advise the Superintendent of Insurance within the Department of Professional and Financial Regulation on implementation of medication therapy management services.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 631 **An Act To Update the Radon Registration Act** **PUBLIC 144**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN BRANNIGAN	OTP-AM MAJ ONTP MIN	H-143

The bill amends the Radon Registration Act by updating the lead agency name, clarifying who the act applies to, making new construction comply with the Maine Uniform Building and Energy Code and requiring the Department of Health and Human Services to set fees by rule.

Committee Amendment "A" (H-143)

This amendment, which is the majority report, deletes from the bill the language that requires the Department of Health and Human Services to set by rule the fees to defray the costs of the registration programs established under the Maine Revised Statutes, Title 22, sections 774 and 775.

Enacted Law Summary

Public Law 2011, chapter 144 amends the Radon Registration Act by updating the lead agency name, clarifying who the act applies to and making new construction comply with the Maine Uniform Building and Energy Code.

LD 636 **An Act To Ensure Proper Health Information Management** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
CROCKETT	ONTP MAJ OTP MIN	

This bill requires a hospital, beginning January 1, 2012, to employ a certified director of health information management.

LD 646 **An Act To Ensure the Safety of Children in the MaineCare Program Who Are Prescribed Antipsychotic Medications** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
WELSH CRAVEN		

This bill provides specific requirements for the provision of antipsychotic medications to children in the MaineCare program. It provides for uses approved and for uses not approved by the United States Department of Health and Human Services, Food and Drug Administration. It provides for documentation in the child's health care record and for monitoring for effectiveness and side effects. It directs the Department of Health and Human Services to adopt routine technical rules to implement the new requirements.

Committee Amendment "A" (H-408)

This amendment replaces the bill with a resolve establishing a committee to consider the current case management and coordination of care for children who are prescribed antipsychotic medications and to make recommendations for improvement in the care of such children. The Department of Health and Human Services is required to report the committee's findings and recommendations to the Joint Standing Committee on Health and Human Services not later than January 15, 2012.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 654 **An Act To Amend the Occupational Disease Reporting Laws** **PUBLIC 337**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN BRANNIGAN	OTP	

This bill amends the laws governing occupational disease reporting to clarify who must report occupational diseases to the Department of Health and Human Services to be consistent with the mandated reporters designated in the rules for notifiable diseases and conditions adopted under the Maine Revised Statutes, Title 22, section 802. The bill also revises the confidentiality provision to allow the identification of the site of employment where an occupational disease has occurred to the Department of Labor, Bureau of Labor Standards.

Enacted Law Summary

Public Law 2011, chapter 337 amends the laws governing occupational disease reporting to clarify who must report occupational diseases to the Department of Health and Human Services to be consistent with the mandated reporters designated in the rules for notifiable diseases and conditions adopted under the Maine Revised Statutes, Title 22, section 802. It also revises the confidentiality provision to allow the identification of the site of employment where an occupational disease has occurred to the Department of Labor, Bureau of Labor Standards.

LD 674 **An Act To Authorize the Department of Health and Human Services To Administratively Suspend or Revoke Facility Licenses** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
EVES	ONTP	

This bill authorizes the Department of Health and Human Services to administratively suspend or revoke a license, after notice and opportunity for a hearing is given to a licensee, when the licensee fails to comply with applicable licensing laws and rules. This bill does not apply to emergency suspensions and revocations of a license for which the department seeks a court order. The bill retains the statutory alternative that allows the department, at its discretion, to initiate court action to suspend or revoke a license when a licensee fails to comply with applicable licensing laws and rules. The bill applies to licenses for residential care facilities, assisted housing programs, drug treatment and mental health centers, children's residential treatment, child placing agencies, child care facilities, family child care, nursery schools, adult day care programs, residential mental health and substance abuse treatment facilities and children's homes, which includes family and specialized foster homes and shelters.

LD 678 **Resolve, To Improve Health Outcomes for MaineCare Members in Managed Care** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HINCK CRAVEN	ONTP	

This resolve directs the Department of Health and Human Services to provide financial incentives to managed care organizations and persons who contract to deliver managed care to MaineCare members for reducing avoidable use of hospital emergency department services.

LD 683 **An Act To Enhance Long-term Care Services for Maine Citizens** **PUBLIC 422**

Sponsor(s)	Committee Report	Amendments Adopted
PETERSON MCCORMICK	OTP-AM	H-502

This bill reorganizes the provision of long-term care services for Maine citizens. It consolidates long-term care services and provides a framework for consolidated in-home and community support services and nursing facility services with combined funding and integrated service delivery. It requires the Department of Health and Human Services to administer long-term care accounts as one account with one budget. By November 1, 2012, the Department of Health and Human Services is required to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding the progress in implementing consolidation of long-term care services. The bill requires a report by January 1, 2012 from the Department of Health and Human Services to the same joint standing committee regarding the inclusion of services for persons with mental health needs and intellectual disabilities needs in the consolidation of long-term care services in fiscal years 2013-14 and 2014-15.

Committee Amendment "A" (H-502)

This amendment changes the implementation date of the consolidation of state-funded long-term care services in the bill from January 1, 2012 to July 1, 2012. It requires an interim report on progress by January 5, 2012 as well as by November 1, 2012, which is in the bill. Instead of requiring a report by January 1, 2012 on the inclusion of services for persons with mental health needs and intellectual disabilities needs, it requires a report by January 5, 2012 on the feasibility of the inclusion of those services.

Enacted Law Summary

Public Law 2011, chapter 422 reorganizes the provision of long-term care services for Maine citizens. It consolidates long-term care services and provides a framework for consolidated in-home and community support services and nursing facility services with combined funding and integrated service delivery beginning July 1, 2012. It requires the Department of Health and Human Services to administer long-term care accounts as one account with one budget. The law requires the Department of Health and Human Services to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding the progress in implementing consolidation of long-term care services, with a progress report by January 5, 2012 and a final report by November 1, 2012. The bill requires a report by January 1, 2012 from the Department of Health and Human Services to the same joint standing committee regarding the feasibility of inclusion of services for persons with mental health needs and intellectual disabilities needs in the consolidation of long-term care services in fiscal years 2013-14 and 2014-15.

LD 694 **An Act To Encourage Transparency in Disclosing the Ingredients in Vaccinations for Children to Parents and Guardians** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
BOLAND PLOWMAN	ONTP MAJ OTP MIN	

This bill requires a health care provider or clinic staff person to, prior to immunizing a person under 18 years of age, disclose the ingredients of the immunizing agent or agents to the parent or guardian of the child. It also requires the health care provider or clinic staff person to notify the parent or guardian of the option of refusing immunization of the child based on religious or philosophical beliefs.

LD 702 **An Act To Prevent HIV Transmission from a Pregnant Mother to a Child** **PUBLIC 229**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM MAJ ONTP MIN	H-283

This bill provides for mandatory testing for HIV status as part of a standard set of medical tests for a pregnant woman or a woman being tested for pregnancy. The bill allows a woman to refuse an HIV test and requires documentation in the woman's medical record if she refuses an HIV test. The bill requires HIV testing of certain newborn infants.

Committee Amendment "A" (H-283)

This amendment removes the requirement in the bill for a health care provider to provide an HIV test when testing a woman for pregnancy. It adds an exemption for a parent to object to an HIV test on a newborn infant on religious grounds. It changes the requirement in the bill for a newborn infant to be tested within 48 hours after birth to the requirement that the test results on a newborn be made available within 12 hours after birth.

Enacted Law Summary

Public Law 2011, chapter 229 provides for mandatory testing for HIV status as part of a standard set of medical tests for a pregnant woman. The bill allows a woman to refuse an HIV test and requires documentation in the woman's medical record if she refuses an HIV test. The bill requires HIV testing of certain newborn infants except that a parent may object to an HIV test on religious grounds.

LD 703 **An Act To Amend the Laws Governing Licensure Compliance Methods for Camping Areas, Recreational Camps, Youth Camps and Eating Establishments** **PUBLIC 375**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM	H-539

This bill changes the number of inspections covered by the license fee for an application for or the renewal of a license to operate an eating establishment, eating and lodging place, lodging place, recreational camp, youth camp or camping area from two to one. After the initial inspection and one follow-up inspection, there is a charge for each additional inspection to determine an applicant's eligibility for licensure. In addition, the bill permits the Department of Health and Human Services to determine licensure compliance by inspection or other method as determined by the department.

Committee Amendment "A" (H-539)

This amendment requires the inspection of a licensed establishment at least once every two years instead of at least once a year as proposed in the bill.

Enacted Law Summary

Public Law 2011, chapter 375 changes the number of inspections covered by the license fee for an application for, or the renewal of, a license to operate an eating establishment, eating and lodging place, lodging place, recreational camp, youth camp or camping area from two to one. After the initial inspection and one follow-up inspection, there is a charge for each additional inspection to determine an applicant's eligibility for licensure. In addition, the bill permits the Department of Health and Human Services to determine licensure compliance by inspection or other method as determined by the department.

LD 719 **An Act To Make Certain Prescription Drug Disclosure Laws Consistent with Federal Law** **PUBLIC 461**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS	OTP-AM MAJ	H-647
MCCORMICK	OTP-AM MIN	

This bill strikes the laws related to the reporting of marketing costs, price reporting and the disclosure of clinical trials by manufacturers and labelers of prescription drugs.

Committee Amendment "A" (H-647)

This amendment is the majority report of the committee. It provides funding for the academic detailing program. The amendment also adds an appropriations and allocations section.

Enacted Law Summary

Public Law 2011, chapter 461 strikes the laws related to the reporting of marketing costs, price reporting and the disclosure of clinical trials by manufacturers and labelers of prescription drugs.

LD 724 **Resolve, To Create an Evidence-based Study and Comprehensive Plan for HIV and AIDS Services in Maine** **RESOLVE 55**

Sponsor(s)	Committee Report	Amendments Adopted
BARTLETT	OTP-AM	S-98

This resolve directs the Maine HIV Advisory Committee to conduct a study and develop a comprehensive plan for HIV and AIDS prevention and care services in Maine. The committee is to report its findings and recommendations to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 15, 2013.

Committee Amendment "A" (S-98)

This amendment adds to the resolve by requiring non-General Fund funding for the Maine HIV Advisory Committee to conduct an evidence-based study and develop a comprehensive plan for HIV and AIDS prevention and care services in the State.

Enacted Law Summary

Resolve 2011, chapter 55 directs the Maine HIV Advisory Committee to conduct a study and develop a comprehensive plan for HIV and AIDS prevention and care services in Maine. The committee must seek funding for

the study and may not be funded by General Fund money. The committee is to report its findings and recommendations to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 15, 2013.

LD 735 **An Act To Allow the Use of Electronic Benefits Transfer Funds at Farmers' Markets** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
ALFOND	ONTP MAJ OTP-AM MIN	

This bill allows a recipient of food supplement benefits to use electronic benefits transfer funds to purchase food at a farmers' market.

Committee Amendment "A" (S-204)

This amendment, which is the minority report of the committee, replaces the bill. It requires the Department of Agriculture, Food and Rural Resources and the Department of Health and Human Services to work with the Maine Federation of Farmers' Markets to issue letters of support for developing a public-private partnership working toward universal access of farmers' markets to machines required to process federal Supplemental Nutrition Assistance Program electronic benefit transfer funds. It requires the partnership to solicit private funds to provide farmers' markets with wireless electronic benefit transfer card readers. The partnership will also work with banks and machine vendors to eliminate, reduce or reimburse all costs and fees associated with processing the cards.

LD 739 **Resolve, To Amend the Rules Concerning Long-term Care Services To Better Support Family Caregivers** **RESOLVE 95**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	ONTP MAJ OTP-AM MIN	H-518 STRANG BURGESS S-205

This resolve requires the Department of Health and Human Services to amend its rules on eligibility for long-term care services provided under the MaineCare program or state-funded programs to remove provisions and presumptions that disqualify some persons from eligibility for long-term care. Amendments to the rules will enable more people to qualify for long-term care services by removing the requirements of written agreements and by removing the presumptions regarding the purpose of paying for services and certain transfers. The resolve directs the department to adopt routine technical rules to incorporate the amendments by October 15, 2011 and to notify the Joint Standing Committee on Health and Human Services.

Committee Amendment "A" (S-205)

This amendment, which is the minority report, adds an appropriations and allocations section.

House Amendment "A" To Committee Amendment "A" (H-518)

This amendment replaces the resolve. This amendment requires the Department of Health and Human Services to work with interested parties to create a standard-form written contract that may be used by an individual in need of long-term care services and supports to hire and pay a relative to provide that care. The amendment also clarifies

that other forms may be used to accomplish the same purpose. It also requires the posting of this agreement on the publicly accessible website of the Department of Health and Human Services and requires the department to adopt routine technical rules relating to the standard-form written contract. Finally, the creation of the standard-form written contract and its posting on the department's website must be accomplished within the limits of existing resources.

Enacted Law Summary

Resolve 2011, chapter 95 requires the Department of Health and Human Services to work with interested parties to create a standard-form written contract that may be used by an individual in need of long-term care services and supports to hire and pay a relative to provide that care. The resolve also clarifies that other forms may be used to accomplish the same purpose. It requires the posting of this agreement on the publicly accessible website of the Department of Health and Human Services and requires the department to adopt routine technical rules relating to the standard-form written contract. Finally, the creation of the standard-form written contract and its posting on the department's website must be accomplished within the limits of existing resources.

LD 743 **Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual Chapter III, Section 21: Allowances for Home and Community Benefits for Members with Intellectual Disabilities or Autistic Disorder, a Major Substantive Rule of the Department of Health and Human Services** **RESOLVE 78 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
	OTP	

This resolve provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual Chapter III, Section 21: Allowances for Home and Community Benefits for Members with Intellectual Disabilities or Autistic Disorder, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2011, chapter 78 provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual Chapter III, Section 21: Allowances for Home and Community Benefits for Members with Intellectual Disabilities or Autistic Disorder, a major substantive rule of the Department of Health and Human Services.

Resolve 2011, chapter 78 was passed as an emergency measure effective June 14, 2011.

LD 747 **An Act To Require Hospital Credit Reporting That Is Fair to Consumers** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS BRANNIGAN	ONTP	

This bill requires a hospital that reports a delinquent consumer account to a consumer reporting agency to report any extended repayment agreement and the experience of the hospital in collecting under the agreement.

LD 757 **An Act To Add a Member to the Advisory Council on Health Systems Development** **INDEF PP**

Sponsor(s)	Committee Report	Amendments Adopted
BOLAND PATRICK	OTP-AM MAJ ONTP MIN	

This bill adds an individual with expertise in the discipline of food science to the membership of the Advisory Council on Health Systems Development.

Committee Amendment "A" (H-140)

This amendment adds to the Advisory Council on Health Systems Development a member with expertise in health care delivery through federally qualified health centers.

LD 759 **An Act To Increase Efficiency and Effectiveness in the Licensing of Certain Health and Human Services Providers** **PUBLIC 145**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM	H-171

This bill requires the Department of Health and Human Services to approve and license substance abuse treatment, child and adult welfare and behavioral health agencies, programs and facilities that receive and maintain accreditation by nationally recognized accrediting bodies. The Department of Health and Human Services is required to include the agency, program or facility on any list of approved and licensed agencies, programs and facilities maintained by the department. Notwithstanding an agency's, program's or facility's maintenance of accreditation, the Department of Health and Human Services may revoke the certificate of approval and remove a substance abuse treatment program or facility from the department's list of approved programs and facilities for failure to provide data, statistics, schedules or other information reasonably required by the department or revoke or modify any agency's, program's or facility's license for findings resulting from the investigation of an incident.

Committee Amendment "A" (H-171)

This amendment replaces the bill, which required the Department of Health and Human Services to approve and license substance abuse treatment, child and adult welfare and behavioral health agencies, programs and facilities accredited by nationally recognized accrediting bodies. The amendment simplifies the process and requires the Department of Health and Human Services to deem in compliance with state licensing rules those entities that receive and maintain accreditation by national accrediting bodies approved by the department. The department may review compliance with applicable accreditation requirements in response to a complaint.

Enacted Law Summary

Public Law 2011, chapter 145 simplifies the process of approving and licensing substance abuse treatment, child and adult welfare and behavioral health agencies by requiring the Department of Health and Human Services to deem in compliance with state licensing rules those entities that receive and maintain accreditation by national accrediting bodies approved by the department. The department may review compliance with applicable accreditation requirements in response to a complaint.

LD 774 **An Act To Allow Access to Pseudoephedrine by Prescription Only** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
WILLETTE A	ONTP	

This bill requires a prescription to possess any amount of pseudoephedrine.

LD 790 **Resolve, To Foster Energy Efficiency Improvements and Other Needed Renovations at Residential Care Facilities Funded by MaineCare** **RESOLVE 106 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
ROSEN R	OTP-AM	H-371 FITTS S-127

This resolve requires the Department of Health and Human Services to amend its rules regarding residential care facilities funded by MaineCare to provide that fixed or capital cost reimbursement for new construction, acquisitions, equipment, renovations or other improvements when the aggregate capital expenditure does not exceed $350,000 in one fiscal year does not require prior approval. Capital expenditures for energy efficiency improvements, for replacement equipment, for information systems, for communications systems and for parking lots and garages must be excluded from the cost of the project in determining whether it is subject to review and prior approval. When capital costs subject to review exceed $350,000 in one fiscal year, facilities must submit plans, financial proposals and projected operating costs to the department for approval in order for costs to be reimbursed.

Committee Amendment "A" (S-127)

This amendment incorporates a fiscal note.

House Amendment "A" (H-371)

This amendment requires that rules adopted by the Department of Health and Human Services must provide that, in order for a cost reimbursement for an energy efficiency improvement to be provided, the energy efficiency improvement must be identified as cost-effective in an energy audit or be determined to be cost-effective by the Efficiency Maine Trust.

Enacted Law Summary

Resolve 2011, chapter 106 requires the Department of Health and Human Services to amend its rules regarding residential care facilities funded by MaineCare to provide that fixed or capital cost reimbursement for new construction, acquisitions, equipment, renovations or other improvements when the aggregate capital expenditure does not exceed $350,000 in one fiscal year does not require prior approval. Capital expenditures for energy efficiency improvements, for replacement equipment, for information systems, for communications systems and for parking lots and garages must be excluded from the cost of the project in determining whether it is subject to review and prior approval. When capital costs subject to review exceed $350,000 in one fiscal year, facilities must submit plans, financial proposals and projected operating costs to the department for approval in order for costs to be

reimbursed. The resolve requires rules to be adopted that limit cost reimbursement for an energy efficiency improvement to those that have been determined to be cost-effective in an energy audit or be determined to be cost-effective by the Efficiency Maine Trust.

Resolve 2011, chapter 106 was passed as an emergency measure effective July 8, 2011.

LD 806 **An Act To Provide Public Access to Price Lists of Hospitals and Ambulatory Surgical Facilities** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
BERRY LANGLEY		

This bill requires a licensed hospital to post in the hospital in an area used by the public a list of prices charged by the hospital for the 100 most commonly performed procedures in the hospital. The hospital shall also post a link or page on its publicly accessible website stating its pricing policy and current prices for the 100 most commonly performed procedures in the hospital. The bill requires ambulatory surgical facilities to post similar price lists. The bill requires review and a report on hospital efforts to control costs from the Office of Program Evaluation and Government Accountability.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 825 **An Act To Amend the Maine Certificate of Need Act of 2002 for Nursing Facility Projects To Provide Alternative Means To Satisfy MaineCare Neutrality** **INDEF PP**

Sponsor(s)	Committee Report	Amendments Adopted
MARTIN J	ONTP MAJ OTP-AM MIN	

This bill amends the Maine Certificate of Need Act of 2002 governing the conversion of nursing facility beds to residential care beds to permit such conversions as long as the terms of the conversion are approved by the Department of Health and Human Services under applicable provisions permitting transfers that are MaineCare-neutral in their overall impact.

The bill also amends provisions governing the nursing facility MaineCare funding pool to create certain exceptions to the constraints of the pool. A provision is enacted to permit the transfers of beds and other nursing facility resources to residential care facilities and to exclude such beds and resources from the pool if prior approval is obtained from the department.

The bill also changes the provisions governing nursing facility projects in several respects:

1. To permit certificate of need approval of different types of nursing facility projects as long as MaineCare neutrality is demonstrated and to permit transfers of MaineCare resources between nursing facilities and residential care facilities to satisfy MaineCare neutrality requirements;

2. To permit the exchange of bed rights between nursing facilities and residential care facilities in order to permit nursing facilities to satisfy MaineCare neutrality requirements;

3. To permit nursing facilities to satisfy MaineCare neutrality requirements for projects that do not involve relocation of beds from one facility to another or a new facility when the entity proposing the changes is able to satisfy MaineCare neutrality requirements by delicensing beds under common ownership or acquiring beds from other facilities including residential care facilities; and

4. To permit approval of nursing facility projects that propose transfers of ownership when any increases in MaineCare costs are offset by transfers of bed rights or the increase in MaineCare costs is limited to changes in fixed-cost reimbursement due to changes in approved financing or applicable depreciation schedules.

Committee Amendment "A" (H-646)

This amendment is the minority report of the Joint Standing Committee on Health and Human Services and adds an appropriations and allocations section.

See related provision in LD 360.

LD 828 **An Act To Amend the Maine Certificate of Need Act of 2002 for Nursing Facility Projects** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
MARTIN J	ONTP	

This bill amends the Certificate of Need Act of 2002 as it affects nursing facility projects in several respects.

1. It increases the review threshold for nursing facility projects from $1,000,000 to $2,500,000 and restores an inflation adjustment factor.

2. It repeals the nursing facility MaineCare funding pool.

3. It removes the so-called MaineCare budget neutrality requirement.

4. It makes nursing facility projects subject to all certificate of need approval criteria and requirements.

5. It retains provisions of existing law that permit expedited approval of certain nursing facility projects.

6. It requires the Department of Health and Human Services to complete the review process for a project application for a certificate of need in a timely fashion. When a decision has not been issued within 150 days after the department declares an application complete, the application is automatically approved.

See related provision in LD 360.

LD 831 **Resolve, To Protect the State from Accumulating Future Hospital Debt** **DIED ON ADJOURNMENT**

Sponsor(s)	Committee Report	Amendments Adopted
CUSHING COURTNEY	OTP-AM MAJ ONTP MIN	H-581

This bill requires the Department of Health and Human Services to use current hospital cost reports to calculate amounts owed to hospitals and pay any amounts due within one year of receiving the reports. This resolve died on adjournment on the appropriations table.

Committee Amendment "A" (H-581)

This amendment is the majority report of the committee. This amendment changes the bill to a resolve and requires the Department of Health and Human Services to use current hospital cost reports to calculate amounts owed to hospitals and to pay any amounts due within one year of receiving the reports. It also adds an appropriations and allocations section.

LD 859 **Resolve, To Convene a Task Force To Study Cost-effective Ways of Dealing with an Increased Population of Those Affected by Alzheimer's Disease** **RESOLVE 58**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP	

This resolve directs the Commissioner of Health and Human Services to convene a task force to review Alzheimer's disease-related issues in health care and to develop cost-effective ways of dealing with an estimated 50% increase in the number of patients with Alzheimer's disease in the next 15 years. The commissioner is required to report the findings of the task force along with any recommended legislation to the Joint Standing Committee on Health and Human Services.

Enacted Law Summary

Resolve 2011, chapter 58 directs the Commissioner of Health and Human Services to convene a task force to review Alzheimer's disease-related issues in health care and to develop cost-effective ways of dealing with an estimated 50% increase in the number of patients with Alzheimer's disease in the next 15 years. The commissioner is required to report the findings of the task force along with any recommended legislation to the Joint Standing Committee on Health and Human Services.

LD 869 **An Act To Clarify the State's Authority under Public Health Laws for Municipal Inspections of Establishments** **PUBLIC 295**

Sponsor(s)	Committee Report	Amendments Adopted
MCCORMICK	OTP-AM	S-166

This bill clarifies that the Department of Health and Human Services is the preeminent authority for inspection and licensing of establishments in order to ensure statewide uniformity of health standards. The bill clarifies the terms and conditions under which the department may authorize municipalities to conduct inspections of establishments within the municipality.

Committee Amendment "A" (S-166)

This amendment replaces the bill. It allows only municipalities that have been delegated authority by the Department of Health and Human Services to inspect establishments. A municipality that has not been delegated authority may not license or inspect establishments.

Enacted Law Summary

Public Law 2011, chapter 295 allows only municipalities that have been delegated authority by the Department of Health and Human Services to inspect establishments. A municipality that has not been delegated authority may not license or inspect establishments.

LD 873 **An Act To Promote the Establishment of an Adult Day Health Care Program for Veterans in Lewiston** **PUBLIC 444**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP-AM	S-128

This bill establishes a model for adult day health care programs to serve Maine's veterans and eligible family members. The model is based on United States Department of Veterans Affairs program requirements and criteria, which promote home health care and community-based outpatient care. This model is intended to reduce both short-term and long-term costs of such care by utilizing community-based outpatient care options and combining federal and state funding while providing a wider range of medical care services, oversight and assistance with daily living for Maine's veterans and eligible family members. The initial placement of a facility is intended to be in Lewiston, which is an underserved area that is accessible to a significant population of eligible participants and allows the facility to be collocated at existing outreach facilities for veterans.

Committee Amendment "A" (S-128)

This amendment incorporates a fiscal note.

Enacted Law Summary

Public Law 2011, chapter 444 establishes a model for adult day health care programs to serve Maine's veterans and eligible family members. The model is based on United States Department of Veterans Affairs program requirements and criteria, which promote home health care and community-based outpatient care. This model is intended to reduce both short-term and long-term costs of such care by utilizing community-based outpatient care

options and combining federal and state funding while providing a wider range of medical care services, oversight and assistance with daily living for Maine's veterans and eligible family members. The initial placement of a facility is intended to be in Lewiston, which is an underserved area that is accessible to a significant population of eligible participants and allows the facility to be collocated at existing outreach facilities for veterans.

LD 887 **An Act To Include Medicinal Marijuana Patients in the Controlled Substances Prescription Monitoring Program** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
HASKELL GERZOFSKY	ONTP MAJ OTP-AM MIN	

This bill requires the Department of Health and Human Services to include the names and related information of medicinal marijuana patients registered with the State in the Controlled Substances Prescription Monitoring Program operated by the Office of Substance Abuse. The information submitted is confidential as are the names of patients using controlled substances and prescribers of controlled substances.

Committee Amendment "A" (H-237)

This amendment is the minority report of the committee. It changes the word "medicinal" to "medical" in the title and in 2 places in the bill to make the language consistent with current law. The amendment also adds an appropriations and allocations section.

LD 897 **An Act To Amend the Application Process for the Progressive Treatment Program** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
HILL		

Current law limits who may obtain an order from the District Court to admit a patient to a progressive treatment program. This bill allows a health officer, law enforcement officer or any other person to obtain the order. The bill also requires that when an examiner forms an opinion it must be based on history as well as personal observation.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 918 **An Act To Reduce the Cost of Mental Health Services in Maine** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HASKELL GERZOFSKY	ONTP	

This bill updates existing language governing the provisions of community support services for people with serious and persistent mental illness, requires the Department of Health and Human Services to allocate federal child and adult mental health services block grant funds to peer and family supports and requires the department to seek these

funds as long as they are available and to document both the recommendations of the statewide quality improvement council for the expenditure of those funds and the allocation that is eventually made.

LD 920 **An Act To Ensure the Availability of Preventive Health Care Services for Children** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CLARK H	ONTP	

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

This bill proposes to allow every child in the State under 18 years of age to receive one annual medical checkup, free of charge, from the child's primary care physician. This checkup would include laboratory work for standard blood tests.

LD 933 **Resolve, Requiring the Department of Health and Human Services To Conduct a Review of Medicaid "Any Willing Provider" Requirements** **RESOLVE 61**

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY ALFOND	OTP-AM	H-284

This resolve requires the Department of Health and Human Services to conduct a review of "any willing provider" laws under the federal Medicaid program and report to the Joint Standing Committee on Health and Human Services the results of its review and recommendations for changes in the laws of this State and rules of the department to give the State more authority to regulate for positive health outcomes, quality of care, meeting geographic needs and controlling costs.

Committee Amendment "A" (H-284)

This amendment changes the report date in the resolve from December 1, 2011 to January 1, 2012.

Enacted Law Summary

Resolve 2011, chapter 61 requires the Department of Health and Human Services to conduct a review of "any willing provider" laws under the federal Medicaid program and report by January 1, 2012 to the Joint Standing Committee on Health and Human Services the results of its review and recommendations for changes in the laws of this State and rules of the department to give the State more authority to regulate for positive health outcomes, quality of care, meeting geographic needs and controlling costs.

LD 936 **An Act To Conform Maine Menu Labeling Laws to Federal Standards** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS MCCORMICK		

This bill repeals provisions of law regarding menu labeling that have been preempted by the federal Patient Protection and Affordable Care Act, Public Law 111-148, Section 4205(2010), which creates a uniform national approach to nutrition labeling for restaurant menus with a primary focus on calorie content. The bill retains the current statutory definition of "chain restaurant" and directs the Department of Health and Human Services to adopt major substantive rules to locally enforce the provisions of 21 United States Code, Section 343(2010).

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 941 **An Act To Prohibit Mandatory Immunizations** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
THOMAS	ONTP MAJ OTP-AM MIN	

This bill prohibits mandatory immunizations for persons.

Committee Amendment "A" (S-106)

This amendment, which is the minority report of the committee, removes from the bill the section that relates to emergency rescue and public safety workers undergoing immunization for certain diseases. The amendment also repeals the authority of the Governor to declare an extreme public health emergency.

LD 962 **An Act To Amend the Medicaid Income Requirements To Promote Agricultural Labor** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
TILTON GOODALL	ONTP	

This bill exempts income derived from seasonal agricultural or forest products employment from being counted as income for Medicaid eligibility purposes.

LD 967 **Resolve, To Study the Cost of Providing Behavioral Health Care and Substance Abuse Services** **RESOLVE 107**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN CRAVEN	OTP-AM	H-424 H-663 STRANG BURGESS

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

This bill proposes to provide community-based mental health and substance abuse providers in emergency rooms to triage both mental health and substance abuse patients, in order to refer such patients to more appropriate and less

expensive community-based treatment, and use the savings to increase access to peer support services.

Committee Amendment "A" (H-424)

This amendment replaces the bill, which is a concept draft. It requires the Department of Health and Human Services to review the use of hospital emergency departments by persons requiring only behavioral health and substance abuse services. The amendment requires the department to identify care that could be delivered in community-based settings, to review models for triage and diversion, to estimate potential cost savings and to report recommendations by March 1, 2012 to the Joint Standing Committee on Health and Human Services.

House Amendment "A" To Committee Amendment "A" (H-663)

This amendment changes the date by which the Department of Health and Human Services is required to report to the Joint Standing Committee on Health and Human Services from March 1, 2012 to June 1, 2012.

Enacted Law Summary

Resolve 2011, chapter 107 requires the Department of Health and Human Services to review the use of hospital emergency departments by persons requiring only behavioral health and substance abuse services. The resolve requires the department to identify care that could be delivered in community-based settings, to review models for triage and diversion, to estimate potential cost savings and to report recommendations by June 1, 2012 to the Joint Standing Committee on Health and Human Services.

LD 1001 **An Act To Assist Persons Who May Be Eligible for Social Security Disability Assistance** **DIED ON ADJOURNMENT**

Sponsor(s)	Committee Report	Amendments Adopted
EVES ROSEN R	OTP-AM MAJ ONTP MIN	H-619

This bill requires the Department of Health and Human Services to assist ASPIRE-TANF participants who have been determined to have a physical or mental health problem that may be severe enough to qualify for federal social security disability insurance benefits or federal supplemental security income benefits to apply for those benefits. The bill also establishes guidelines and criteria that the department is required to follow in assisting the participants.

Committee Amendment "A" (H-619)

The amendment adds an appropriations and allocations section.

This bill died on the appropriations table on adjournment.

LD 1023 **An Act To Authorize the Board of Licensure of Podiatric Medicine and the State Board of Veterinary Medicine To Establish a Podiatrist Health Program and a Veterinarian Health Program** **PUBLIC 190**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM	H-285

This bill authorizes the Department of Professional and Financial Regulation, Board of Licensure of Podiatric Medicine and State Board of Veterinary Medicine to establish health programs to allow them to participate in a medical professionals health program created to promote the identification, treatment and recovery of health professionals diagnosed with substance abuse disorders or other mental illness. The program currently has contracts with the Board of Licensure in Medicine, the Board of Osteopathic Licensure, the Board of Dental Examiners, the Maine Board of Pharmacy and the State Board of Nursing.

Committee Amendment "A" (H-285)

This amendment adds an appropriations and allocations section to the bill.

Enacted Law Summary

Public Law 2011, chapter 190 authorizes the Department of Professional and Financial Regulation, Board of Licensure of Podiatric Medicine and State Board of Veterinary Medicine to establish health programs to allow them to participate in a medical professionals health program created to promote the identification, treatment and recovery of health professionals diagnosed with substance abuse disorders or other mental illness. The program currently has contracts with the Board of Licensure in Medicine, the Board of Osteopathic Licensure, the Board of Dental Examiners, the Maine Board of Pharmacy and the State Board of Nursing.

LD 1029 **Resolve, To Reduce Health Care Costs through Interstate Collaboration** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY BRANNIGAN	ONTP	

This resolve directs the Department of Health and Human Services in consultation with health policy groups in the State to participate in regional interstate efforts to identify and implement systems and methodologies to reduce health care costs and improve the health care of the citizens of the participating states with the New England States Consortia Systems Organization and other cooperative regional efforts. The resolve also requires an interim report and a final report to the Joint Standing Committee on Health and Human Services.

LD 1039 **Resolve, To Create a Working Group To Make Recommendations To Improve the Efficiency, Accountability and Proper Administration of Municipal General Assistance Programs** **DIED ON ADJOURNMENT**

Sponsor(s)	Committee Report	Amendments Adopted
ROTUNDO ROSEN R	OTP-AM	H-540

This resolve directs the Commissioner of Health and Human Services to convene a working group to examine municipal general assistance programs. The commissioner is directed to report to the Second Regular Session of the 125th Legislature with its findings and suggested legislation. The working group is directed to examine the administration and efficiency of the programs, to study the administration of appropriate records and to determine the opportunity for electronic data exchange between municipalities and the Department of Health and Human Services to verify eligibility factors and to promote program integrity.

Committee Amendment "A" (H-540)

This amendment makes the following changes to the resolve, which creates a working group to study and to make recommendations regarding the administration of general assistance programs.

1. It adds the general assistance program manager in the Department of Health and Human Services to the working group, increasing the number of members of the group from 9 to 10.

2. It adds to the duties of the working group so that the group examines uniformity of general assistance administration, studies whether additional sources of income should be included in the calculation of general assistance, determines whether lump-sum payments should be calculated differently and studies whether the length of ineligibility following a work requirement violation, discharge for misconduct or refusal to use an available resource is appropriate.

3. It clarifies that the Director of the Office of Policy and Legal Analysis must be notified of meetings of the working group.

4. It clarifies that the report from the working group must be submitted to the Joint Standing Committee on Health and Human Services.

5. It adds an appropriations and allocations section.

This bill died on the appropriations table on adjournment.

LD 1062 **An Act To Ensure Access to Certain Health Care Services for Children** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CLARK H BRANNIGAN	ONTP	

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

This bill proposes to ensure access to health care for children by:

1. Allowing a child who does not have health care coverage to see a medical specialist free of charge; and

2. Allowing the child to continue to be seen and treated by that specialist, if the medical condition is one that can be treated by that specialist, for a small fee based only on income, such as actual wages earned by the child's parent or guardian or general assistance provided to the child or the child's parent or guardian. Unearned income, such as interest and dividends, savings, retirement plans, pensions, unemployment or workers' compensation benefits and the value of property owned by the child or the parent or guardian of the child, would not be includable for purposes of determining the fee to be paid to the specialist.

LD 1073 **Resolve, To Encourage the Use of Defibrillators in Health Clubs and Gyms** **RESOLVE 50**

Sponsor(s)	Committee Report	Amendments Adopted
CASAVANT SULLIVAN	OTP-AM	H-172

This bill provides that health clubs and gymnasiums and other places of exercise and health must have automated external defibrillators in place, and requires personnel of the health clubs and gymnasiums to be trained in the use of automated external defibrillators.

Committee Amendment "A" (H-172)

This amendment replaces the bill with a resolve that requires the Department of Public Safety to work with the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Maine Cardiovascular Health Program, the American Heart Association's Maine affiliate and emergency medical services around the State to determine where health clubs and gyms are located, whether automated external defibrillators are installed in those health clubs and gyms and whether staff have been trained in their use. The government discounted price for automated external defibrillators has been extended to health clubs and gyms in the State and the amendment provides that this information must be publicized to health clubs and gyms. The Department of Public Safety is required to report to the Joint Standing Committee on Health and Human Services by January 1, 2012 with a progress report.

Enacted Law Summary

Resolve 2011, chapter 50 requires the Department of Public Safety to work with the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Maine Cardiovascular Health Program, the American Heart Association's Maine affiliate and emergency medical services around the State to determine where health clubs and gyms are located, whether automated external defibrillators are installed in those health clubs and gyms and whether staff have been trained in their use. The government discounted price for automated external defibrillators has been extended to health clubs and gyms in the State and this law provides that this information must be publicized to health clubs and gyms. The Department of Public Safety is required to report to the Joint Standing Committee on Health and Human Services by January 1, 2012 with a progress report.

LD 1105 **Resolve, To Study Oral Health Care in Maine and Make Recommendations Regarding How To Address Maine's Oral Health Care Needs** **RESOLVE 92**

Sponsor(s)	Committee Report	Amendments Adopted
RECTOR	OTP-AM	S-238

This resolve directs the Legislature to contract with a qualified consultant that has sufficient resources and experience to conduct a study of the State's oral health care needs.

Committee Amendment "A" (S-238)

This amendment replaces the resolve and instead requires the Executive Director of the Legislative Council to request Medical Care Development, Inc. to perform a study of oral health care needs in the State. The amendment makes the study dependent on nonstate funding and requires a report to the Joint Standing Committee on Labor, Commerce, Research and Economic Development and the Joint Standing Committee on Health and Human Services by January 1, 2012. The amendment also requires Medical Care Development, Inc. to seek the advice of Legislators from the 2 joint standing committees and statewide associations of interested parties.

Enacted Law Summary

Resolve 2011, chapter 92 requires the Executive Director of the Legislative Council to request Medical Care Development, Inc. to perform a study of oral health care needs in the State. The resolve makes the study dependent on nonstate funding and requires a report to the Joint Standing Committee on Labor, Commerce, Research and Economic Development and the Joint Standing Committee on Health and Human Services by January 1, 2012. The

resolve requires Medical Care Development, Inc. to seek the advice of Legislators from the 2 joint standing committees and statewide associations of interested parties.

LD 1106 **An Act To Lower the Cost of Health Care through Improved Energy Efficiency** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HINCK BARTLETT	ONTP	

This bill exempts from the requirement of a certificate of need process any capital expenditure before January 1, 2017 that meets the certification standards of the Efficiency Maine Trust and is likely to produce energy cost savings through energy efficiency, renewable energy technology or smart grid technology.

See related provisions in LD 360.

LD 1114 **An Act To Improve Preventive Dental Health Care and Reduce Future Avoidable Costs** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN		

This bill directs the Department of Health and Human Services to establish criteria to determine those groups of adults for which the provision of preventive and restorative services would be cost effective by reducing expenditures under MaineCare, and authorizes the department to provide such services to persons within those identified groups.

Committee Amendment "A" (H-501)

This amendment replaces the bill. It retains the provisions of the bill that seek to provide cost-effective dental services for adult MaineCare members and adds a process for identifying those services and a requirement that the services be cost-effective.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 1115 **An Act To Clarify the Responsibilities of the Maine Developmental Services Oversight and Advisory Board** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS ALFOND		

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

This bill proposes to modify the Maine Revised Statutes to clarify the structure and responsibilities of the Maine Developmental Services Oversight and Advisory Board.

Committee Amendment "A" (H-520)

This amendment replaces the bill, which was a concept draft, with a resolve. The amendment requires the Department of Health and Human Services to convene a stakeholder group to review oversight and advisory functions, laws and funding regarding services for adults with intellectual disabilities or autism spectrum disorders and to report to the Joint Standing Committee on Health and Human Services by December 7, 2011.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 1116 **An Act To Restore Market-based Competition for Pharmacy Benefits Management Services** **PUBLIC 443**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS	OTP-AM MAJ	H-608
SULLIVAN	OTP-AM MIN	

The bill repeals the Maine Revised Statutes, Title 22, chapter 603, subchapter 4, which concerns prescription drug practices, and continues the registration of pharmacy benefits managers under Title 24-A with the Bureau of Insurance.

Committee Amendment "A" (H-608)

This amendment is the majority report of the committee. This amendment adds to the bill provisions that relate to the business relationship between a pharmacy and a pharmacy benefits manager. The provisions address the contract between the 2 entities, pharmacy benefits manager duties, complaints, grievances and appeals, denial or limitation of benefits, written notice and audits of the records of the pharmacy.

Enacted Law Summary

Public Law 2011, chapter 443 repeals the Maine Revised Statutes, Title 22, chapter 603, subchapter 4, which concerns prescription drug practices and continues the registration of pharmacy benefits managers under Title 24-A with the Bureau of Insurance. The law addresses the business relationship between a pharmacy and a pharmacy benefits manager, the duties of the pharmacy benefits manager, complaints, grievances and appeals, denial or limitation of benefits, written notice and audits of the records of the pharmacy.

LD 1119 **An Act To Amend the Laws Governing the Sale of Certain Tobacco Products** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS	ONTP MAJ	
SAVIELLO	OTP-AM MIN	

This bill prohibits the sale of flavored tobacco wrappers, including blunt wraps.

Committee Amendment "A" (H-310)

This amendment is the minority report of the committee. The amendment clarifies that "characterizing flavor" applies to flavors of cigars, tobacco wrappers and component parts. It removes from the definition of "flavored tobacco wrapper" in the bill reference to cigarette rolling papers and cigarette tubes and adds cones, rolling papers,

cigar papers and cigar wraps.

LD 1122 **An Act To Increase Dental Benefits and Oral Health Care** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HINCK CRAVEN	ONTP	

This bill provides expanded dental benefits for adults in the MaineCare program and also directs the Department of Health and Human Services, Maine Center for Disease Control and Prevention to convene a broadly representative working group to review the feasibility of implementing certain provisions of the Governor's Task Force on Expanding Access to Oral Health Care for Maine People and to report with suggested legislation to the Joint Standing Committee on Health and Human Services by November 1, 2011.

LD 1131 **An Act To Require Public Disclosure of Health Care Prices** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
WOODBURY	ONTP	

This bill requires a health care practitioner to maintain a price list of the health care practitioner's most common services and procedures and to provide the list to a consumer upon request effective January 1, 2012.

LD 1159 **An Act To Amend the Identification Requirements under the Maine Medical Use of Marijuana Act** **PUBLIC 383**

Sponsor(s)	Committee Report	Amendments Adopted
HASKELL GERZOFSKY	OTP-AM	H-541

This bill clarifies that an individual must posses both a valid registry identification card and a valid Maine-issued driver's license or other Maine-issued photo identification as proof of valid participation in the medical use of marijuana.

This bill specifies that a primary caregiver's registry identification card expires on the same date that the patient's card expires.

This bill removes the requirement that registry identification cards contain information distinguishing the cardholder as a patient or primary caregiver and a photo.

Committee Amendment "A" (H-541)

This amendment adds to the bill provisions on forfeiture for excess marijuana, allowing the use in court of certified copies of marijuana registry records and rulemaking on fees paid by primary caregivers.

Enacted Law Summary

Public Law 383 clarifies that an individual must posses both a valid registry identification card and a valid Maine-issued driver's license or other Maine-issued photo identification as proof of valid participation in the medical use of marijuana. The law specifies that a primary caregiver's registry identification card expires on the same date that the patient's card expires. The law removes the requirement that registry identification cards contain information distinguishing the cardholder as a patient or primary caregiver and a photo. The law includes provisions on forfeiture for excess marijuana, allows the use in court of certified copies of marijuana registry records and includes rulemaking on fees paid by primary caregivers.

LD 1160 **Resolve, To Promote Education Regarding Parkinson's Disease among Health Care and Emergency Personnel** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
HARLOW	ONTP MAJ	
CRAVEN	OTP-AM MIN	

This resolve requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention to undertake an educational initiative regarding Parkinson's disease to increase understanding among health care and emergency personnel by July 1, 2012. The initiative must include training on Parkinson's disease and its symptoms and appropriate responses. The Maine Center for Disease Control and Prevention is directed to work collaboratively with the boards of licensure in the health care professions, the Department of Public Safety, the Department of Corrections, public transportation providers and crisis intervention personnel. Informational materials developed under the initiative must be used in the information and referral service on Parkinson's Syndrome.

Committee Amendment "A" (H-141)

This amendment, which is the minority report of the committee, adds an appropriations and allocations section.

LD 1166 **An Act To Improve Electronic Prescribing** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
FITTS	ONTP	

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

This bill proposes to improve the electronic prescription drug program by establishing an electronic prior authorization system that:

1. Is aligned with the SCRIPT standard as set forth by the National Council for Prescription Drug Programs;

2. Is required to be included as a part of all devices and software and hardware systems that facilitate the electronic submission of prescription drug orders;

3. Uses a universal format for prior authorizations;

4. Notifies the patient's preferred pharmacy of pending prior authorizations;

5. Provides specific feedback to the prescriber on acceptable reasons for approval of a prior authorization request for a prescription drug prescribed for a patient; and

6. Provides real-time feedback on the prior authorization request to a prescriber and a patient's preferred pharmacy, which provides an explanation of benefits for the patient and includes information on how to appeal in the event of a denial of the requested medication.

LD 1177 **An Act To Make Minor Changes to Municipal Health Inspection Activities** **PUBLIC 193**

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN BRANNIGAN	OTP-AM	H-238

This bill amends the laws regarding the municipal licensing and inspection of campgrounds, recreational camps, youth camps and eating establishments. It clarifies definitions for campgrounds, cottages, eating establishments, lodging places, vending machines, recreational camps and youth camps. The bill adds definitions for health inspectors, public pools, public spas and sporting camps. It repeals definitions for eating and lodging places, sanitarians and vending machine establishments. It requires owners of public pools and spas and sporting camps to obtain a license from the Department of Health and Human Services. Municipal inspection reports must be furnished electronically in a format and on a schedule determined by the department, and fees as set forth in the Maine Revised Statutes, Title 22, section 2494 for municipal license types as described in Title 22, section 2492 must be waived for establishments located in municipalities to which authority to conduct inspections has been delegated by the department. However, the licensee is required to pay the department a sum not to exceed $60 for each license type. It also exempts, for the purposes of the law requiring licensure of camping areas, those camping areas that are parking lots of shopping malls and store parking areas from the presumption that the owner of a camping area with five or more tents or recreational vehicles on a commercial lot is receiving compensation. The bill also fixes cross-references. It provides that the Department of Health and Human Services will not inspect or license lodging places that let three or fewer rooms.

Committee Amendment "A" (H-238)

This amendment amends the definition of "campground" to exclude parking lots generally, rather than only those parking lots used for emergency stops of less than 12 hours as proposed in the bill. It restores the definition of "eating and lodging places or lodging places" repealed in the bill but defines them as "eating and lodging places" only. It also restores references to eating and lodging places wherever they were removed from the statute in the bill. A definition of "lodging place" is included in the bill. The amendment increases the maximum sum that the Department of Health and Human Services may charge a delegated municipality for a license fee from $60 to $100. The amendment also adds a mandate preamble.

Enacted Law Summary

Public Law 2011, chapter 193 makes the following changes to the laws regarding the municipal licensing and inspection of campgrounds, recreational camps, youth camps and eating establishments.

1. It clarifies definitions for campgrounds, cottages, eating establishments, lodging places, eating and lodging places, vending machines, recreational camps and youth camps.

2. It adds definitions for health inspectors, public pools, public spas and sporting camps.

3. It repeals definitions for sanitarians and vending machine establishments.

4. It requires owners of public pools and spas and sporting camps to obtain a license from the Department of Health and Human Services.

5. Municipal inspection reports must be furnished electronically in a format and on a schedule determined by the department.

6. Fees set forth in the Maine Revised Statutes, Title 22, section 2494 for municipal license types as described in Title 22, section 2492 must be waived for establishments located in municipalities to which authority to conduct inspections has been delegated by the department except that the licensee is required to pay the department a sum not to exceed $100 for each license type.

7. It provides that the Department of Health and Human Services will not inspect or license lodging places that let three or fewer rooms.

LD 1181 **An Act To Increase Access to Vital Records** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
HOBBINS	ONTP	

This bill allows a person who is an interested party and has a legitimate purpose to obtain a copy of vital records without a court order. The bill also defines "interested party" as a beneficiary of a decedent, a beneficiary of an asset or a beneficiary of a life insurance policy.

LD 1195 **Resolve, To Create Equitable Reimbursement for Mental Health Providers** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
ROTUNDO	ONTP	

This resolve directs the Department of Health and Human Services to amend its rules under the MaineCare program to increase reimbursement for social workers and other licensed mental health professionals and caseworkers from $55 to $70 per hour.

LD 1196 **An Act To Clarify Assistance for Persons with Acquired Brain Injury** **PUBLIC 293**

Sponsor(s)	Committee Report	Amendments Adopted
GOODE CRAVEN	OTP-AM	H-409

This bill updates the laws relating to head injury to use the more appropriate term "acquired brain injury." The bill also revises the responsibilities of the Department of Health and Human Services with regard to persons who sustain acquired brain injuries, including the provision of appropriate services and the protection of civil rights.

Committee Amendment "A" (H-409)

This amendment replaces the bill. It retains the provisions that change "head injury" to "acquired brain injury." It specifies that the Department of Health and Human Services is authorized, rather than required, to undertake appropriate identification and medical and rehabilitative interventions and that whatever services are provided are provided within the limits of available resources. The same limitation is applied to the department's protection of the rights of patients. The amendment also authorizes, rather than requires, the inclusion of certain services in the comprehensive neurorehabilitation service system developed by the department.

Enacted Law Summary

Public Law 2011, chapter 293 specifies that the Department of Health and Human Services is authorized to undertake appropriate identification and medical and rehabilitative interventions and that whatever services are provided are provided within the limits of available resources, that the department may undertake the protection of the rights of patients and that certain services may be included in the comprehensive neurorehabilitation service system developed by the department.

LD 1212 **An Act To Improve Hospital Reporting of MRSA and Clostridium difficile Data** **PUBLIC 316**

Sponsor(s)	Committee Report	Amendments Adopted
MALABY ROSEN R	OTP-AM	H-410

This bill replaces the existing methicillin-resistant Staphylococcus aureus, or MRSA, screening protocol that was adopted in 2009, which focuses on the presence of MRSA in patients as they are admitted to a hospital, and replaces it with a protocol that focuses on actual MRSA infections that occur in the patient population while at hospitals.

Committee Amendment "A" (H-410)

This amendment strikes the bill. It replaces the existing methicillin-resistant Staphylococcus aureus, or MRSA, screening protocol that was adopted in 2009, which focuses on the presence of MRSA in patients as they are admitted to a hospital, with a protocol that focuses on MRSA infections that occur in the patient population while at hospitals. The amendment adds a 2nd multidrug resistant organism, Clostridium difficile, to the data collection and public reporting system. The amendment also provides the Maine Center for Disease Control and Prevention time to validate the data that was reported by the hospitals and requires the public reporting of that data following validation.

Enacted Law Summary

Public Law 2011, chapter 316 replaces the existing methicillin-resistant Staphylococcus aureus, or MRSA, screening protocol that was adopted in 2009, which focuses on the presence of MRSA in patients as they are admitted to a hospital, with a protocol that focuses on MRSA infections that occur in the patient population while at hospitals. The law adds a 2nd multidrug resistant organism, Clostridium difficile, to the data collection and public reporting system. The law provides the Maine Center for Disease Control and Prevention time to validate the data that was reported by the hospitals and requires the public reporting of that data following validation.

LD 1224 **An Act To Fund the Screening and Early Detection Elements of the Statewide Cancer Plan** **DIED ON ADJOURNMENT**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS RAYE	OTP-AM MAJ ONTP MIN	H-322

This bill provides funding for the comprehensive cancer screening and detection elements of the statewide cancer prevention and control program by providing an ongoing appropriation from the Fund for a Healthy Maine.

Committee Amendment "A" (H-322)

This amendment is the majority report of the committee. It removes as the funding source the Fund for a Healthy Maine and specifies in law that the funding level is $2,000,000 per year. The amendment adds an appropriation of $2,000,000 for fiscal year 2011-12 and $2,000,000 for fiscal year 2012-13 from the General Fund.

This bill died on the appropriations table on adjournment.

LD 1230 **An Act To Prohibit Smoking in Private Clubs Except in Separate Enclosed Areas** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
BLODGETT CRAVEN	ONTP MAJ OTP MIN	

Current law allows smoking in private clubs, such as those operated by fraternal orders or veterans' organizations, under certain conditions, such as when approved by a vote of the members of the club. This bill prohibits smoking in private clubs except in designated outdoor smoking areas and enclosed indoor areas designed to prevent the escape of smoke into the rest of the club.

LD 1252 **Resolve, To Develop a Plan To Improve Public Guardianship Services to Adults with Cognitive Disabilities** **RESOLVE 80**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP-AM	S-222

This resolve requires the Maine Developmental Disabilities Council to convene a stakeholder group to establish a working plan to provide public guardianship for adults with cognitive disabilities. The council is required to identify the necessary statutory changes and steps to implement a permanent guardianship program operated by an independent entity and make recommendations by January 15, 2012 to the Joint Standing Committee on Health and Human Services, which is authorized to submit a bill implementing the program.

Committee Amendment "A" (S-222)

This amendment adds to the findings of the stakeholder group the fiscal implications of any necessary statutory changes.

Enacted Law Summary

Resolve 2011, chapter 80 requires the Maine Developmental Disabilities Council to convene a stakeholder group to establish a working plan to provide public guardianship for adults with cognitive disabilities. The council is required to identify the necessary statutory changes and steps to implement a permanent guardianship program operated by an independent entity and to make findings on the fiscal implications of any necessary statutory changes and to make recommendations by January 15, 2012 to the Joint Standing Committee on Health and Human Services, which is authorized to submit a bill implementing the program.

LD 1263 **An Act To Establish One State Psychiatric Hospital** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
BRANNIGAN	ONTP	

This bill combines the two state mental health institutes, now referred to as the state psychiatric hospital, to be licensed and operated as one hospital under state law and federal accreditation standards. The bill clarifies that there is one superintendent for the one hospital, but that two campuses continue to be operated at the Riverview Psychiatric Center and at the Dorothea Dix Psychiatric Center. With the establishment of one hospital with two campuses, the commissioner has the authority to assign the hospital's employees to work at either campus, depending upon the hospital's need for staffing as it varies from time to time between the two campuses. This bill also corrects cross-references.

LD 1270 **Resolve, To Convene a Task Force To Study Staffing Ratios and Issues for Nursing Homes and Residential Care Facilities** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
MCCORMICK	ONTP	

This resolve directs the Commissioner of Health and Human Services to convene a task force to review the development of new criteria to be used in establishing revised staffing ratios for nursing homes and residential care facilities in the State, specifically reviewing the option of a new category of care workers qualified and certified to provide certain staffing services in both types of facilities. The commissioner is required to report the findings of the task force along with any recommended legislation to the Joint Standing Committee on Health and Human Services.

LD 1271 **An Act To Require Use of the Electronic Death Registration System** **PUBLIC 371**

Sponsor(s)	Committee Report	Amendments Adopted
MCCORMICK	OTP-AM	H-621 STRANG BURGESS S-157

This bill requires that, beginning January 1, 2012, death certificates filed by funeral directors or certain other persons must be filed using the electronic death registration system maintained by the State Registrar of Vital Statistics.

Committee Amendment "A" (S-157)

This amendment changes the date by which death certificates filed by funeral directors or certain other persons must be filed using the electronic death registration system maintained by the State Registrar of Vital Statistics from January 1, 2012 to July 1, 2012.

House Amendment "A" To Committee Amendment "A" (H-621)

This amendment provides that an electronic death registration system may be used, but is not required to be used, to file a certificate of death.

Enacted Law Summary

Public Law 2011, chapter 371 provides that, beginning July 1, 2012, death certificates filed by funeral directors or certain other persons may be filed using the electronic death registration system maintained by the State Registrar of Vital Statistics.

LD 1281 **Resolve, To Ensure Cost-effective Services for Persons Needing Neuropsychological Testing** **RESOLVE 110**

Sponsor(s)	Committee Report	Amendments Adopted
FOSSEL CRAVEN	OTP-AM	H-624

This resolve directs the Department of Health and Human Services to amend its Chapter 101: MaineCare Benefits Manual to permit neuropsychological testing assistants, also known as psychometricians, to administer and score neuropsychological and psychological tests of MaineCare patients under the supervision of a licensed psychologist.

Committee Amendment "A" (H-624)

This amendment incorporates a fiscal note.

Enacted Law Summary

Resolve 2011, chapter 110 directs the Department of Health and Human Services to amend its Chapter 101: MaineCare Benefits Manual to permit neuropsychological testing assistants, also known as psychometricians, to administer and score neuropsychological and psychological tests of MaineCare patients under the supervision of a licensed psychologist.

LD 1290 **Resolve, To Promote Prevention Practices in Oral Health Care** **VETO SUSTAINED**

Sponsor(s)	Committee Report	Amendments Adopted
EVES CRAVEN	OTP-AM	H-411

This resolve requires the Department of Health and Human Services to develop and maintain a program to promote oral health and dental disease prevention activities and to gather and aggregate data regarding oral health programs in this State.

Committee Amendment "A" (H-411)

This amendment adds to the resolve the requirement that the oral health promotion program be undertaken within existing resources of the Department of Health and Human Services.

LD 1294 **An Act To Impose a 90-day Residency Requirement in Order To Receive State Assistance** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
GUERIN	ONTP	

This bill establishes a 90-day residency requirement for applicants for the MaineCare program, the statewide food supplement program, the TANF program and municipal general assistance.

LD 1296 **An Act To Amend the Maine Medical Use of Marijuana Act To Protect Patient Privacy** **PUBLIC 407**

Sponsor(s)	Committee Report	Amendments Adopted
SANDERSON TRAHAN	OTP-AM	H-615

This bill amends the Maine Medical Use of Marijuana Act to protect patient privacy. The bill provides for expanded access and optional registration under the Act. The bill does the following.

1. It allows a physician to determine whether a condition requires the use of medical marijuana.

2. It amends the definition of "enclosed, locked facility."

3. It defines "mature marijuana plant."

4. It clarifies the definition of "qualifying patient" and removes the requirement of registration for certain authorized conduct of the patient.

5. It creates a definition for "primary caregiver."

6. It allows patients who cultivate their own marijuana to possess, beyond 6 mature marijuana plants, other marijuana plants in various stages of cultivation or processing.

7. It allows a primary caregiver to possess, beyond 6 mature marijuana plants for each of 5 qualifying patients of the caregiver, other marijuana plants in various stages of cultivation or processing.

8. It requires the use of an enclosed, locked facility only if marijuana is grown for three or more qualifying patients.

9. It allows a primary caregiver to sell excess marijuana to a marijuana dispensary and for dispensaries to contract out marijuana cultivation.

10. It removes the requirement that a patient who cultivates marijuana plants keep the plants in an enclosed, locked facility.

11. It removes the registration requirements for a hospice provider or nursing facility named as a patient's primary caregiver.

12. It removes the registration requirements for visiting qualifying patients.

13. It clarifies that a person may not be subject to arrest or prosecution for engaging in conduct authorized by the Maine Medical Use of Marijuana Act.

14. It prohibits a law enforcement officer, law enforcement department, state agency or employee of the State from seizing or possessing marijuana in the lawful possession of a qualifying patient, primary caregiver or dispensary.

15. It allows a business owner to prohibit smoking medical marijuana on the business's premises.

16. It allows a sliding scale registration fee based upon a patient's status as a veteran of the Armed Forces of the United States.

17. It removes the registration requirement that the Commissioner of Health and Human Services approve the registration application.

18. It removes the requirement that registration cards contain an applicant's address and date of birth.

19. It clarifies that possession of a written certification from a physician prescribing use of medical marijuana cannot be used as evidence of unlawful conduct or be the basis for a search of the patient.

20. It requires that the records of a patient no longer registered as a medical marijuana user be purged and requires that the patient be notified of the purge of information.

21. It removes the requirement of listing the nature of the debilitating conditions of registered patients in the annual report of the registration process by the Department of Health and Human Services to the Legislature.

22. It clarifies that registration is voluntary and failure to register does not affect the authorized conduct for a qualifying patient or primary caregiver.

23. It allows for a civil penalty for a person making a fraudulent representation relating to the possession or medical use of marijuana under the Maine Medical Use of Marijuana Act.

24. It allows a marijuana dispensary to obtain and possess up to 5 ounces of marijuana for each patient of the dispensary.

25. It removes the registration requirement of listing the name, address and date of birth for each principal officer, board member and employee of a marijuana dispensary or issuing registration cards to those individuals.

26. It provides for immunity for marijuana dispensaries and their principal officers, board members and employees.

27. It prohibits a political subdivision of the State from enacting any law or ordinance concerning use of medical marijuana other than reasonable rules concerning the locations of marijuana dispensaries.

28. It requires the Department of Health and Human Services to amend rules to retain at least eight marijuana dispensaries throughout the State.

29. It requires a written certification by a physician recommending use of medical marijuana to be written on tamper-resistant paper.

30. It allows a primary caregiver to assist a qualifying patient in the preparation of marijuana.

31. It exempts from the definition of "food establishment" a primary caregiver who prepares medical marijuana for use by a qualifying patient who is a family or household member of the primary caregiver.

32. It requires a designation of a primary caregiver from a qualifying patient to be in a written document signed and dated by the qualifying patient.

33. It requires a physician to advise a patient of the risks and benefits of the use of medical marijuana and that the patient may benefit from the use of medical marijuana prior to issuing a certification prescribing the use of medical marijuana.

34. It allows a patient to grow marijuana for personal use and designate a primary caregiver or registered dispensary.

35. It allows a court to permit the use of medical marijuana while imposing conditions of a criminal sentence, bail, probation, continuance or other dispositional order.

36. It includes dispensing in conduct allowed by a registered dispensary.

37. It requires a registered dispensary to display its certificate issued by the Department of Health and Human Services in a publicly visible location in the dispensary.

38. It clarifies that physicians are protected for conduct authorized by the Maine Medical Use of Marijuana Act.

39. It requires a qualifying patient or primary caregiver to provide, upon request by a law enforcement officer, official proof of identification and the original copy of the physician's certification or qualifying patient's designation of primary caregiver.

40. It requires the Department of Health and Human Services to maintain a log of requests to view registration information, including the name and agency of the requestor, and allows a person whose information is subject to an information request to copy or receive copies of portions of the log relating to that request.

Committee Amendment "A" (H-615)

This amendment replaces the bill, but retains most of the substantive provisions of the bill. It retains provisions of

the bill that allow qualifying patients to use marijuana for medical purposes, removes provisions of the bill that increase the amount of marijuana a medical marijuana patient may possess, adds provisions requiring treating physicians to consult with other physicians before providing written certification for the medical use of marijuana for minors who are qualifying patients and adds a requirement that the Department of Health and Human Services expunge from the records of the medical marijuana registry information on a registered patient's diagnosis and information on qualifying patients who request to be removed from the registry.

Enacted Law Summary

Public Law 2011, chapter 407 allows qualifying patients to use marijuana for medical purposes, removes from the law the requirement that treating physicians to consult with other physicians before providing written certification for the medical use of marijuana for minors who are qualifying patients and adds a requirement that the Department of Health and Human Services expunge from the records of the medical marijuana registry information on a registered patient's diagnosis and information on qualifying patients who request to be removed from the registry. The law makes registration with DHHS optional for patients and for caregivers who care only for family and household members. The law adds specific language on an affirmative defense and on forfeiture of marijuana in excess of amounts allowed by the law on medical use of marijuana.

LD 1303 **An Act To Increase the Fee Paid to a Funeral Home To Transport a Body at the Request of the State Medical Examiner** **PUBLIC 445**

Sponsor(s)	Committee Report	Amendments Adopted
FITTS	OTP-AM	H-239
		S-358 ROSEN R

This bill increases the fee paid to a funeral establishment to transport a body to Augusta at the request of the Department of the Attorney General, Office of Chief Medical Examiner.

Committee Amendment "A" (H-239)

This amendment adds an appropriations and allocations section to the bill.

Senate Amendment "A" To Committee Amendment "A" (S-358)

This amendment adds an effective date of July 1, 2012 and removes the fiscal year 2011-12 General Fund appropriation of $26,250.

Enacted Law Summary

Public Law 2011, chapter 445 increases the fee paid to a funeral establishment to transport a body to Augusta at the request of the Department of the Attorney General, Office of Chief Medical Examiner, beginning July 1, 2012.

LD 1331 **An Act To Increase Health Care Quality through the Promotion of Health Information Exchange and the Protection of Patient Privacy** **PUBLIC 347**

Sponsor(s)	Committee Report	Amendments Adopted
FOSSEL	OTP-AM	H-458

This bill amends the law regarding health information exchanges to specify when and under what circumstances information may be shared between a health care practitioner or health care facility and a health information exchange. The health information exchange must provide the ability for the client or individual to opt out. The bill specifies when information may be disclosed even if a client or individual has opted out. The bill prohibits a provider or health insurer from refusing to provide medical assistance or insurance coverage based on the individual's decision to participate or not participate in a health information exchange. The bill prohibits reference to the participation or nonparticipation of a health care practitioner or health care facility in a health information exchange from being used as evidence in negligence or other civil action.

Committee Amendment "A" (H-458)

This amendment specifies that a health information exchange is a state-designated statewide health information exchange. It also changes the definition of "health care facility" from the definition used in the laws regarding certificate of need to a general definition that includes all facilities licensed under the Maine Revised Statutes, Title 22, including a home health care provider and hospice program and also pharmacies licensed pursuant to Title 32.

Enacted Law Summary

Public Law 2011, chapter 347 amends the law regarding health information exchanges to specify when and under what circumstances information may be shared between a health care practitioner or health care facility and a health information exchange. The state-designated statewide health information exchange must provide the ability for the client or individual to opt out. The law specifies when information may be disclosed even if a client or individual has opted out. The law prohibits a provider or health insurer from refusing to provide medical assistance or insurance coverage based on the individual's decision to participate or not participate in the state-designated statewide health information exchange. The law prohibits reference to the participation or nonparticipation of a health care practitioner or health care facility in the state-designated statewide health information exchange from being used as evidence in negligence or other civil action.

LD 1334 **An Act To Require the Department of Health and Human Services To License Families To Provide Care for Children in Foster Care** **PUBLIC 187**

Sponsor(s)	Committee Report	Amendments Adopted
CRAVEN	OTP	

This bill requires the Department of Health and Human Services to issue a license to a resource family whether the family provides a foster child with foster care, kinship care, adoption or permanency guardianship as long as the family meets the requirements and standards for adoption of children in foster care. Current law does not allow the department to license a preadoptive home. The bill gives the department that authority and puts the department in compliance with Title IV-E of the United States Social Security Act.

Enacted Law Summary

Public Law 2011, chapter 187 requires the Department of Health and Human Services to issue a license to a resource family whether the family provides a foster child with foster care, kinship care, adoption or permanency guardianship as long as the family meets the requirements and standards for adoption of children in foster care. The law gives the department the authority to license a preadoptive home and puts the department in compliance with Title IV-E of the United States Social Security Act.

LD 1337 **An Act To Ensure Patient Privacy and Control with Regard to Health Information Exchanges** **PUBLIC 373**

Sponsor(s)	Committee Report	Amendments Adopted
KATZ	OTP-AM	S-261

This bill provides for the control and use of patient information available through a health information exchange. The bill requires a health information exchange to obtain the consent of a patient prior to collecting, storing or disclosing that patient's health care information and prohibits a health care practitioner from accessing that information without prior authorization, which may be waived by the patient in an emergency. The bill requires certain information about a health information exchange to be provided to a patient, including how to access the patient's records and other information regarding those records either electronically or through other means; a health information exchange is prohibited from charging the patient a fee for accessing those records. The bill establishes a protocol for notification if a breach of the health information exchange system occurs and patient information is illegally accessed. A patient may not be denied health care treatment, insurance coverage or insurance payment or reimbursement based on the failure of the patient or the health care practitioner to participate in a health information exchange system. Evidence of participation or nonparticipation in a health information exchange system may not be used as evidence in a professional negligence action against a health care practitioner. The bill exempts from the freedom of access laws information regarding a patient retained by a health information exchange.

Committee Amendment "A" (S-261)

This amendment replaces the bill and removes the language in the bill that requires a patient to opt in to the state-designated statewide health information exchange and instead makes it easier for patients to opt out of the exchange. The amendment retains provisions of the bill that prohibit a health care practitioner or health insurer from refusing to provide medical assistance or insurance coverage based on a patient's decision to participate or not to participate in a health information exchange. As in the bill, the amendment also prohibits reference to the participation or nonparticipation of a health care practitioner or health care facility in a health information exchange from being used as evidence in actions for negligence or other civil actions. The health information exchange is required to establish a secure website accessible to a patient that must allow the patient to determine who accessed the patient's records and must include a method to decline participation in the exchange. The amendment also requires the health information exchange to meet or exceed all federal laws related to privacy, security and breach notification regarding personally identifiable protected health information.

Enacted Law Summary

Public Law 2011, chapter 373 makes a number of changes to health information exchanges.

1. It makes it easier for a patient to opt out of the state-designated statewide health information exchange.

2. The law prohibits a health care practitioner or health insurer from refusing to provide medical assistance or insurance coverage based on a patient's decision to participate or not to participate in a state-designated statewide health information exchange.

3. It prohibits reference to the participation or nonparticipation of a health care practitioner or health care facility in the state-designated statewide health information exchange from being used as evidence in actions for negligence or other civil actions.

4. The state-designated statewide health information exchange is required to establish a secure website accessible to a patient that must allow the patient to determine who accessed the patient's records and must include a method to

decline participation in the exchange.

5. It requires the state-designated statewide health information exchange to meet or exceed all federal laws related to privacy, security and breach notification regarding personally identifiable protected health information.

6. It exempts from the freedom of access laws information regarding a patient retained by the state-designated statewide health information exchange.

LD 1361 **Resolve, To Ensure Patient Safety in the Use of Certain Imaging Equipment** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
TREAT	ONTP MAJ OTP-AM MIN	

This resolve requires the Advisory Committee on Radiation and the Board of Dental Examiners to review the licensing, required operator training and continuing education requirements and state oversight of cone beam computed tomography scanners, as used in dental offices. This review must include an assessment of whether current rules and practices relating to these scanners are sufficient to protect the public, including both child and adult patients. This resolve requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention, Division of Environmental Health, Radiation Control Program to collect demographic information from dentists about minor patients who receive a scan from October 1, 2011 to January 1, 2012 and report this information to the committee and the board. The committee and the board shall report their findings, including any recommended legislation, to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Labor, Commerce, Research and Economic Development no later than February 1, 2012. The Joint Standing Committee on Health and Human Services or the Joint Standing Committee on Labor, Commerce, Research and Economic Development may submit a bill to the Second Regular Session of the 125th Legislature on the subject matter of the report of the committee and the board.

Committee Amendment "A" (H-416)

This amendment is the minority report of the committee. The amendment requires the report on cone beam computed tomography scanner use with children to include the ages of the children. The amendment also adds an appropriations and allocations section.

LD 1364 **An Act To Improve the Quality and Reduce the Cost of Health Care** **Carried Over**

Sponsor(s)	Committee Report	Amendments Adopted
FITTS RAYE		

This bill directs the Department of Health and Human Services to coordinate the purchase of prescription drugs for MaineCare members through certain organizations eligible for prescription drug discounts under the federal Public Health Service Act, referred to as "340B covered entities," in order for the MaineCare program to negotiate the lowest possible prices and avoid retail markup beginning January 1, 2012. The bill provides a mechanism to calculate savings from establishing the 340B program and distribute the savings among 340B covered entities. The bill provides for routine technical rulemaking as required to implement the provisions of the bill.

This bill was carried over to any special and/or regular session of the 125th Legislature by joint order, H.P. 1190.

LD 1370 **An Act To Amend the Laws Governing General Assistance Programs** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
CUSHING MASON	ONTP	

This bill seeks to make several changes to the laws governing the administration of the general assistance programs.

1. It clarifies the calculation for determining the pro rata share of the assistance to be provided to eligible household members and requires that the lump sum income proration calculation be based only on actual household need, and not on the greater of the need or 150% of federal poverty level, as is currently required.

2. It increases general assistance program ineligibility from 120 days to 180 days for fraud or a work requirement violation.

3. It amends the provisions governing the use of potential resources to include private assistance programs, such as unemployment insurance benefits, and allows refunds provided under the Maine Residents Property Tax Program, also known as the Circuitbreaker Program, to count as income in the calculation of general assistance program eligibility.

4. It directs the Department of Health and Human Services to develop a plan to provide municipalities with electronic access to the State's automated client eligibility system for determining general assistance program applicant eligibility. Electronic access must be provided to municipalities no later than December 31, 2012.

LD 1393 **An Act To Require Estimates of Patient Costs in Any Plan of Care prior to Treatment** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
BOLAND FARNHAM	ONTP	

This bill requires a health care provider to provide to a person recommended for a health care procedure or course of treatment a cost estimate of the procedure or treatment, the provider's reasons for the procedure or treatment, other options and their costs and the amount of the cost that will be paid for by the person's insurer. This bill also requires a health care provider to provide a cost estimate to a referring provider on a recommended procedure or course of treatment for a referred patient.

LD 1394 **An Act To Impose Penalties for Certain Transfers of Assets at Less Than Fair Market Value by Individuals Receiving Long-term Care Services** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS ROSEN R	ONTP	

This bill requires the Department of Health and Human Services to impose an asset transfer penalty, with a lookback period of 60 months, on a person seeking to qualify for MaineCare funding and support of any long-term care services, and who has made a transfer or other disposal of assets at less than fair market value. See related provision in biennial budget, Public Law 2011, chapter 380, Part MM.

LD 1406 **An Act Regarding the Scope of Services That May Be Provided by Pharmacies Owned by Hospitals** **MINORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
FARNHAM	OTP-AM MAJ ONTP MIN	

This bill provides that a pharmacy that is owned by and located in a hospital may dispense prescription drugs to a person who is a patient in that hospital and to a person who is receiving health care services in a nursing facility or a long-term care facility that is affiliated with that hospital. It clarifies that the definition of "pharmacy" in the Maine Pharmacy Act does not include a hospital pharmacy.

Committee Amendment "A" (S-161)

This amendment, which is the majority report of the committee, clarifies language regarding the scope of services of a hospital pharmacy by allowing the pharmacy to dispense prescription drugs to active and retired hospital employees and hospital staff members and to their dependents and making technical changes. The amendment removes from the bill mention of long-term care facilities and affiliates of a hospital.

LD 1407 **An Act To Establish the Maine Wild Mushroom Harvesting Certification Program** **PUBLIC 412**

Sponsor(s)	Committee Report	Amendments Adopted
LANGLEY	OTP-AM	S-306

This bill provides a mechanism for persons who harvest, broker and sell wild mushrooms to obtain appropriate certification in safe identification and handling of wild harvested mushrooms. This bill establishes a mechanism for the Department of Health and Human Services to certify duly qualified individuals as trained in the field of wild mushroom harvesting. The bill requires the Commissioner of Health and Human Services to decide whether to certify individuals based upon the recommendations of the Maine Wild Mushroom Harvesting Advisory Committee, which is created in the bill and whose members include representatives from the Department of Health and Human

Services, the Department of Agriculture, Food and Rural Resources, a statewide mycological association, a statewide restaurant association, a northern New England poison control center and the University of Maine and of the wild mushroom foragers and brokers community and the retail food industry, including a food wholesaler and a food preparer. The Department of Health and Human Services is required to provide staff assistance to the advisory committee and establish a fund to defray the costs of training, examining and certifying wild mushroom harvesters.

Committee Amendment "B" (S-306)

This amendment amends the bill by requiring the Governor to appoint one representative of wild mushroom foragers and one representative of wild mushroom brokers to the Maine Wild Mushroom Harvesting Advisory Committee. The bill requires the Governor to appoint two representatives of the wild mushroom foragers and brokers community. The amendment also clarifies that certain members of the committee are appointed by the Governor. The amendment reduces the fee to a maximum of $20 and allows it to be imposed no more than once every five years. The amendment also adds an appropriations and allocations section.

Enacted Law Summary

Public Law 2011, chapter 412 provides a mechanism for persons who harvest, broker and sell wild mushrooms to obtain appropriate certification in safe identification and handling of wild harvested mushrooms. The law establishes a mechanism for the Department of Health and Human Services to certify duly qualified individuals as trained in the field of wild mushroom harvesting. The law requires the Commissioner of Health and Human Services to decide whether to certify individuals based upon the recommendations of the Maine Wild Mushroom Harvesting Advisory Committee, whose members include representatives from the Department of Health and Human Services, the Department of Agriculture, Food and Rural Resources, a statewide mycological association, a statewide restaurant association, a northern New England poison control center and the University of Maine and of the wild mushroom foragers and brokers community and the retail food industry, including a food wholesaler and a food preparer. The Department of Health and Human Services is required to provide staff assistance to the advisory committee and establish a fund to defray the costs of training, examining and certifying wild mushroom harvesters. The law provides a maximum fee of $20, once every five years.

LD 1429 **An Act To Amend the Laws Governing Prescription Monitoring Information** **PUBLIC 218**

Sponsor(s)	Committee Report	Amendments Adopted
MARTIN J	OTP	

This bill allows the Department of Health and Human Services, Office of Substance Abuse to share prescription monitoring information with another state if the state has provisions consistent with prescription monitoring information provisions in Maine law and the office enters into a prescription monitoring information sharing agreement with the other state.

Enacted Law Summary

Public Law 2011, chapter 218 allows the Department of Health and Human Services, Office of Substance Abuse to share prescription monitoring information with another state if the state has provisions consistent with prescription monitoring information provisions in Maine law and the office enters into a prescription monitoring information sharing agreement with the other state.

LD 1431 **An Act To Establish Standards for the Administration of General Assistance Programs** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY JACKSON	ONTP	

This bill establishes standards for municipal administration of a general assistance program. It requires the Department of Health and Human Services to certify that a municipality is qualified to administer a general assistance program based on the standards and applicable law. If the department determines that a municipality has improperly administered its general assistance program, the department shall establish a corrective action plan for that municipality. If a municipality is not certified to administer a general assistance program or, if certified, has not administered the program in accordance with law and has failed to meet the requirements of a corrective action plan, the department shall administer the program in that municipality itself or contract with another municipality or nonprofit organization to administer the program in that municipality, with the decertified municipality remaining liable for the cost of the program.

LD 1435 **An Act To Adopt the Interstate Prescription Monitoring Program Compact** **PUBLIC 217**

Sponsor(s)	Committee Report	Amendments Adopted
MARTIN J	OTP	

This bill enacts the interstate prescription monitoring program compact. The compact is designed to provide a mechanism for state prescription monitoring programs to securely share prescription data to improve public health and safety.

Enacted Law Summary

Public Law 2011, chapter 217 enacts the interstate prescription monitoring program compact. The compact is designed to provide a mechanism for state prescription monitoring programs to securely share prescription data to improve public health and safety.

LD 1461 **Resolve, To Implement the Recommendations of the Report on Services for Elders and Other Adults Who Need Long-term Home-based and Community-based Care** **RESOLVE 71**

Sponsor(s)	Committee Report	Amendments Adopted
RAYE	OTP-AM	S-165

This resolve directs the Commissioner of Health and Human Services to implement the recommendations included in the report submitted to the 124th Legislature entitled "Services for Elders and Other Adults Who Need Long-Term Home- and Community-Based Care" to make systemic changes to Maine's long-term home-based and

community-based care.

Committee Amendment "A" (S-165)

This amendment adds to the resolve by requiring the Department of Health and Human Services to adopt the Lean Implementation Plan effective July 1, 2012, within the limits of existing resources. It corrects a reference to the section of the resolve that requires adoption of the Lean Implementation Plan.

Enacted Law Summary

Resolve 2011, chapter 71 directs the Commissioner of Health and Human Services to implement the recommendations included in the report submitted to the 124th Legislature entitled "Services for Elders and Other Adults Who Need Long-Term Home- and Community-Based Care" to make systemic changes to Maine's long-term home-based and community-based care. The resolve requires the Department of Health and Human Services to adopt the Lean Implementation Plan effective July 1, 2012, within the limits of existing resources.

LD 1467 **Resolve, To Evaluate the All-payor Claims Database System for the State** **RESOLVE 109**

Sponsor(s)	Committee Report	Amendments Adopted
CAIN CRAVEN	OTP-AM	H-655

This bill requires the Maine Health Data Processing Center to update its all-payor and all-setting health care database system. The bill also requires that an independent manager of the database be established. The bill also requires that standards for reporting from the database be updated with input from stakeholders and that assessments to payors and providers submitting data be reduced accordingly. It also requires that user licenses be established. The bill establishes the Health Information Database Advisory Group to advise the Maine Health Data Processing Center and the Maine Health Data Organization.

Committee Amendment "A" (H-655)

This amendment replaces the bill with a resolve that creates a working group to review and make recommendations on the availability of and access to health care data and to examine the all-payor claims database systems. The working group consists of 17 members, all invited to participate by the Commissioner of Health and Human Services. The working group is required to obtain outside nonstate funding to support staffing and administrative costs. The Department of Health and Human Services is required to submit a report to the Joint Standing Committee on Health and Human Services by January 31, 2012.

Enacted Law Summary

Resolve 2011, chapter 109 creates a working group to review and make recommendations on the availability of and access to health care data and to examine the all-payor claims database systems. The working group consists of 17 members, all invited to participate by the Commissioner of Health and Human Services. The working group is required to obtain outside nonstate funding to support staffing and administrative costs. The Department of Health and Human Services is required to submit a report to the Joint Standing Committee on Health and Human Services by January 31, 2012.

LD 1485 **An Act To Promote Transparency in the Medicaid Reimbursement Process** **PUBLIC 323**

Sponsor(s)	Committee Report	Amendments Adopted
FOSSEL	OTP-AM	H-349

This bill requires the Department of Health and Human Services, office of MaineCare services to establish a 60-day written comment period on any proposed change to the state maximum allowable cost list if the change results in a reduction in payment to pharmacies. The office of MaineCare services is required to prepare an annual report that summarizes the number of drugs affected by such changes and the percentage change in payment for those drugs that resulted from changes to the list during the calendar year and submit that report annually by December 31st to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The Department of Health and Human Services, office of MaineCare services is required to amend its rules to implement the provisions of this bill.

Committee Amendment "A" (H-349)

This amendment shortens the written comment period on proposed changes to the state maximum allowable cost list that will result in reductions in payments to pharmacies from 60 days, as in the bill, to 17 days. It changes the provision of the bill that prohibits such a change from taking effect until 90 days after the Department of Health and Human Services has completed its response to written comments to provide that such a change may not take effect for at least 30 days and not until 30 days after the department has completed its response.

Enacted Law Summary

Public Law 2011, chapter 323 requires the Department of Health and Human Services, office of MaineCare services to establish a 17-day written comment period on any proposed change to the state maximum allowable cost list if the change results in a reduction in payment to pharmacies. The office of MaineCare services is required to prepare an annual report that summarizes the number of drugs affected by such changes and the percentage change in payment for those drugs that resulted from changes to the list during the calendar year and submit that report annually by December 31st to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The Department of Health and Human Services, office of MaineCare services is required to amend its rules to implement the provisions of this bill.

LD 1486 **An Act To Amend the Laws Concerning the Child Care Advisory Council and the Maine Children's Growth Council** **PUBLIC 388**

Sponsor(s)	Committee Report	Amendments Adopted
STUCKEY ALFOND	OTP	H-593 STRANG BURGESS

This bill makes changes to the quorum rules, staffing and reporting duties of the Maine Children's Growth Council and makes changes to the membership of and requirements regarding notice and conduct of and attendance at meetings of the Child Care Advisory Council.

House Amendment "A" (H-593)

This amendment changes the proposed new representative of unionized family child care providers on the Child

Care Advisory Council to a representative of home-based child care providers appointed by the Governor.

Enacted Law Summary

Public Law 2011, chapter 388 makes changes to the quorum rules, staffing and reporting duties of the Maine Children's Growth Council and makes changes to the membership of and requirements regarding notice and conduct of and attendance at meetings of the Child Care Advisory Council. The law adds to the Child Care Advisory Council a representative of home-based child care providers appointed by the Governor.

LD 1487 **An Act To Assist Maine Pharmacies** **ONTP**

Sponsor(s)	Committee Report	Amendments Adopted
BECK BRANNIGAN	ONTP	

This bill establishes the Prescription Drug Practices Act. It requires all pharmacy benefits managers operating in the State to acquire a certificate of authority to be issued by the Department of Professional and Financial Regulation, Bureau of Insurance. It establishes compliance and disclosure requirements for pharmacy benefits managers and prohibits certain practices by pharmacy benefits managers.

LD 1490 **An Act To Amend the Laws Regarding Custody of the Remains of Deceased Persons** **PUBLIC 387**

Sponsor(s)	Committee Report	Amendments Adopted
CAIN RECTOR	OTP-AM	H-596

This bill establishes an order of priority for the custody and control of the remains of a deceased person. If a person has been charged with murder or the type of manslaughter in which the person intentionally or knowingly causes the death of another, that person forfeits the right to custody and control of the remains of a deceased person. Upon the dismissal of the charges or acquittal of the person, the person resumes the position of priority granted under the law. The bill authorizes certain actions by funeral directors, cemeteries and crematories, including sheltering the remains during the pendency of a dispute over custody and control, and provides certain protections to funeral directors, cemeteries and crematories.

Committee Amendment "A" (H-596)

This amendment makes technical changes to the bill by including practitioners of funeral service and changes "funeral service agreement" to "statement of funeral goods and services." The amendment removes reference to a person who refuses to take financial responsibility and adds authorization for a funeral director or practitioner of funeral services to act in the case of abandonment of the remains of a deceased person or a dead body.

Enacted Law Summary

Public Law 2011, chapter 387 establishes an order of priority for the custody and control of the remains of a deceased person. If a person has been charged with murder or the type of manslaughter in which the person intentionally or knowingly causes the death of another, that person forfeits the right to custody and control of the remains of a deceased person. Upon the dismissal of the charges or acquittal of the person, the person resumes the position of priority granted under the law. The law authorizes certain actions by funeral directors and practitioner of

funeral service, cemeteries and crematories, including sheltering the remains during the pendency of a dispute over custody and control, and provides certain protections to funeral directors, cemeteries and crematories. The law authorizes a funeral director or practitioner of funeral services to act in the case of abandonment of the remains of a deceased person or a dead body.

LD 1501 **Resolve, To Reduce Opioid Overprescription, Overuse and Abuse** **RESOLVE 81**

Sponsor(s)	Committee Report	Amendments Adopted
HINCK CRAVEN	OTP-AM	H-542

This bill establishes protocols for the health care provider community to follow in prescribing opioid drugs for chronic noncancer pain. It includes provisions on physical examinations, health records, periodic review of patient health and consultations with and referrals to pain management specialists. It requires the Department of Health and Human Services to review and evaluate the efficacy of comprehensive pain management, including physical therapy and cognitive behavioral therapy, and report back to the Joint Standing Committee on Health and Human Services no later than December 7, 2011.

Committee Amendment "A" (H-542)

The amendment replaces the bill with a resolve establishing a work group to be convened by the Substance Abuse Services Commission to review and make recommendations on treatment for chronic noncancer-related pain to the Joint Standing Committee on Health and Human Services not later than December 1, 2011.

Enacted Law Summary

Resolve 2011, chapter 81 establishes a work group, to be convened by the Substance Abuse Services Commission, to review and make recommendations on treatment for chronic noncancer-related pain to the Joint Standing Committee on Health and Human Services not later than December 1, 2011.

LD 1504 **Resolve, To Ensure a Strong Start for Maine's Infants and Toddlers by Extending the Reach of High-quality Home Visitation** **RESOLVE 77**

Sponsor(s)	Committee Report	Amendments Adopted
BERRY RAYE	OTP-AM	H-348

This resolve directs the Department of Health and Human Services to develop a plan for the full use of federal, private and special revenue funds for home visitation programs or services, with an emphasis on serving infants who are at risk due to physical, emotional, developmental or environmental factors, and to report to the Joint Standing Committee on Health and Human Services. The committee may report out a bill in 2012 on the department's progress in ensuring improved health outcomes, reduced costs to taxpayers and enhanced future productivity through these efforts.

Committee Amendment "A" (H-348)

This amendment changes references to "at-risk infants and toddlers" and "at-risk families" to "vulnerable families in at-risk communities."

Enacted Law Summary

Resolve 2011, chapter 77 directs the Department of Health and Human Services to develop a plan for the full use of federal, private and special revenue funds for home visitation programs or services, with an emphasis on serving infants who are in families in at-risk communities due to physical, emotional, developmental or environmental factors, and to report to the Joint Standing Committee on Health and Human Services. The resolve authorizes the committee to report out a bill in 2012 on the department's progress in ensuring improved health outcomes, reduced costs to taxpayers and enhanced future productivity through these efforts.

LD 1511 **An Act To Impose a Lifetime Maximum on the Receipt of Welfare Benefits** **INDEF PP**

Sponsor(s)	Committee Report	Amendments Adopted
GUERIN	OTP-AM MAJ ONTP MIN	

This bill reforms the welfare system in Maine by:

1. Limiting the total time a person may receive Temporary Assistance for Needy Families, or TANF, assistance to a lifetime maximum of 60 months as an adult, except for emergency situations; and

2. Limiting the total time a person may receive municipal general assistance to a lifetime maximum of 24 months, except in limited circumstances.

The changes take effect January 1, 2012. See related provisions in Public Law 2011, chapter 380, Part PP.

LD 1520 **An Act To Improve MaineCare and Promote Employment** **MAJORITY (ONTP) REPORT**

Sponsor(s)	Committee Report	Amendments Adopted
BARTLETT	ONTP MAJ OTP-AM MIN	

The bill allows people who have received Medicaid for their children for the past 3 months whose income exceeds limits pursuant to Title 22, section 3174-G, subsection 1, paragraph E-1 to purchase coverage for up to 18 months at premiums not to exceed those under the Katie Beckett program and limits contributions toward administrative costs to the maximum amount allowed under the federal Consolidated Omnibus Budget Reconciliation Act of 1985. The bill makes working disabled persons with unearned income that is equal to or below 150 percent of the nonfarm income official poverty line and with a combined total earned and unearned income that does not exceed 250 percent of the nonfarm income official poverty line eligible for Medicaid. It makes adults who are 19 or 20 years of age when the household income is equal to or below 200 percent of the nonfarm income official poverty line eligible for Medicaid.

Committee Amendment "A" (S-303)

This amendment is the minority report of the committee and adds an appropriations and allocations section.

LD 1537 **An Act To Amend Licensing and Certification Laws Administered by the Department of Health and Human Services** **PUBLIC 257**

Sponsor(s)	Committee Report	Amendments Adopted
STRANG BURGESS CRAVEN	OTP-AM	H-359

This bill requires the Department of Health and Human Services to classify a finding, after an investigation of a complaint of abuse, neglect or misappropriation of property of a client, patient or resident against an unlicensed assistive person, as an unsubstantiated finding or as either an indicated or substantiated finding based on the level of abuse, neglect or misappropriation found by the department.

An unsubstantiated or indicated finding is not listed as a notation on the Maine Registry of Certified Nursing Assistants and Direct Care Workers, whereas complaints that are substantiated are listed as notations on the registry. The department is required to establish criteria by rule to determine the level of abuse, neglect or misappropriation that warrants a finding that the complaint is indicated or substantiated.

The bill clarifies that current hospital, convalescent home and nursing home licensing renewal fees are calculated by taking the amount of the renewal fee per bed multiplied by the number of beds in the facility and multiplying that product by the number of years included in the term of the renewed license.

This bill updates the laws concerning the licensing of end-stage renal disease facilities. It changes the frequency of end-stage renal disease facility surveys from every year to every 24 months.

Committee Amendment "A" (H-359)

This amendment adds the phrase "or other services" to the duties of unlicensed assistive persons and direct care workers. The bill proposes to change the minimum survey requirement for licensure of a renal dialysis unit from 12 to 24 months. The amendment sets the time period within which a survey must have occurred at 36 months.

Enacted Law Summary

Resolve 2011, chapter 257 requires the Department of Health and Human Services to classify a finding, after an investigation of a complaint of abuse, neglect or misappropriation of property of a client, patient or resident against an unlicensed assistive person, as an unsubstantiated finding or as either an indicated or substantiated finding based on the level of abuse, neglect or misappropriation found by the department.

An unsubstantiated or indicated finding is not listed as a notation on the Maine Registry of Certified Nursing Assistants and Direct Care Workers, whereas complaints that are substantiated are listed as notations on the registry.

The department is required to establish criteria by rule to determine the level of abuse, neglect or misappropriation that warrants a finding that the complaint is indicated or substantiated.

The law clarifies that current hospital, convalescent home and nursing home licensing renewal fees are calculated by taking the amount of the renewal fee per bed multiplied by the number of beds in the facility and multiplying that product by the number of years included in the term of the renewed license.

This law updates the laws concerning the licensing of end-stage renal disease facilities and changes the minimum survey requirement for licensure of a renal dialysis unit from 12 to 24 months. It changes the frequency of end-stage renal disease facility surveys from every year to every 36 months.

LD 1548 **An Act To Update and Improve Maine's Laws Pertaining to the Rights of Persons with Intellectual Disabilities** **PUBLIC 186**

Sponsor(s)	Committee Report	Amendments Adopted
BRANNIGAN	OTP	

This bill amends the laws regarding the rights of persons with intellectual disabilities. It provides a legal mechanism for Maine courts to limit a person's rights if the person is found not competent to stand trial or not guilty by reason of mental incapacity. It permits the Department of Health and Human Services to adopt routine technical rules that clarify when a guardian may limit, waive or restrict a person's rights and basic protections. It permits persons receiving services to organize residential councils to enhance communication between providers and residents. It clarifies the use of the terms "restraint" and "seclusion."

The bill also directs the Department of Health and Human Services and the Maine Developmental Disabilities Council, with the participation of the Disability Rights Center and the assistance of the Revisor of Statutes, to review the Maine Revised Statutes and identify the sections that use the terms "mental retardation" and "mentally retarded" and report recommendations for changes, including proposed legislation, to the Joint Standing Committee on Health and Human Services. The bill authorizes the committee to submit legislation to the Second Regular Session of the 125th Legislature based on these recommendations.

Enacted Law Summary

Public Law 2011, chapter 186 amends the laws regarding the rights of persons with intellectual disabilities. It provides a legal mechanism for Maine courts to limit a person's rights if the person is found not competent to stand trial or not guilty by reason of mental incapacity. It permits the Department of Health and Human Services to adopt routine technical rules that clarify when a guardian may limit, waive or restrict a person's rights and basic protections. It permits persons receiving services to organize residential councils to enhance communication between providers and residents. It clarifies the use of the terms "restraint" and "seclusion."

The law also directs the Department of Health and Human Services and the Maine Developmental Disabilities Council, with the participation of the Disability Rights Center and the assistance of the Revisor of Statutes, to review the Maine Revised Statutes and identify the sections that use the terms "mental retardation" and "mentally retarded" and report recommendations for changes, including proposed legislation, to the Joint Standing Committee on Health and Human Services. The law authorizes the committee to submit legislation to the Second Regular Session of the 125th Legislature based on these recommendations.

LD 1558 **Resolve, To Study Allocations of the Fund for a Healthy Maine** **RESOLVE 112**

Sponsor(s)	Committee Report	Amendments Adopted
	OTP-AM MAJ OTP MIN	H-417 S-336 COURTNEY

This resolve implements one recommendation for legislative action found in the report on Fund for a Healthy Maine programs submitted by the Office of Program Evaluation and Government Accountability in October 2009. The original allocations from the fund to various health efforts were established more than 10 years ago and have

remained relatively consistent. This resolve establishes a commission tasked with reviewing whether allocations of the fund are properly aligned with the State's current public and preventive health priorities, strategies and goals and recommending adjustments to allocations as necessary.

Committee Amendment "A" (H-417)

This amendment is the majority report of the committee. It changes the membership of the resolve's Commission To Study Allocations of the Fund for a Healthy Maine. It makes a minor clarification in the section on the duties of the commission and requires state agencies to provide information and data to the commission.

Senate Amendment "A" To Committee Amendment "A" (S-336)

This amendment transfers $6,960 from the Office of Program Evaluation and Government Accountability to fund the costs of the study to be done by the Commission To Study Allocations of the Fund for a Healthy Maine.

Enacted Law Summary

Resolve 2011, chapter 112 implements one recommendation for legislative action found in the report on the Fund for a Healthy Maine programs submitted by the Office of Program Evaluation and Government Accountability in October 2009. The original allocations from the fund to various health efforts were established more than 10 years ago and have remained relatively consistent. This resolve establishes a commission tasked with reviewing whether allocations of the fund are properly aligned with the State's current public and preventive health priorities, strategies and goals and recommending adjustments to allocations as necessary. The resolve requires state agencies to provide information and data to the commission and transfers $6,960 from the Office of Program Evaluation and Government Accountability to fund the costs of the study.

LD 1581 **Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 50: Principles of Reimbursement for Intermediate Care Facilities for the Mentally Retarded, a Major Substantive Rule of the DHHS** **RESOLVE 97 EMERGENCY**

Sponsor(s)	Committee Report	Amendments Adopted
	OTP	

This resolve provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 50: Principles of Reimbursement for Intermediate Care Facilities for the Mentally Retarded, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2011, chapter 97 provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 50: Principles of Reimbursement for Intermediate Care Facilities for the Mentally Retarded, a major substantive rule of the Department of Health and Human Services.

Resolve 2011, chapter 97 was passed as an emergency measure effective June 21, 2011.

LD 1585 **Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 97, Private Non-Medical Institution Services, Appendix D: Principles of Reimbursement for Child Care Facilities, a Major Substantive Rule of the Department of Health and Human Services**

RESOLVE 98
EMERGENCY

Sponsor(s)	Committee Report	Amendments Adopted
	OTP	

This resolve provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 97, Private Non-Medical Institution Services, Appendix D: Principles of Reimbursement for Child Care Facilities, a major substantive rule of the Department of Health and Human Services.

Enacted Law Summary

Resolve 2011, chapter 98 provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 97, Private Non-Medical Institution Services, Appendix D: Principles of Reimbursement for Child Care Facilities, a major substantive rule of the Department of Health and Human Services.

Resolve 2011, chapter 98 was passed as an emergency measure effective June 21, 2011.

LD 1586 **Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Section 40, Chapters II and III: Home Health Services, a Major Substantive Rule of the Department of Health and Human Services**

RESOLVE 100
EMERGENCY

Sponsor(s)	Committee Report	Amendments Adopted
	OTP-AM	H-628

This resolve provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Section 40, Chapters II and III: Home Health Services, a major substantive rule of the Department of Health and Human Services.

Committee Amendment "A" (H-628)

This amendment approves the provisionally adopted rules as long as they are amended regarding documentation of the face-to-face encounter and to correct references to persons who receive in-home psychotropic medications.

Enacted Law Summary

Resolve 2011, chapter 100 provides for legislative review of portions of Chapter 101, MaineCare Benefits Manual, Section 40, Chapters II and III: Home Health Services, a major substantive rule of the Department of Health and Human Services. The resolve approves the provisionally adopted rules as long as they are amended regarding documentation of the face-to-face encounter and to correct references to persons who receive in-home psychotropic medications.

Resolve 2011, chapter 100 was passed as an emergency measure, effective June 22, 2011.

SUBJECT INDEX

Aging and Long-term Care

Enacted

LD 65	**Resolve, To Establish a Working Group of Stakeholders To Review the Current and Future Dementia Training Needs of Long-term Care Providers**	**RESOLVE 28 EMERGENCY**
LD 683	**An Act To Enhance Long-term Care Services for Maine Citizens**	**PUBLIC 422**
LD 739	**Resolve, To Amend the Rules Concerning Long-term Care Services To Better Support Family Caregivers**	**RESOLVE 95**
LD 859	**Resolve, To Convene a Task Force To Study Cost-effective Ways of Dealing with an Increased Population of Those Affected by Alzheimer's Disease**	**RESOLVE 58**
LD 873	**An Act To Promote the Establishment of an Adult Day Health Care Program for Veterans in Lewiston**	**PUBLIC 444**
LD 1461	**Resolve, To Implement the Recommendations of the Report on Services for Elders and Other Adults Who Need Long-term Home-based and Community-based Care**	**RESOLVE 71**

Not Enacted

LD 499	**An Act To Protect Persons in Residential Care Who Are under Limited Guardianship**	**ONTP**
LD 1106	**An Act To Lower the Cost of Health Care through Improved Energy Efficiency**	**ONTP**
LD 1270	**Resolve, To Convene a Task Force To Study Staffing Ratios and Issues for Nursing Homes and Residential Care Facilities**	**ONTP**

Certificate of Need/Capital Investment Fund

Enacted

LD 360	**An Act To Amend the Maine Certificate of Need Act of 2002**	**PUBLIC 424**

Not Enacted

LD 582	**An Act To Amend the Maine Certificate of Need Act of 2002**	**ONTP**
LD 825	**An Act To Amend the Maine Certificate of Need Act of 2002 for Nursing Facility Projects To Provide Alternative Means To Satisfy MaineCare Neutrality**	**INDEF PP**

LD 828	**An Act To Amend the Maine Certificate of Need Act of 2002 for Nursing Facility Projects**	**ONTP**

Child Care

Enacted

LD 1486	**An Act To Amend the Laws Concerning the Child Care Advisory Council and the Maine Children's Growth Council**	**PUBLIC 388**

Not Enacted

LD 127	**Resolve, To Align Child-to-staff Ratios in Child Care Facilities**	**ONTP**

Children's Services

Enacted

LD 509	**An Act To Establish Emergency Shelter Family Homes To Host Youth Referred by the Department of Corrections**	**PUBLIC 385**
LD 1504	**Resolve, To Ensure a Strong Start for Maine's Infants and Toddlers by Extending the Reach of High-quality Home Visitation**	**RESOLVE 77**

Not Enacted

LD 428	**An Act To Fund Special Education Advocacy**	**ONTP**
LD 1062	**An Act To Ensure Access to Certain Health Care Services for Children**	**ONTP**

Departmental Organization and Administration

Enacted

LD 105	**Resolve, Regarding Legislative Review of Chapter 13: Municipal Service Fee, a Major Substantive Rule of the Department of Health and Human Services**	**RESOLVE 21 EMERGENCY**
LD 258	**An Act Relating to Access to Vital Records**	**PUBLIC 58**
LD 631	**An Act To Update the Radon Registration Act**	**PUBLIC 144**
LD 1271	**An Act To Require Use of the Electronic Death Registration System**	**PUBLIC 371**
LD 1303	**An Act To Increase the Fee Paid to a Funeral Home To Transport a Body at the Request of the State Medical Examiner**	**PUBLIC 445**

Not Enacted

LD 388	**An Act To Allow a Personal Representative To Obtain a Copy of a Death Certificate and To Direct the Department of Health and Human Services To Amend Its Rules Governing Vital Records Fees**	**ONTP**
LD 1181	**An Act To Increase Access to Vital Records**	**ONTP**

Developmental Disabilities

Enacted

LD 28	**Resolve, To Improve Access to Employment Opportunities for Persons with Intellectual Disabilities and Autistic Disorders**	**RESOLVE 49 EMERGENCY**
LD 376	**Resolve, To Complete the Timely and Appropriate Redesign of Shared Living Services for Adults with Intellectual Disabilities and Autism**	**RESOLVE 30 EMERGENCY**
LD 1252	**Resolve, To Develop a Plan To Improve Public Guardianship Services to Adults with Cognitive Disabilities**	**RESOLVE 80**
LD 1548	**An Act To Update and Improve Maine's Laws Pertaining to the Rights of Persons with Intellectual Disabilities**	**PUBLIC 186**

Not Enacted

LD 1115	**An Act To Clarify the Responsibilities of the Maine Developmental Services Oversight and Advisory Board**	**Carried Over**

Disabilities

Enacted

LD 1196	**An Act To Clarify Assistance for Persons with Acquired Brain Injury**	**PUBLIC 293**

Not Enacted

LD 560	**Resolve, To Increase the Effectiveness of Accessibility Requirements for Persons with Disabilities**	**ONTP**

Health

Enacted

LD 724	**Resolve, To Create an Evidence-based Study and Comprehensive Plan for HIV and AIDS Services in Maine**	**RESOLVE 55**
LD 967	**Resolve, To Study the Cost of Providing Behavioral Health Care and Substance Abuse Services**	**RESOLVE 107**

Health Care

Enacted

LD 1159	**An Act To Amend the Identification Requirements under the Maine Medical Use of Marijuana Act**	**PUBLIC 383**

LD 1212	**An Act To Improve Hospital Reporting of MRSA and Clostridium difficile Data**	**PUBLIC 316**
LD 1296	**An Act To Amend the Maine Medical Use of Marijuana Act To Protect Patient Privacy**	**PUBLIC 407**

Not Enacted

LD 157	**An Act To Encourage Access to Health Care in Maine**	**INDEF PP**
LD 267	**An Act To Strengthen the Laws on Methicillin-resistant Staphylococcus Aureus and To Improve Health Care**	**MAJORITY (ONTP) REPORT**
LD 596	**An Act To Allow Medical Records To Contain an Option Regarding HIV Status Disclosure**	**MAJORITY (ONTP) REPORT**
LD 646	**An Act To Ensure the Safety of Children in the MaineCare Program Who Are Prescribed Antipsychotic Medications**	**Carried Over**
LD 920	**An Act To Ensure the Availability of Preventive Health Care Services for Children**	**ONTP**
LD 1029	**Resolve, To Reduce Health Care Costs through Interstate Collaboration**	**ONTP**
LD 1131	**An Act To Require Public Disclosure of Health Care Prices**	**ONTP**
LD 1224	**An Act To Fund the Screening and Early Detection Elements of the Statewide Cancer Plan**	**DIED ON ADJOURNMENT**
LD 1361	**Resolve, To Ensure Patient Safety in the Use of Certain Imaging Equipment**	**MAJORITY (ONTP) REPORT**
LD 1364	**An Act To Improve the Quality and Reduce the Cost of Health Care**	**Carried Over**
LD 1393	**An Act To Require Estimates of Patient Costs in Any Plan of Care prior to Treatment**	**ONTP**

Health Care Workforce

Enacted

LD 1023	**An Act To Authorize the Board of Licensure of Podiatric Medicine and the State Board of Veterinary Medicine To Establish a Podiatrist Health Program and a Veterinarian Health Program**	**PUBLIC 190**

Not Enacted

LD 1160	**Resolve, To Promote Education Regarding Parkinson's Disease among Health Care and Emergency Personnel**	**MAJORITY (ONTP) REPORT**

Health Information and Data

Enacted

LD 572	**An Act To Amend the Laws Governing the Maine Health Data Organization Relating to Retail Pharmacies**	**PUBLIC 233**
LD 654	**An Act To Amend the Occupational Disease Reporting Laws**	**PUBLIC 337**
LD 1331	**An Act To Increase Health Care Quality through the Promotion of Health Information Exchange and the Protection of Patient Privacy**	**PUBLIC 347**
LD 1337	**An Act To Ensure Patient Privacy and Control with Regard to Health Information Exchanges**	**PUBLIC 373**
LD 1467	**Resolve, To Evaluate the All-payor Claims Database System for the State**	**RESOLVE 109**

Health Planning

Enacted

LD 581	**An Act To Repeal the Laws Governing the Capital Investment Fund**	**PUBLIC 213**

Not Enacted

LD 757	**An Act To Add a Member to the Advisory Council on Health Systems Development**	**INDEF PP**

Hospitals

Enacted

LD 472	**An Act To Enhance the Security of Hospital Patients, Visitors and Employees**	**PUBLIC 254**

Not Enacted

LD 29	**An Act To Limit Salaries of Hospital Administrators**	**ONTP**
LD 303	**An Act To Improve Hospital Transparency**	**ONTP**
LD 466	**An Act To Require Hospitals To Adopt Employee Illness and Injury Prevention Programs and To Provide Lift Teams and To Require Reduced Workers' Compensation Insurance Rates for those Hospitals**	**ONTP**
LD 636	**An Act To Ensure Proper Health Information Management**	**MAJORITY (ONTP) REPORT**
LD 747	**An Act To Require Hospital Credit Reporting That Is Fair to Consumers**	**ONTP**
LD 806	**An Act To Provide Public Access to Price Lists of Hospitals and Ambulatory Surgical Facilities**	**Carried Over**

LD 831	**Resolve, To Protect the State from Accumulating Future Hospital Debt**	**DIED ON ADJOURNMENT**
LD 1406	**An Act Regarding the Scope of Services That May Be Provided by Pharmacies Owned by Hospitals**	**MINORITY (ONTP) REPORT**

Lead Poisoning

Enacted

LD 300	**An Act To Increase the Availability of Lead Testing for Children**	**PUBLIC 183**

Licensing

Enacted

LD 424	**An Act To Revise the Laws Governing the Licensure of Public Water System Operators**	**PUBLIC 45**
LD 703	**An Act To Amend the Laws Governing Licensure Compliance Methods for Camping Areas, Recreational Camps, Youth Camps and Eating Establishments**	**PUBLIC 375**
LD 759	**An Act To Increase Efficiency and Effectiveness in the Licensing of Certain Health and Human Services Providers**	**PUBLIC 145**
LD 869	**An Act To Clarify the State's Authority under Public Health Laws for Municipal Inspections of Establishments**	**PUBLIC 295**
LD 1177	**An Act To Make Minor Changes to Municipal Health Inspection Activities**	**PUBLIC 193**
LD 1334	**An Act To Require the Department of Health and Human Services To License Families To Provide Care for Children in Foster Care**	**PUBLIC 187**
LD 1537	**An Act To Amend Licensing and Certification Laws Administered by the Department of Health and Human Services**	**PUBLIC 257**

Not Enacted

LD 248	**An Act To Provide for a Temporary License To Operate Certain Eating and Lodging Establishments**	**LEAVE TO WITHDRAW**
LD 674	**An Act To Authorize the Department of Health and Human Services To Administratively Suspend or Revoke Facility Licenses**	**ONTP**

Medicaid/MaineCare

Enacted

LD 70	**An Act To Include Independent Practice Dental Hygienists in MaineCare**	**PUBLIC 457**

LD 346	**An Act Regarding Pharmacy Reimbursement in MaineCare**	**PUBLIC 458**
LD 443	**An Act To Require Prompt MaineCare Decisions on Care for Children with Life-threatening Conditions**	**PUBLIC 35**
LD 743	**Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual Chapter III, Section 21: Allowances for Home and Community Benefits for Members with Intellectual Disabilities or Autistic Disorder, a Major Substantive Rule of the Department of Health and Human Services**	**RESOLVE 78 EMERGENCY**
LD 790	**Resolve, To Foster Energy Efficiency Improvements and Other Needed Renovations at Residential Care Facilities Funded by MaineCare**	**RESOLVE 106 EMERGENCY**
LD 933	**Resolve, Requiring the Department of Health and Human Services To Conduct a Review of Medicaid "Any Willing Provider" Requirements**	**RESOLVE 61**
LD 1281	**Resolve, To Ensure Cost-effective Services for Persons Needing Neuropsychological Testing**	**RESOLVE 110**
LD 1485	**An Act To Promote Transparency in the Medicaid Reimbursement Process**	**PUBLIC 323**
LD 1581	**Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 50: Principles of Reimbursement for Intermediate Care Facilities for the Mentally Retarded, a Major Substantive Rule of the DHHS**	**RESOLVE 97 EMERGENCY**
LD 1585	**Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Chapter III, Section 97, Private Non-Medical Institution Services, Appendix D: Principles of Reimbursement for Child Care Facilities, a Major Substantive Rule of the Department of Health and Human Services**	**RESOLVE 98 EMERGENCY**
LD 1586	**Resolve, Regarding Legislative Review of Portions of Chapter 101, MaineCare Benefits Manual, Section 40, Chapters II and III: Home Health Services, a Major Substantive Rule of the Department of Health and Human Services**	**RESOLVE 100 EMERGENCY**

Not Enacted

LD 150	**An Act To Require Drug Testing for Medicaid Recipients with Prescriptions for Scheduled Drugs**	**ONTP**
LD 353	**An Act Regarding Agencies Contracted by the Department of Health and Human Services To Provide Regulatory Oversight and Billing Services**	**ONTP**
LD 452	**An Act To Provide MaineCare Reimbursement for Pastoral Counselors**	**ONTP**
LD 475	**An Act Regarding Private Health Insurance Purchased by the State for Recipients of MaineCare**	**ONTP**
LD 605	**An Act To Require Random Drug Testing for MaineCare Recipients**	**ONTP**

LD 612	**An Act To Provide Reimbursement for Medication Therapy Management Services**	**Carried Over**
LD 678	**Resolve, To Improve Health Outcomes for MaineCare Members in Managed Care**	**ONTP**
LD 962	**An Act To Amend the Medicaid Income Requirements To Promote Agricultural Labor**	**ONTP**
LD 1114	**An Act To Improve Preventive Dental Health Care and Reduce Future Avoidable Costs**	**Carried Over**
LD 1394	**An Act To Impose Penalties for Certain Transfers of Assets at Less Than Fair Market Value by Individuals Receiving Long-term Care Services**	**ONTP**
LD 1520	**An Act To Improve MaineCare and Promote Employment**	**MAJORITY (ONTP) REPORT**

Mental Health

Not Enacted

LD 531	**An Act To Specify Qualifications for the Director of the Office of Adult Mental Health Services within the Department of Health and Human Services**	**VETO SUSTAINED**
LD 897	**An Act To Amend the Application Process for the Progressive Treatment Program**	**Carried Over**
LD 918	**An Act To Reduce the Cost of Mental Health Services in Maine**	**ONTP**
LD 1195	**Resolve, To Create Equitable Reimbursement for Mental Health Providers**	**ONTP**
LD 1263	**An Act To Establish One State Psychiatric Hospital**	**ONTP**

Oral Health/Dental Care

Enacted

LD 1105	**Resolve, To Study Oral Health Care in Maine and Make Recommendations Regarding How To Address Maine's Oral Health Care Needs**	**RESOLVE 92**

Not Enacted

LD 146	**An Act To Prohibit the Use of Mercury Amalgams in Dental Procedures for Children, Pregnant Women and Nursing Mothers**	**ONTP**
LD 390	**Resolve, To Implement Certain Recommendations of the Governor's Task Force on Expanding Access to Oral Health Care for Maine People**	**DIED ON ADJOURNMENT**
LD 1122	**An Act To Increase Dental Benefits and Oral Health Care**	**ONTP**

LD 1290	**Resolve, To Promote Prevention Practices in Oral Health Care**	**VETO SUSTAINED**

Prescription Drugs

Enacted

LD 332	**Resolve, Regarding Legislative Review of Portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program, a Major Substantive Rule of the Department of Health and Human Services**	**RESOLVE 96 EMERGENCY**
LD 719	**An Act To Make Certain Prescription Drug Disclosure Laws Consistent with Federal Law**	**PUBLIC 461**
LD 1116	**An Act To Restore Market-based Competition for Pharmacy Benefits Management Services**	**PUBLIC 443**
LD 1429	**An Act To Amend the Laws Governing Prescription Monitoring Information**	**PUBLIC 218**
LD 1435	**An Act To Adopt the Interstate Prescription Monitoring Program Compact**	**PUBLIC 217**
LD 1501	**Resolve, To Reduce Opioid Overprescription, Overuse and Abuse**	**RESOLVE 81**

Not Enacted

LD 774	**An Act To Allow Access to Pseudoephedrine by Prescription Only**	**ONTP**
LD 887	**An Act To Include Medicinal Marijuana Patients in the Controlled Substances Prescription Monitoring Program**	**MAJORITY (ONTP) REPORT**
LD 1166	**An Act To Improve Electronic Prescribing**	**ONTP**
LD 1487	**An Act To Assist Maine Pharmacies**	**ONTP**

Public Assistance

Not Enacted

LD 75	**Resolve, Directing the Department of Health and Human Services To Amend Its Rules Governing Electronic Benefits Transfer Cards**	**ONTP**
LD 193	**An Act To Require an Applicant for State Assistance To Show Proof of Legal Residence in the United States and Proof of Residency for at Least the Previous 90 Days in This State**	**ONTP**
LD 539	**An Act To Build Accountability into the General Assistance Laws**	**ONTP**
LD 735	**An Act To Allow the Use of Electronic Benefits Transfer Funds at Farmers' Markets**	**MAJORITY (ONTP) REPORT**

LD 1001	**An Act To Assist Persons Who May Be Eligible for Social Security Disability Assistance**	**DIED ON ADJOURNMENT**
LD 1039	**Resolve, To Create a Working Group To Make Recommendations To Improve the Efficiency, Accountability and Proper Administration of Municipal General Assistance Programs**	**DIED ON ADJOURNMENT**
LD 1294	**An Act To Impose a 90-day Residency Requirement in Order To Receive State Assistance**	**ONTP**
LD 1370	**An Act To Amend the Laws Governing General Assistance Programs**	**ONTP**
LD 1431	**An Act To Establish Standards for the Administration of General Assistance Programs**	**ONTP**
LD 1511	**An Act To Impose a Lifetime Maximum on the Receipt of Welfare Benefits**	**INDEF PP**

Public Health

Enacted

LD 121	**An Act To Amend the Laws Regarding Public Health Infrastructure**	**PUBLIC 306**
LD 286	**An Act To Allow the Operation of Crematoriums at Oak Grove Cemetery and the Kelley Family Cemetery**	**P & S 10 EMERGENCY**
LD 435	**An Act To Improve the Rate of Organ and Tissue Donation by Establishing the Organ Donation Advisory Council**	**PUBLIC 168 EMERGENCY**
LD 702	**An Act To Prevent HIV Transmission from a Pregnant Mother to a Child**	**PUBLIC 229**
LD 1073	**Resolve, To Encourage the Use of Defibrillators in Health Clubs and Gyms**	**RESOLVE 50**
LD 1407	**An Act To Establish the Maine Wild Mushroom Harvesting Certification Program**	**PUBLIC 412**
LD 1490	**An Act To Amend the Laws Regarding Custody of the Remains of Deceased Persons**	**PUBLIC 387**
LD 1558	**Resolve, To Study Allocations of the Fund for a Healthy Maine**	**RESOLVE 112**

Not Enacted

LD 492	**An Act To Ensure That Children's Products Are Free of Cadmium**	**INDEF PP**
LD 547	**Resolve, Directing the Maine Center for Disease Control and Prevention To Conduct a Review of Wood Smoke Laws**	**VETO SUSTAINED**
LD 586	**An Act To Include the Record of Emergency Data Form as an Acceptable Instrument for the Disposition of Remains of a Service Member**	**ONTP**

LD 694	**An Act To Encourage Transparency in Disclosing the Ingredients in Vaccinations for Children to Parents and Guardians**	**MAJORITY (ONTP) REPORT**
LD 936	**An Act To Conform Maine Menu Labeling Laws to Federal Standards**	**Carried Over**
LD 941	**An Act To Prohibit Mandatory Immunizations**	**MAJORITY (ONTP) REPORT**

Tobacco Sale and Use

Enacted

LD 216	**Resolve, Regarding MaineCare Tobacco Treatment and Smoking Cessation Benefits**	**RESOLVE 24**

Not Enacted

LD 589	**An Act To Increase the Legal Age To Purchase, Use or Sell Tobacco Products**	**MAJORITY (ONTP) REPORT**
LD 1119	**An Act To Amend the Laws Governing the Sale of Certain Tobacco Products**	**MAJORITY (ONTP) REPORT**
LD 1230	**An Act To Prohibit Smoking in Private Clubs Except in Separate Enclosed Areas**	**MAJORITY (ONTP) REPORT**

LD INDEX

LD #		Page #
LD 28	----------	Page 1
LD 29	----------	Page 1
LD 65	----------	Page 1
LD 70	----------	Page 2
LD 75	----------	Page 3
LD 105	----------	Page 3
LD 121	----------	Page 4
LD 127	----------	Page 4
LD 146	----------	Page 4
LD 150	----------	Page 5
LD 157	----------	Page 5
LD 193	----------	Page 5
LD 216	----------	Page 5
LD 248	----------	Page 6
LD 258	----------	Page 6
LD 267	----------	Page 7
LD 286	----------	Page 7
LD 300	----------	Page 8
LD 303	----------	Page 9
LD 332	----------	Page 9
LD 346	----------	Page 9
LD 353	----------	Page 10
LD 360	----------	Page 11
LD 376	----------	Page 13
LD 388	----------	Page 13
LD 390	----------	Page 14
LD 424	----------	Page 14
LD 428	----------	Page 15
LD 435	----------	Page 15
LD 443	----------	Page 15
LD 452	----------	Page 16
LD 466	----------	Page 16
LD 472	----------	Page 16
LD 475	----------	Page 17
LD 492	----------	Page 17
LD 499	----------	Page 18
LD 509	----------	Page 18
LD 531	----------	Page 19
LD 539	----------	Page 19
LD 547	----------	Page 19
LD 560	----------	Page 20
LD 572	----------	Page 20
LD 581	----------	Page 21
LD 582	----------	Page 21
LD 586	----------	Page 22
LD 589	----------	Page 22
LD 596	----------	Page 22
LD 605	----------	Page 23
LD 612	----------	Page 23
LD 631	----------	Page 23
LD 636	----------	Page 24
LD 646	----------	Page 24
LD 654	----------	Page 24
LD 674	----------	Page 25

LD 678 ---------- Page 25
LD 683 ---------- Page 26
LD 694 ---------- Page 26
LD 702 ---------- Page 27
LD 703 ---------- Page 27
LD 719 ---------- Page 28
LD 724 ---------- Page 28
LD 735 ---------- Page 29
LD 739 ---------- Page 29
LD 743 ---------- Page 30
LD 747 ---------- Page 30
LD 757 ---------- Page 31
LD 759 ---------- Page 31
LD 774 ---------- Page 32
LD 790 ---------- Page 32
LD 806 ---------- Page 33
LD 825 ---------- Page 33
LD 828 ---------- Page 34
LD 831 ---------- Page 35
LD 859 ---------- Page 35
LD 869 ---------- Page 36
LD 873 ---------- Page 36
LD 887 ---------- Page 37
LD 897 ---------- Page 37
LD 918 ---------- Page 37
LD 920 ---------- Page 38
LD 933 ---------- Page 38
LD 936 ---------- Page 38
LD 941 ---------- Page 39
LD 962 ---------- Page 39
LD 967 ---------- Page 39
LD 1001 ---------- Page 40
LD 1023 ---------- Page 40
LD 1029 ---------- Page 41
LD 1039 ---------- Page 41
LD 1062 ---------- Page 42
LD 1073 ---------- Page 42
LD 1105 ---------- Page 43
LD 1106 ---------- Page 44
LD 1114 ---------- Page 44
LD 1115 ---------- Page 44
LD 1116 ---------- Page 45
LD 1119 ---------- Page 45
LD 1122 ---------- Page 46
LD 1131 ---------- Page 46
LD 1159 ---------- Page 46
LD 1160 ---------- Page 47
LD 1166 ---------- Page 47
LD 1177 ---------- Page 48
LD 1181 ---------- Page 49
LD 1195 ---------- Page 49
LD 1196 ---------- Page 49
LD 1212 ---------- Page 50
LD 1224 ---------- Page 51

LD 1230	----------	Page 51
LD 1252	----------	Page 51
LD 1263	----------	Page 52
LD 1270	----------	Page 52
LD 1271	----------	Page 53
LD 1281	----------	Page 53
LD 1290	----------	Page 54
LD 1294	----------	Page 54
LD 1296	----------	Page 54
LD 1303	----------	Page 57
LD 1331	----------	Page 57
LD 1334	----------	Page 58
LD 1337	----------	Page 59
LD 1361	----------	Page 60
LD 1364	----------	Page 60
LD 1370	----------	Page 61
LD 1393	----------	Page 61
LD 1394	----------	Page 62
LD 1406	----------	Page 62
LD 1407	----------	Page 62
LD 1429	----------	Page 63
LD 1431	----------	Page 64
LD 1435	----------	Page 64
LD 1461	----------	Page 64
LD 1467	----------	Page 65
LD 1485	----------	Page 66
LD 1486	----------	Page 66
LD 1487	----------	Page 67
LD 1490	----------	Page 67
LD 1501	----------	Page 68
LD 1504	----------	Page 68
LD 1511	----------	Page 69
LD 1520	----------	Page 69
LD 1537	----------	Page 70
LD 1548	----------	Page 71
LD 1558	----------	Page 71
LD 1581	----------	Page 72
LD 1585	----------	Page 73
LD 1586	----------	Page 73