

# First Regular Session--129th Maine Legislature

## Maine Hospital Association Legislative Report

### 7/10/2019

#### **LD 1 An Act To Protect Health Care Coverage for Maine Families**

**Sponsor:** Pres. Jackson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070605>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 1/29/2019 1:00 PM

**Final Status:** PL 2019 CH 5

As enacted, the law codifies in state statute various consumer protections related to health insurance coverage included in the federal Affordable Care Act.

In Part A, the amendment does the following.

1. It makes clear that carriers must meet guaranteed issue requirements similar to those required by federal law.
  2. It makes clear that health plans may not impose any preexisting condition exclusion on an enrollee. The amendment does permit a carrier to restrict enrollment in individual health plans to open enrollment and special enrollment periods established in rule.
  3. It clarifies that carriers may not establish lifetime or annual limits on the dollar value of benefits unless the plan is grandfathered under the federal ACA and does not impose new limits or reduce existing limits.
  4. It allows children, until age 26, to remain on their parents' health insurance policy.
  5. It changes the maximum rate differential due to age that may be filed by the carrier to 3 to 1 and requires that rates that vary based on age do so according to a uniform age rating curve.
  6. It provides that if a carrier varies premium rates based on family membership, the premium rate must equal the sum of the premiums for each individual in the family.
  7. It prohibits a carrier from varying premium rates based on tobacco use for individuals who are enrolled in an evidence-based tobacco cessation program approved by the FDA.
  8. It makes clear that the minimum medical loss ratio in the individual market is 80% without exception.
  9. It adds language to prohibit rescissions of coverage consistent with requirements under federal law.
  10. It makes changes to the timelines and requirements for determinations by a carrier of coverage for prescription drugs consistent with federal law.
  11. It requires carriers to provide information about the health plans offered by the carrier in a standardized manner that is substantially similar to that required by the ACA.
  12. It prohibits a health plan from reducing or terminating benefits for an ongoing course of treatment, including coverage of a prescription drug, during the course of an appeal of a determination of coverage.
- Part B requires that, at a minimum, individual and small group health plans be consistent with the ACA with respect to essential health benefits and annual limits on cost sharing.
- Part C adopts nondiscrimination provisions consistent with similar requirements in federal law and rule.
- Part D makes changes to current requirements in state law related to mental health parity consistent with similar requirements in federal law and regulations.

#### **LD 3 An Act To Enhance and Increase the Availability of Mental Health Providers in Maine**

**Sponsor:** Rep. Hardy <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070613>

**Innovation, Development, Economic Advancement and BCommittee Status:**

**Public Hearing:** 4/4/2019 1:00 PM

**Final Status:** DEAD

This bill establishes and provides funding for the Maine Mental Health Providers Loan Repayment Program to be administered by the Finance Authority of Maine. Under the program, all social workers licensed by the State Board of Social Worker Licensure and all counselors licensed by the Board of Counseling Professionals Licensure may apply for student loan repayment assistance, as long as the applicants agree to practice for 5 years in one of a list of underserved practice areas in the State, including in a hospital. The bill also repeals the currently unfunded Social Work Education Loan Repayment Program in the Maine Revised Statutes.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 20 An Act To Provide Coverage for Abortion Services for MaineCare Members**

**Sponsor:** Rep. Reckitt <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070623>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill requires the Department of Health and Human Services to provide coverage to a MaineCare member for legal abortion services. The bill provides that abortion services that are not approved Medicaid services must be funded by the State. The bill also directs the Department of Health and Human Services to adopt rules no later than March 1, 2020.

## **LD 21 An Act To Prohibit the Use of Electroconvulsive Therapy for Certain Populations**

**Sponsor:** Rep. Reckitt <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070625>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill prohibits the use of electroconvulsive therapy on a child under 18 years of age or a person over 65 years of age or a person who is pregnant.

## **LD 29 Resolve, To Implement the Recommendations of the Task Force To Address the Opioid Crisis in the State by Establishing a Work Group To Develop Educational Programming for Prevention of Substance Use and Substance Use Disorders among Youth and Adolescents**

**Sponsor:** Rep. McCreight <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070665>

**Education and Cultural Affairs**

**Committee Status:** ONTP

**Public Hearing:** 1/30/2019 1:00 PM

**Final Status:** DEAD

This resolve is based on recommendations of the Task Force To Address the Opioid Crisis in the State, which submitted its report to the Legislature in December 2017. The resolve requires the Department of Education to establish a work group to evaluate existing substance use prevention programs targeting school-age children, investigate prevention programs that have proven effective in other areas of the United States or in other countries, identify funding resources and determine how prevention programs should be incorporated into education curricula. The work group must include representatives of educational, law enforcement and public health organizations. The department is required to submit a report of the findings of the work group no later than January 1, 2020 to the joint standing committee of the Legislature having jurisdiction over education matters.

## **LD 30 An Act To Improve Health Care Data Analysis**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070666>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:**

**Final Status:** CARRY OVER

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to enact measures designed to improve the State's capacity to use data regarding health care costs and health care systems. The State's ability to better analyze and use data regarding health care utilization and health care quality will serve to inform the State's health care policy. This concept draft is the result of the work of the Task Force on Health Care Coverage for All that worked over the past two years looking at various health care reform ideas. (MHA and hospitals were represented on the Task Force). The Task Force members who supported this concept were not able to fully articulate how the data should be used or by whom. As a result, the bill is now only a concept draft.



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## **LD 37 An Act To Allow for the Sale of Nonprescription Drugs through Vending Machines**

**Sponsor:** Rep. Terry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070657>

**Health Coverage, Insurance and Financial Services**

**Committee Status:**

**Public Hearing:** 2/5/2019 1:00 PM

**Final Status:** PL 2019, CH 454

This law creates a limited exception to the prohibition against the sale of drugs by vending machines to allow for the sale of nonprescription drugs by vending machines. The machines must be regulated and licensed by the Maine Board of Pharmacy.

## **LD 40 Resolve, To Establish the Commission To Study Children's Mental Health**

**Sponsor:** Rep. Madigan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070660>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/24/2019 9:00 AM

**Final Status:** RESOLVE 2019, CH 96

This resolve establishes the Commission To Study Children's Mental Health to study the mental health of children in the State and federal and state laws, regulations, rules and policies governing the diagnosis and treatment of children with mental health issues.

## **LD 45 An Act To Amend the Law Regarding Maine's Background Check Center**

**Sponsor:** Rep. Hymanson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070660>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** DEAD

This bill grants the Department of Health and Human Services the authority to request state and national criminal history records, including fingerprint-based criminal history records, for direct access workers undergoing a background check under the Maine Background Check Center Act.

## **LD 46 An Act To Establish a Substance Use Disorder Clinic at the Cumberland County Jail**

**Sponsor:** Rep. Brennan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070681>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/1/2019 1:00 PM

**Final Status:** APP TBL CO

This bill provides \$250,000 to create a substance use disorder clinic at the Cumberland County jail.

## **LD 51 An Act To Implement the Recommendations of the Task Force on Health Care Coverage for All of Maine**

**Sponsor:** Rep. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070678>

**Health Coverage, Insurance and Financial Services**

**Committee Status:**

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** CARRY OVER

This concept draft proposes to implement the recommendations of the Task Force on Health Care Coverage for All of Maine.



## **LD 52 An Act To Provide an Affordable and Accessible Health Care System for all Residents of Maine**

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070679>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** DEAD

This concept draft proposes to establish a health care system in the State that will be simple and efficient for all consumers and providers. The bill proposes to provide all Maine residents with access to an affordable health benefit plan covering essential health benefits. The bill proposes to create the Health Care Trust, which will have authority to determine essential health care benefits, to negotiate with providers, to reimburse providers for the costs of providing care at negotiated rates and to manage the financing mechanisms for the trust. All Maine residents will be eligible to enroll in the trust on a voluntary basis. Those residents currently eligible for MaineCare or other public coverage will be automatically enrolled; MaineCare and other public coverage programs will be replaced by the trust's health care coverage. The bill proposes to use several funding sources to pay for the costs of the trust and for coverage of all Maine residents enrolled in the trust for coverage, including payroll taxes, transaction taxes and available federal funding. The Health Care Trust will be administered by a health care administrator and overseen by a board of trustees. In addition, a stakeholder advisory board will provide input and guidance for the trust.

## **LD 66 An Act To Prohibit Hospitals from Discussing Alternative Payment Options with Hospitalized Patients**

**Sponsor:** Sen. Lawrence <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070729>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 1/29/2019 1:00 PM

**Final Status:** DEAD

This bill prohibits a hospital from communicating with a patient regarding alternative payment options at any time during a patient's hospitalization unless that communication is requested by the patient. The bill permits communication with a patient prior to or upon the patient's admission to the hospital or at the time of discharge.

## **LD 69 An Act To Provide Economic Security to Maine Families through the Creation of a Paid Family Medical Leave System**

**Sponsor:** Sen. Hebrig <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070734>

**Labor and Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill creates a paid family medical leave program, patterned after the unpaid family medical leave program existing in current law but requiring a contribution from an eligible employee, or a self-employed person on a voluntary basis, of no more than 0.5% of the employee's or self-employed person's wages or earnings. The program requires employers to deduct the contributions from employee paychecks and requires the employers and self-employed persons to submit contributions to the Department of Labor, Bureau of Unemployment Compensation, which is charged with administering the program. The program pays benefits of up to 66% of an employee's wages or self-employed person's earnings, capped at the same maximum amount as unemployment benefits for leave taken by the employee or self-employed person for various family-related medical issues. The bill makes participation optional for employers that employ fewer than 15 employees. The bill also directs the Department of Labor to develop an implementation plan dealing with staffing, technology, start-up expenses, rulemaking and scheduling to begin the program on its effective date of October 1, 2020.



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## **LD 73 An Act To Provide an Income Tax Credit for Certain Student Loan Repayments**

**Sponsor:** *Sen. Pouliot* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070760>

**Taxation**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** APP TBL CO

This bill provides an income tax credit for certain student loan repayments made by the Finance Authority of Maine or an entity managed or administered by the Finance Authority of Maine. The credit is equal to the amount an individual is required to include in federal adjusted gross income as the result of student loan payments made directly to the individual's student loan lender by the Finance Authority of Maine, or an entity managed or administered by the Finance Authority of Maine, for residents of the State employed by a business located in the State multiplied by the individual's highest federal marginal income tax rate.

## **LD 75 An Act to Protect Earned Pay**

**Sponsor:** *Sen. Hebrig* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070762>

**Labor and Housing**

**Committee Status:** APP TBL

**Public Hearing:** 1/30/2019 11:00 AM

**Final Status:** PL 2019, CH 419

Under current law, a person who receives or is scheduled to receive remuneration in the form of vacation pay in excess of 4 weeks' wages or holiday pay is disqualified from receiving unemployment benefits for the week that remuneration is due. This law removes those disqualifications.

## **LD 78 An Act To Facilitate Access to the MaineCare Family Planning Benefit**

**Sponsor:** *Rep. McCreight* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070765>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/25/2019 9:30 AM

**Final Status:** PL 2019, CH 420

This law establishes presumptive eligibility for individuals who are likely to qualify for the family planning benefit and requires the Department of Health and Human Services to provide for presumptive eligibility.

## **LD 80 An Act To Create the Department of Substance Use Disorder Services**

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070768>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/1/2019 1:00 PM

**Final Status:** DEAD

This bill establishes the Department of Substance Use Disorder Services as a separate cabinet-level department. It removes from the Department of Health and Human Services, and transfers to the Department of Substance Use Disorder Services, functions and services for individuals with substance use disorders, prevention programs and administrative assistance for the Substance Use Disorder Services Commission.



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## **LD 84 Resolve, Directing the Department of Health and Human Services To Allow Spouses To Provide Home and Community-based Services to Eligible MaineCare Members**

**Sponsor:** Rep. Corey <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070777>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/7/2019 1:00 PM

**Final Status:** RESOLVE 2019, CH 102

This resolve requires the Department of Health and Human Services to submit a request to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to amend the current federal waiver so that eligible members receiving home and community-based services (Section 19) will be able to receive services provided by spouses who are employed as personal support specialists to provide those services.

## **LD 100 Resolve, Regarding Legislative Review of Portions of Chapter 270: Uniform Reporting System for Quality Data Sets, a Major Substantive Rule of the Maine Health Data Organization**

**Sponsor:** Emergency <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070798>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTP

**Public Hearing:** 2/19/2019 1:00 PM

**Final Status:** RESOLVE 2019 CH 9

This resolve provides for legislative review of portions of Chapter 270: Uniform Reporting System for Quality Data Sets, a major substantive rule of the Maine Health Data Organization. Fairly standard annual list of additions, changes and deletions to the quality data hospitals are required to submit to MHDO. MHDO held public hearing in September on the proposed rules.

## **LD 109 An Act To Create a Public Health Insurance Option**

**Sponsor:** Rep. Berry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070857>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** DEAD

This bill makes any legally domiciled resident of the State eligible for coverage under the group health plan available to state employees and other eligible persons. The bill permits any resident enrolling in coverage under this provision to do so during an open enrollment period.

The bill also adds a reporting requirement to track the experience of those persons enrolling in coverage under the group health plan and the relative effect of that experience on the overall costs of the group health plan.

## **LD 110 An Act Regarding Credit Ratings Related to Overdue Medical Expenses**

**Sponsor:** Rep. Johansen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070861>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:** 2/5/2019 1:00 PM

**Final Status:** PL 2019, CH 77

As enacted, this law prohibits a consumer reporting agency from reporting debt from medical expenses on a consumer's consumer report when the date of the first delinquency on the debt is less than 180 days prior to the date that the debt is reported.

It requires that a consumer reporting agency remove medical debt on a consumer's consumer report once the credit reporting agency receives information that the debt has been settled in full or paid in full.

If a medical debt is reported to a consumer reporting agency, it requires the consumer reporting agency to report that debt in the same manner as debt related to a consumer credit transaction is reported as long as the consumer is making regular, scheduled periodic payments toward the debt as agreed upon by the consumer and medical provider.



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**LD 122 An Act To Prohibit an Employer from Asking a Prospective Hire about the Person's Compensation History until after a Job Offer Is Made**

**Sponsor:** Rep. Bryant <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070874>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 2/6/2019 10:00 AM

**Final Status:** DEAD

This bill prohibits an employer from inquiring about a prospective employee's compensation history until after an offer of employment that includes all terms of compensation has been negotiated and made to the prospective employee. The bill also prohibits an employer from requiring that a prospective employee's compensation history meet certain criteria. An employer that violates this provision is subject to a fine of not less than \$100 and not more than \$500 per violation and is also subject to a civil action.

**LD 132 An Act To Eliminate Insurance Rating Based on Age, Geographic Location or Smoking History and To Reduce Rate Variability Due to Group Size**

**Sponsor:** Rep. Brooks <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070883>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/2/2019 1:30 PM

**Final Status:** DEAD

This bill prohibits insurance carriers providing individual health plans or small group health plans from varying premium rates based on age, geographic location or tobacco use on or after January 1, 2020. The bill also reduces the variation based on group size to 1.5 to 1 for small group plans over time

**LD 142 An Act To Increase Funding for the Fund for a Healthy Maine To Reduce Smoking**

**Sponsor:** Rep. Gramlich <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070894>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/27/2019 12:00 PM

**Final Status:** DEAD

This bill takes \$15M in funding from the "Medical Care - Payments to Providers" account from which the bills of hospitals and other providers are paid and shifts that funding to tobacco cessation services. It back-fills that cut with \$15M in General Fund funding.

**LD 159 An Act To Require Cameras in Ambulances When a Patient Is Being Transported**

**Sponsor:** Sen. Miramant <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070900>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:** 2/6/2019 10:00 AM

**Final Status:** DEAD

This bill requires that, whenever an ambulance transports a patient from the scene of an emergency or from a hospital or other health care facility to another place, the ambulance must be equipped with video recording equipment that is in operation for the duration of the transport and that is producing a clear video record of the care provided to the patient. In accordance with applicable federal and state law, the video records are to be maintained as confidential by the ambulance service operator and, if applicable, by the Emergency Medical Services' Board and the Department of Public Safety.



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## **LD 177 Resolve, To Improve Access to Bariatric Care**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070926>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/7/2019 1:00 PM

**Final Status:** APP TBL CO

This bill requires the Department of Health and Human Services to provide 16 new specialized bariatric care beds in one or more nursing facilities to serve individuals with a body mass index greater than 40.

## **LD 181 An Act To Provide Funding to the Department of Health and Human Services To Support Free Health Clinics in the State**

**Sponsor:** Rep. Farnsworth <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070915>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/7/2019 1:00 PM

**Final Status:** APP TBL CO

This bill provides \$100K to support free health clinics in the State.

## **LD 189 An Act To Amend the Laws Governing Long-term Care Insurance**

**Sponsor:** Rep. Hutchins <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070931>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 2/5/2019 1:00 PM

**Final Status:** DEAD

This bill prohibits an insurer from delaying or withholding payment of a claim for long-term care insurance benefits by requiring that an insured or the insured's representative request payment of the claim by telephone as a prerequisite for releasing funds to pay the claim for benefits if the insurer has received all necessary written documentation and information to support payment of the claim.

## **LD 215 An Act To Increase the Reimbursement Rate for Ambulance Service Paid by the Department of Corrections**

**Sponsor:** Rep. Pluecker <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071006>

**Criminal Justice and Public Safety**

**Committee Status:** APP TBL

**Public Hearing:** 2/25/2019 10:00 AM

**Final Status:** APP TBL CO

This bill requires the Department of Corrections, or its contracted medical provider, to pay to a provider of ambulance services 225% of the allowable reimbursement under the MaineCare program for ambulance services provided for a person residing in a correctional or detention facility. [MHA believes an amended version of the bill will be filed at the public hearing.]



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## **LD 227 An Act To Strengthen Maine's Public Health Infrastructure**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070982>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/3/2019 1:00 PM

**Final Status:** CARRY OVER

This bill is a concept draft pursuant to Joint Rule 208. It proposes to enact measures designed to strengthen the State's public health infrastructure by:

1. Identifying community-level geographic regions where essential public health services, including competent and qualified comprehensive community health coalitions, can be funded equitably;
2. Ensuring that basic and essential public health services be delivered in each public health district and tribal health district;
3. Identifying emerging nonclinical public health workers, including community health workers, community paramedics, recovery coaches and resiliency coaches, who can strengthen the efficiency and effectiveness of public health service delivery;
4. Facilitating, when possible, the integration and collaboration of public and private public health professionals with public safety professionals and emergency preparedness professionals; and
5. Enabling the operation of public health professionals, public safety professionals and emergency preparedness professionals as a cohesive and coordinated public health team.

## **LD 230 An Act To Improve Access to Preventive, Cost-saving Dental Services**

**Sponsor:** Rep. Martin <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070987>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 2/27/2019 9:00 AM

**Final Status:** DEAD

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to establish a managed care dental services program within the MaineCare program. It also proposes to provide coverage under the MaineCare program for adult preventive dental services and comprehensive dental services.

## **LD 231 An Act To Improve Public Health by Maximizing Federal Funding Opportunities**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070989>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/20/2019 1:00 PM

**Final Status:** CARRY OVER

This bill, a concept draft, proposes to increase federal funding to improve the State's public health outcomes and workforce by designating the Maine Public Health Institute within the Muskie School of Public Service as an agent of DHHS for the purpose of applying for federal funds to support public health research and programming. To provide guidance to the Maine Public Health Institute in carrying out this duty, this bill would establish an advisory board composed of officials from the department, including the Director of the Maine CDC, and representatives of statewide public health organizations and care providers.



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**LD 232 An Act To Change the Process by Which Designated Nonstate Mental Health Institutions Petition the District Court To Admit Certain Patients to a Progressive Treatment Program**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070990>

**Health & Human Services**

**Committee Status:** TABLED

**Public Hearing:** 4/24/2019 9:00 AM

**Final Status:** CARRY OVER

This bill changes the process by which a petition to the District Court is made to admit a patient at a designated nonstate mental health institution to a progressive treatment program. Current law provides that the superintendent or chief administrative officer of a psychiatric hospital, including a designated nonstate mental health institution, directly petition the District Court. This bill provides that the nonstate institution may request the DHHS Commissioner to file the petition on the institutions behalf.

**LD 239 Resolve, Directing the Department of Health and Human Services To Explore the Development of a Behavioral Health Unit at the Cumberland County Jail**

**Sponsor:** Rep. Farnsworth <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071001>

**Health & Human Services**

**Committee Status:** OTP

**Public Hearing:** 4/19/2019 9:00 AM

**Final Status:** RESOLVE 2019, CH 43

This resolve directs DHHS and the Cumberland County Sheriff's Office to jointly explore the development of a behavioral health unit at the Cumberland County Jail to determine the competency of inmates to stand trial.

**LD 249 An Act To Ensure Protection of Patients in Medical Reviews by Health Insurance Carriers**

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070967>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 3/14/2019 1:00 PM

**Final Status:** PL 2019, CH 171

The law requires that appeals of a health insurance carrier's adverse health care treatment decision be conducted by a licensed health care practitioner who is board certified in the same or similar specialty as typically manages the medical condition, procedure or treatment under review and whose compensation does not directly or indirectly depend upon the quantity, type or cost of the medical condition, procedure or treatment the practitioner approves or denies on behalf of a carrier.

**LD 252 RESOLUTION, Proposing an Amendment to the Constitution of Maine To Prohibit New or Increased Fees or Taxes by Means of Direct Initiatives of Legislation**

**Sponsor:** Sen. Timberlake <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070958>

**Veterans & Legal Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This resolution proposes to amend the Constitution of Maine to prohibit the imposition of any new or increased taxes or fees through the direct initiative process.



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**LD 255 Resolution, Proposing an Amendment to the Constitution of Maine To Require That Signatures on a Direct Initiative of Legislation Come from Each Congressional District**

**Sponsor:** Sen. Farrin <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280070962>

**Veterans & Legal Affairs**

**Committee Status:**

**Public Hearing:** 3/4/2019 10:30 AM

**Final Status:** DEAD

This resolution proposes to amend the Constitution of Maine to require that the signatures on a petition to directly initiate legislation be of voters from each of the State's 2 congressional districts and that the number of signatures from each congressional district be not less than 10% of the total vote for Governor cast in that congressional district in the previous gubernatorial election. This resolution provides that, if the required votes are cast in favor of the proposed amendment to the Constitution, the proposed amendment becomes part of the Constitution on March 1, 2020 instead of on the date of the Governor's proclamation

**LD 264 An Act Regarding the Taking of a Blood Sample from an Operator of a Motor Vehicle Involved in a Fatal Accident**

**Sponsor:** Sen. Cyrway <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071019>

**Criminal Justice & Public Safety**

**Committee Status:** OTPA

**Public Hearing:**

**Final Status:** PL 2019, CH 189

The law makes grammatical changes to clarify the law providing immunity from liability for an act done or omitted in collecting or withdrawing specimens of blood at the request of a law enforcement officer and extends that immunity to an emergency medical services person, a law enforcement officer, an emergency medical service and a law enforcement agency.

**LD 266 An Act To Eliminate the 2-year Limit on MaineCare Coverage for Approved Drugs for Opioid Use Disorder**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071021>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill repeals the 24-month limit on MaineCare coverage or reimbursement for buprenorphine and naloxone combination drugs, also known as Suboxone, for the treatment of addiction to opioids

**LD 267 An Act To Amend the Laws Governing the Practice of Pharmacy**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071022>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 2/14/2019 1:00 PM

**Final Status:** DEAD

This bill specifies that the practice of pharmacy is the provision of health care services.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## LD 278 An Act Regarding Pay Equality

**Sponsor:** *Sen. Breen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071033>

**Labor & Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 35

AS ENACTED, the law prohibits an employer from inquiring about a prospective employee's compensation history until after an offer of employment that includes all terms of compensation has been negotiated and made to the prospective employee. It creates an exception for compensation history sought pursuant to any federal or state law that specifically requires the disclosure or verification of compensation history for employment purposes, for example, when such information is related to economic development programs that specifically create employment opportunities for persons with low incomes. An employer that violates this provision is subject to a fine of not less than \$100 and not more than \$500 per violation and is also subject to a civil action that may be brought by or on behalf of an affected employee or applicant by the Department of Labor or the affected employee or applicant.

The law also amends the Maine Human Rights Act to provide that evidence of unlawful employment discrimination includes an employer's seeking information about a prospective employee's compensation history before an offer of employment, including all terms of compensation, to the applicant has been made. It also creates an exception for compensation history sought pursuant to any federal or state law that specifically requires the disclosure or verification of compensation history for employment purposes.

## LD 284 An Act To Improve Care Provided to Forensic Patients

**Sponsor:** *Rep. Gattine* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071037>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** CARRY OVER

This bill establishes a 21-bed residential forensic step-down facility, which provides treatment of forensic patients who no longer require hospital level care but cannot be safely treated in a community setting, in Augusta in the Capitol Area. It provides that the facility must be licensed and that the Department of Health and Human Services must adopt rules that govern its operations. It creates an advisory committee to participate in and guide the planning process for the facility. It provides that the transfer of a forensic patient into the forensic step-down facility must be approved by a court of appropriate jurisdiction.

## LD 287 An Act To Impose on Mental Health Professionals a Duty To Warn and Protect

**Sponsor:** *Rep. Tepler* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071040>

**Judiciary**

**Committee Status:** OTPA

**Public Hearing:** 4/10/2019 9:00 AM

**Final Status:** PL 2019, CH 317

This law imposes on certain mental health professionals a duty to warn and protect if a patient or client is likely to engage in physical violence that poses a serious risk of harm to self or others. The duty to warn and protect applies to osteopathic physicians, physicians, psychologists, alcohol and drug counselors, social workers and counseling professionals. There is also limited immunity for compliance with the law.

## LD 289 An Act To Prohibit the Use of Certain Disposable Food Service Containers

**Sponsor:** *Rep. Zeigler* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071044>

**Environment & Natural Resources**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 62

Beginning January 1, 2020, this law prohibits the sale or distribution in the State of disposable food service containers composed in whole or in part of polystyrene foam. The bill requires the Department of Environmental Protection to adopt rules to implement these statutory provisions. As enacted, the law excluded hospitals at MHA's request.



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**LD 291 An Act Regarding Responsibility for the Duplicative or Incorrect Payment of Health Insurance Claims**

**Sponsor:** Rep. Riley <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071075>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:** 2/12/2019 1:00 PM

**Final Status:** PL 2019, CH 30

As an enacted, this law requires an insurer who overpays a claim to attempt to retroactively collect that overpayment directly from the provider, not the insured, unless the insured was directly paid by the insurer for the services identified in the claim and the insured did not forward payment to the provider.

**LD 294 An Act To Require the Fiscal Impact Estimate of a Direct Initiative of Legislation To Be Included on the Ballot**

**Sponsor:** Rep. Morris <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071054>

**Veterans & Legal Affairs**

**Committee Status:** ONTP

**Public Hearing:** 2/25/2019 10:00 AM

**Final Status:** CO

This bill provides that a ballot for a statewide vote on a direct initiative must include a summary of the fiscal impact estimate prepared by the Office of Fiscal and Program Review for that direct initiative.

**LD 297 An Act To Strengthen Brain Injury Resources for Underserved Populations, Including Opioid Overdose Brain Injury Survivors**

**Sponsor:** Rep. Hepler <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071060>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2019 9:00 AM

**Final Status:** PL 2019, CH 488

This law authorizes the Department of Health and Human Services to enter into contracts with organizations representing individuals with a brain injury and their families, bringing together state and national expertise to provide core brain injury support for underserved populations.

**LD 303 An Act To Require Recovery Residences for Persons with Substance Use Disorder Be Equipped with Naloxone and To Exempt from Criminal Liability Persons Administering Naloxone**

**Sponsor:** Rep. Stewart <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071045>

**Health & Human Services**

**Committee Status:** PTBE

**Public Hearing:** 2/27/2019 12:00 PM

**Final Status:** PL 2019, CH 292

This law requires organizations that provide 'recovery residences' to persons with substance use disorder to store two units of naloxone hydrochloride for each floor. It provides criminal immunity for providing naloxone. It directs the Department of Health and Human Services to adopt rules to implement these requirements.



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## **LD 304 An Act To Improve Stroke Care in Maine**

**Sponsor:** Rep. Pierce <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071047>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/5/2019 9:00 AM

**Final Status:** DEAD

This bill provides \$750K to the CDC at DHHS for evidence-based education efforts designed to inform residents of the State about the causes, signs and symptoms of stroke, focusing on populations and geographic areas most affected by stroke, and to improve stroke surveillance and epidemiology efforts of the Maine CDC.

## **LD 305 An Act To Protect Job Applicants from Identity Theft**

**Sponsor:** Rep. Riley <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071076>

**Labor & Housing**

**Committee Status:** OTPA

**Public Hearing:** 2/20/2019 12:00 PM

**Final Status:** PL 2019, CH 47

This law prohibits the request of a social security number from a prospective employee by an employer on an employment application or during the application process. Under this law, an employer may still request a social security number from a prospective employee for purposes of a substance abuse test or preemployment background check, and an employer is not prohibited from asking for a social security number from an individual for any reason after the individual has been hired.

## **LD 310 An Act Making Certain Supplemental Appropriations and Allocations and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government**

**Sponsor:** Rep. Gattine <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071059>

**Appropriations & Financial Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:**

This is the SFY 2019 supplemental budget. [Placeholder – content not yet available.]

## **LD 311 An Act Making Certain Appropriations and Allocations and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government**

**Sponsor:** Rep. Gattine <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071061>

**Appropriations & Financial Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:**

This is the biennial budget for SFYs 2020-2021. [Placeholder – content not yet available.]

## **LD 315 An Act To Promote Healthy Living in Maine**

**Sponsor:** Rep. Madigan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071069>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/3/2019 1:00 PM

**Final Status:** APP TBL CO

This bill appropriates \$282K for evidence-based programs to promote healthy living of the State's older adults.



## **LD 320 An Act To Amend the Scope of Practice of Podiatric Medicine**

**Sponsor:** Rep. Keschl <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071105>

**Health Coverage, Insurance and Financial Services**      **Committee Status:** DIV RPT  
**Public Hearing:** 2/14/2019 1:00 PM      **Final Status:** DEAD

This bill amends the scope of practice of podiatric medicine to include the diagnosis and treatment of maladies of the soft tissue of the lower leg and the evaluation, diagnosis, management and prevention of conditions of the lower extremities.

## **LD 329 An Act To Exempt from Criminal Liability Persons Reporting a Drug-related Medical Emergency**

**Sponsor:** Rep. Cardone <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071114>

**Criminal Justice and Public Safety**      **Committee Status:**  
**Public Hearing:**      **Final Status:** PL 2019, CH 137

This law exempts from arrest or prosecution a person who in good faith seeks medical assistance for another person experiencing a drug-related overdose or who is experiencing a drug-related overdose and is in need of medical assistance.

## **LD 330 An Act To Define Licensed Massage Therapists as Health Care Practitioners**

**Sponsor:** Rep. DeChant <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071117>

**Health Coverage, Insurance and Financial Services**      **Committee Status:** ONTP  
**Public Hearing:** 2/14/2019 1:00 PM      **Final Status:** DEAD

This bill clarifies that massage therapists and massage practitioners are health care practitioners and that massage therapy is a health care practice. It prohibits unlicensed persons from claiming to provide procedures that are described as "massage," "bodywork," "body therapy," "manual therapy," "neuromuscular therapy," "touch therapy" or "myotherapy" or related terms.

## **LD 349 An Act To Extend the Refundability of the Educational Opportunity Tax Credit to Students in the Behavioral Health Field**

**Sponsor:** Rep. Beebe-Cen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071133>

**Innovation, Development, Economic Advancement and Education**      **Committee Status:** PTBE  
**Public Hearing:** 4/4/2019 1:00 PM      **Final Status:** DEAD

This bill provides that students receiving bachelor's degrees or associate degrees in a behavioral health field are entitled to a refundable income tax credit for certain education loans in the same manner as students receiving degrees in science, technology, engineering or mathematics.

## **LD 362 Resolve, To Require the Department of Health and Human Services To Submit a State Plan Amendment To Exempt Retirement and Educational Assets from Calculations for Medicaid Eligibility**

**Sponsor:** Sen. Bellows <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071097>

**Health & Human Services**      **Committee Status:**  
**Public Hearing:** 2/20/2019 1:00 PM      **Final Status:** CARRY OVER

This resolve requires DHHS to prepare and submit a state plan amendment to the CMS in order to make a change in Medicaid eligibility requirements for individuals with disabilities under 65 years of age who have dependent children living in the home by disregarding assets held in qualifying retirement and education accounts.





## **LD 363 An Act To Protect Residents of Assisted Living Facilities**

**Sponsor:** *Sen. Miramant* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071098>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/20/2019 1:00 PM

**Final Status:** DEAD

This bill requires nursing facilities and assisted living and residential care facilities to perform CPR or use an automated external defibrillator (AED) in the event of a suspected sudden cardiac arrest unless the person has made a health care decision that includes an order not to resuscitate. It requires those facilities to maintain the necessary equipment to perform CPR or use an AED. It requires those facilities to provide training. The bill also directs those facilities to establish a process for quickly determining in the event of a medical emergency whether an individual residing in the facility has made a health care decision that includes an order not to resuscitate.

## **LD 364 An Act To Establish the Right To Practice Complementary and Alternative Health Care Act**

**Sponsor:** *Sen. Miramant* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071100>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 4/11/2019 1:30 PM

**Final Status:** PL 2019, CH 265

This law establishes the Right To Practice Complementary and Alternative Health Care Act. It allows a person providing alternative or complementary health care services who is not licensed under Title 32 to provide health care services as long as the person does not perform surgery, prescribe medications, drugs or devices that require a prescription, perform chiropractic manipulation or falsely state that the person is a licensed health care professional. The person providing services must disclose certain information to the person receiving services and must collect and retain a signed statement granting permission to provide services.

## **LD 367 An Act To Amend the Definition of "Insurer" under the Maine Guaranteed Access Reinsurance Association Act**

**Sponsor:** *Sen. Foley* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071150>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill removes multiple-employer welfare arrangements from the definition of "insurer" under the Maine Guaranteed Access Reinsurance Association Act.

## **LD 369 An Act To Support Healthy Workplaces and Healthy Families by Providing Earned Paid Sick Leave to Certain Employees**

**Sponsor:** *Sen. Millett* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071152>

**Labor & Housing**

**Committee Status:** DIV RPT

**Public Hearing:** 2/25/2019 11:00 AM

**Final Status:** PL 2019, CH 156

This bill creates a right to earned paid sick leave for employees in a workplace with more than 5 employees. The bill also creates a right to earned unpaid sick leave for employees in a workplace with 5 or fewer employees. This bill takes effect January 1, 2021.



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## **LD 376 An Act To Expand Health Insurance Options for Town Academies**

**Sponsor:** Rep. Devin <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071166>

**Health Coverage & Financial Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/28/2019 1:00 PM

**Final Status:** PL 2019, CH 424

This law makes an employee of an academy approved for tuition purposes in accordance with the Maine Revised Statutes, Title 20-A, sections 2951 to 2955 eligible for coverage under the group health plan available to state employees and other eligible persons.

## **LD 392 An Act To Fund Maine's School-based Health Centers**

**Sponsor:** Rep. Handy <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071182>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** PL 2019, CH 425

This bill provides \$600,000 per year for school-based health centers from the Fund for a Healthy Maine within the Department of Health and Human Services.

## **LD 396 An Act To Support Justice for Victims of Sexual Assault by Increasing the Time Sexual Assault Forensic Examination Kits Must Be Stored**

**Sponsor:** Rep. Chloe Max <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071186>

**Criminal & Public Safety**

**Committee Status:** OTPA

**Public Hearing:**

**Final Status:** PL 2019, CH 94

This law changes the period that a law enforcement agency must store a sexual assault forensic examination kit when the victim has not come forward from 90 days from receipt of the kit to 8 years.

## **LD 402 An Act To Restore Overtime Protections for Maine Workers**

**Sponsor:** Rep. Tipping <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071213>

**Labor & Housing**

**Committee Status:** TABLED

**Public Hearing:** 3/11/2019 9:00 AM

**Final Status:** CARRY OVER

This bill annually raises the minimum salary that an employee who works in an executive, administrative or professional capacity must earn in order for that employee to be exempt from the laws governing the minimum wage and overtime pay until it is \$55,224 on January 1, 2022. The bill provides for an annual adjustment, beginning January 1, 2023, based on the percentage annual increase in certain earnings as published by the Bureau of Labor Statistics.

## **LD 407 An Act To Promote Universal Health Care, Including Dental, Vision and Hearing Care**

**Sponsor:** Rep. Brooks <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071218>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** DEAD

This bill establishes a single-payer health care system in the State, effective July 1, 2022, that finances health care services for most Maine residents. The bill directs the HHS Committee and the IFS Committee to jointly submit during the 2019 legislative interim legislation to fully implement the single-payer system.



## **LD 408 Resolve, To Improve Access to Neurobehavioral Services**

**Sponsor:** Rep. Warren <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071219>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/20/2019 1:00 PM

**Final Status:** PL 2019, CH 88

This resolve requires DHHS to develop a plan to provide up to 16 new neurobehavioral beds in the State to serve individuals with brain injury and accompanying significant behavioral challenges who need short-term treatment for no longer than one year before transitioning to a long-term care environment. These individuals must be unable to be served appropriately in the community or in a nursing facility lacking specialized neurobehavioral services but must not need hospitalization. The department shall submit a report with the plan, together with any necessary legislation, to the Health and Human Services Committee no later than January 30, 2020.

## **LD 425 An Act To Strengthen Small Businesses in Rural Maine by Changing the Minimum Wage**

**Sponsor:** Rep. White <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071236>

**Labor & Housing**

**Committee Status:** DIV RPT

**Public Hearing:** 3/18/2019 9:00 AM

**Final Status:** DEAD

This bill sets the minimum wage at \$10.00 per hour and removes the provision that requires the minimum wage to be increased annually by the increase, if any, in the cost of living.

## **LD 429 An Act To Improve the Ability of Mental Health Professionals To Assess the Risk of Suicide**

**Sponsor:** Rep. Beebe-Cen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071240>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 2/19/2019 1:00 PM

**Final Status:** DEAD

This bill adds a new requirement for the renewal of professional licenses for psychologists, social workers and licensed clinical professional counselors that must show proof upon renewal that the licensee has completed a minimum of 6 hours of course work every 10 years in suicide prevention, evidence-based suicide risk assessment or the treatment and management of suicidal persons, including knowledge of community resources and cultural factors. The bill also changes, from January 1, 2020 to January 1, 2022, the date that licensed clinical professional counselors must begin demonstrating successful completion of a minimum of 12 hours of course work in family or intimate partner violence.

## **LD 433 RESOLUTION, Proposing an Amendment to the Constitution of Maine To Explicitly Prohibit Discrimination Based on the Sex of an Individual**

**Sponsor:** Rep. Reckitt <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071244>

**Judiciary**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** CARRY OVER

This resolution proposes to amend the Constitution of Maine to prohibit the denial or abridgment by the State or any political subdivision of the State of equal rights based on the sex of an individual.



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## **LD 437 An Act To Improve Access to and Affordability of Health Care in Maine**

**Sponsor:** *Sen. Pouliot* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071189>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** DEAD

This bill is a concept draft that proposes to improve access to and affordability of health care in Maine.

## **LD 439 Resolve, Directing the Commissioner of Health and Human Services To Convene a Task Force To Study the Need for Long-term Acute Care Hospital**

**Sponsor:** *Sen. Claxton* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071187>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** RESOLVE 2019, CH 69

This resolve requires the Commissioner of Health and Human Services to convene a task force to evaluate the need for long-term acute care beds in the State. The commissioner is required to submit a report detailing findings of the task force and recommended legislation to the Joint Standing Committee on Health and Human Services, which may submit a bill related to the report to the Second Regular Session of the 129th Legislature.

## **LD 440 An Act To Continue the Doctors for Maine's Future Scholarship Program**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071191>

**Innovation, Development, Economic Advancement & Business**

**Committee Status:** APP TBL

**Public Hearing:** 4/4/2019 1:00 PM

**Final Status:** PL 2019, CH 510

This bill provides \$400,000 per year of ongoing funds to the Doctors for Maine's Future Scholarship Program.

## **LD 443 An Act To Prevent Vitamin K Deficiency Bleeding and Eye Damage in Infants**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071194>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/19/2019 1:00 PM

**Final Status:** PL 2019, CH 426

Current law requires every physician, midwife or nurse in charge to instill or cause to be instilled into the eyes of an infant within 24 hours after the infant's birth prophylactic eye drops, except for an infant whose parents object to this procedure on the grounds that it conflicts with their religious tenets and practices. This law updates the term "eye drops" to "ophthalmic ointment" to reflect current practice, removes the civil penalties for noncompliance and removes the exemption based on religious tenets and practices.

This law also requires every physician, midwife or nurse in charge at the birth of an infant to administer vitamin K to an infant intramuscularly to prevent vitamin K deficiency bleeding in infants within 6 hours after the infant's birth. It requires DHHS to adopt rules to implement this section, including the creation of a brochure about the medical benefits and risks of administering the prophylactic ophthalmic ointment and vitamin K injection and providing a form on which a parent can refuse the prophylactic ophthalmic ointment and vitamin K injection for the infant of that parent.



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## **LD 447 An Act Regarding the Substance Use Disorder Continuum of Care**

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071198>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/1/2019 1:00 PM

**Final Status:** DEAD

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

This bill proposes to provide support for persons with substance use disorder along a continuum of care that includes prevention, law enforcement diversion, treatment, harm reduction and recovery. The bill proposes to provide:

1. Funding for programs that reduce the use of marijuana and so-called "vaping" by youth in Maine in order to reduce the likelihood of neural pathway changes that can lead to addiction later in life;
2. Ongoing support for detoxification as a path to recovery;
3. Reimbursement under the MaineCare program for substance use disorder peer recovery coaches;
4. Funding to the Bangor Area Recovery Network for addiction recovery support;
5. Support for regional 2-1-1 hotlines to offer referrals to persons with substance use disorder for local services; and
6. Access to evidence-based approaches to prevent substance use and treat substance use disorder in rural areas.

## **LD 455 An Act To Authorize a General Fund Bond Issue To Expand Maine's Research, Development, Commercialization and Clinical Infrastructure Assets To Improve Outcomes for Maine Families with Members Suffering from Alzheimer's, Dementia and Other Diseases of Aging**

**Sponsor:** *Sen. Luchini* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071208>

**Appropriations & Financial Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:**

The funds provided by this bond issue, in the amount of \$65,000,000, to the Maine Technology Institute will be used for investment in research, development, commercialization and clinical infrastructure assets in Maine in the target sectors of life sciences and biomedical technology, including equipment and technology upgrades that improve outcomes for Maine families suffering from Alzheimer's, dementia and other diseases of aging, and to enable organizations to gain and hold market share and expand employment or preserve jobs. The funds must be awarded through a competitive process to Maine-based public and private entities, leveraging other funds in at least a one-to-one ratio.

## **LD 463 An Act To Reduce Obesity Rates in Maine**

**Sponsor:** *Rep. Pierce* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071271>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/27/2019 12:00 PM

**Final Status:** DEAD

This bill requires DHHS and the CDC to develop a comprehensive state plan relating to the reduction of unhealthy weight and obesity. The department is required to submit the plan to the HHS Committee no later than January 1, 2020 and every 2 years thereafter. The bill also includes a position within the Maine Center for Disease Control and Prevention, or contracted for by the department, as a coordinator of the state plan. The bill also appropriates \$1.5M per year to fund this work.

## **LD 465 An Act To Eliminate the Service Provider Tax on Services Covered by Medicaid**

**Sponsor:** *Rep. Stewart* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071274>

**Taxation**

**Committee Status:** ONTP

**Public Hearing:** 3/6/2019 1:00 PM

**Final Status:** DEAD

This bill repeals portions of the service provider tax (not the hospital tax) that apply to services that are covered by the federal Medicaid program.



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## **LD 476 Resolve, To Review the Delivery of Services to the Citizens of the State by the Department of Health and Human Services**

**Sponsor:** Sen. Woodsome <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071297>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/1/2019 10:00 AM

**Final Status:** DEAD

This resolve requires the Commissioner of Health and Human Services, working with health and human services providers in York County and Cumberland County as well as with other stakeholders, to review the programs, services and operations of the Department of Health and Human Services and determine if any of those programs, services and operations can be delivered more efficiently at the county level.

## **LD 480 An Act To Ensure Pay Transparency and To Reduce Gender and Racial Wage Inequities**

**Sponsor:** Sen. Miramant <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071316>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 2/20/2019 12:00 PM

**Final Status:** DEAD

This bill requires certain employers, including, but not limited to, state agencies, to annually submit wage data reports regarding employee gender, race and ethnicity to the Maine Human Rights Commission.

## **LD 493 An Act To Provide Lung Cancer Counseling and Screening for MaineCare Recipients**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071332>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/20/2019 9:00 AM

**Final Status:** APP TBL CO

This bill requires that shared decision-making counseling and annual screening for lung cancer for certain recipients be reimbursed under the MaineCare program. The Department of Health and Human Services may adopt routine technical rules to implement this requirement.

## **LD 494 An Act To Update the Family Planning Statutes**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071333>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 2/25/2019 9:30 AM

**Final Status:** PL 2019, CH 236

This law deals with consent by minors. Current law provides that the treatment of a minor for a sexually transmitted infection does not require the consent of the minor's parent or guardian. This law provides that the prevention or treatment of a sexually transmitted infection does not require the consent of the minor's parent or guardian. Current law also provides that family planning services may be provided to a minor who is a parent, who is married, with the consent of the minor's guardian or if the minor will suffer probable health hazards. This law provides that a health care provider may provide family planning services to a minor without requiring the consent of the minor's parent or guardian, just as with sexually transmitted infections. This law clarifies that the provisions of the Maine Revised Statutes, Title 22, chapter 406 regarding family planning services are not intended to change the scope of practice of a health care provider. It also makes other technical changes.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 498 Resolve, Regarding Reimbursement of Physical Medicine and Rehabilitation Codes under MaineCare**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071337>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/27/2019 9:00 AM

**Final Status:** APP TBL CO

This resolve sets the reimbursement rates for occupational therapy and physical therapy services under the Department of Health and Human Services rule Chapter 101: MaineCare Benefits Manual, Chapter III, Sections 68 and 85 at 70% of the federal Medicare reimbursement rate as long as the rate is no lower than the rate in effect on January 1, 2019.

## **LD 500 An Act To Extend the Limitation on Prescribing Opioids for Certain Individuals with Chronic Pain**

**Sponsor:** *Sen. Chenette* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071339>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/20/2019 9:00 AM

**Final Status:** DEAD

Current law prohibits an individual licensed to prescribe opioid medication from prescribing more than a 30-day supply of an opioid medication to a patient under treatment for chronic pain. This bill allows an individual licensed to prescribe opioid medication to prescribe no more than a 6-month supply of an opioid medication to a patient under treatment for chronic pain who has been prescribed medication for chronic pain continually for at least 5 years or is 63 years of age or older.

## **LD 511 An Act To Create an Alzheimer's Disease and Dementia Coordinator Position within the Department of Health and Human Services**

**Sponsor:** *Rep. Craven* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071376>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/21/2019 1:00 PM

**Final Status:** APP TBL CO

This bill establishes a position within the Department of Health and Human Services, office of aging and disability services for coordinating programs and services to Maine's population with dementias across departments and branches of State Government. The coordinator is required to implement recommendations developed by the United States Department of Health and Human Services, Centers for Disease Control and Prevention and national organizations such as the Alzheimer's Association and plans developed by the Department of Health and Human Services relating to Alzheimer's disease and other dementias. The department is required to submit an annual report to the joint standing committee of the Legislature having jurisdiction over health and human services matters outlining the activities and progress of the coordinator and the department. The bill includes \$96K for the coordinator position.

## **LD 519 An Act To Expand Adult Dental Health Insurance Coverage**

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071360>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:** 2/21/2019 1:00 PM

**Final Status:** CARRY OVER

This bill expands the availability of coverage for comprehensive dental services.

Part A of the bill broadens the scope of required coverage under the MaineCare program for adults. Under current law, coverage for adults over age 21 is limited to certain services.

Part B of the bill requires health insurance carriers to provide coverage for comprehensive dental services. Part B applies to policies and contracts issued or renewed on or after January 1, 2020.

Part C of the bill requires dentists as a condition of license renewal to adopt and implement policies to provide comprehensive dental services through charity care or financial assistance to persons without MaineCare coverage or private health insurance. Part C also authorizes the Board of Dental Practice to adopt rules relating to this requirement.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 530 An Act To Amend the Laws Governing Subrogation Rights for Medical Payments Coverage**

**Sponsor:** Rep. Cardone <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071407>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 2/19/2019 1:00 PM

**Final Status:** PL 2019, CH 182

The law, which is based on a New Hampshire law, does the following:

1. It prohibits a health insurance carrier from coordinating benefits against medical payments coverage in a casualty insurance policy.
2. It provides that medical payments coverage is assignable only by agreement between the insured and the casualty insurer.
3. It provides that the insured has the right to submit a claim for medical expenses under medical payments coverage in a casualty insurance policy. It also provides that an insured may submit a claim under a health insurance policy, except that an insured is not entitled to duplicate payment from medical payments coverage and a health insurance policy for the same medical expense.

## **LD 531 An Act To Provide Counsel for a Person Who Is the Subject of an Adult Guardianship, Conservatorship or Other Protective Arrangement Proceeding**

**Sponsor:** Rep. Cardone <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071408>

**Judiciary**

**Committee Status:**

**Public Hearing:** 4/24/2019 1:30 PM

**Final Status:** CARRY OVER

This bill requires a probate court to appoint an attorney for a person who is not already represented by an attorney when the person is the subject of a petition for adult guardianship, conservatorship or other protective arrangement.

## **LD 539 Resolve, To Ensure Appropriate Personal Needs Allowances for Persons Residing in Long-term Care Facilities**

**Sponsor:** Rep. McCrea <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071416>

**Health & Human Services**

**Committee Status:** PASSED

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** APP TBL CO

This resolve directs the Department of Health and Human Services to amend its MaineCare rules to provide for increases in the personal needs allowances of residents in nursing facilities. The rules are designated as routine technical rules. Fiscal note is \$200K/yr.

## **LD 555 An Act To Reduce Colorectal Cancer Incidence and Mortality by Updating Screening Coverage**

**Sponsor:** Sen. Davis <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071445>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** PTBE

**Public Hearing:**

**Final Status:** PL 2019, CH 86

As enacted, this law removes references to the age of the patient for purposes of requiring coverage for colorectal cancer screening for asymptomatic individuals who are at average risk for colorectal cancer and instead requires coverage in accordance with the most recently published guidelines of a national cancer society. In addition, it requires coverage of all colorectal examinations and laboratory tests recommended by a health care provider in accordance with those published guidelines.



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## **LD 558 An Act To Amend the Continuing Education Requirements for Prescribers of Opioid Medication**

**Sponsor:** Rep. Hymanson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071453>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 2/19/2019 1:00 PM

**Final Status:** DEAD

This bill will reduce the amount of opioid prescribing education required of prescribers from 3 hours per license cycle of 2 years to one hour per license cycle of 2 years after the licensee has completed an initial 3-hour requirement. It will also require the licensing boards to adopt rules consistent with the reduction in the amount of required prescribing education.

## **LD 578 Resolve, To Create a Pilot Program To Assist the Transition to Recovery of Persons Suffering from Opioid Use Disorder**

**Sponsor:** Rep. Hymanson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071473>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/1/2019 1:00 PM

**Final Status:** DEAD

This resolve directs the Commissioner of DHHS to develop a pilot program designed to assist the transition to recovery of persons suffering from opioid use disorder before December 2, 2020.

## **LD 583 Resolve, Directing the Department of Health and Human Services To Study the State's Long-term Services and Supports System for Older Adults**

**Sponsor:** Rep. Fay <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071484>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 2/20/2019 1:00 PM

**Final Status:** DEAD

This resolve directs DHHS to perform a study to determine how to most efficiently manage and fund the various long-term care support programs for older adults operated by the department and report back by January 15, 2020.

## **LD 593 Resolve, To Stabilize the Behavioral Health Workforce and Avert More Expensive Treatments**

**Sponsor:** Sen. Breen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071475>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/19/2019 9:00 AM

**Final Status:** APP TBL CO

This resolve provides funding to increase Section 65 rates by 8% (\$5.2 million per year). The resolve also specifies that the increase in reimbursement rates must be applied to wages and benefits for employees who provide direct care services and not to administrators or managers.

## **LD 600 An Act To Achieve Mental Health Parity in Workers' Compensation**

**Sponsor:** Sen. Bellows <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071496>

**Labor & Housing**

**Committee Status:**

**Public Hearing:** 3/4/2019 10:00 AM

**Final Status:** DEAD

This bill changes the standard of proof required to demonstrate entitlement to compensation for a mental injury caused by stress so that it is the same standard as is required with respect to physical injuries. In addition, this bill specifies that a work-related injury that aggravates a preexisting mental condition may result in a compensable disability, just as aggravating a preexisting physical condition may.



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**LD 601 An Act To Create Fairness by Reinstating the Cost-of-living Adjustment for Workers' Compensation Benefits**

**Sponsor:** *Sen. Bellows* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071497>

**Labor & Housing**

**Committee Status:** DEAD

**Public Hearing:** 3/4/2019 10:00 AM

**Final Status:**

This bill establishes cost-of-living adjustments for workers' compensation benefits. Prior to the 1992 revision of the laws governing workers' compensation, benefits for total incapacity were adjusted annually based on the percentage increase or decrease in the state average weekly wage.

**LD 606 Resolve, To Require the Department of Health and Human Services To Provide Cost-based Reimbursement to Maine Veterans' Homes**

**Sponsor:** *Sen. Luchini* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071502>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/20/2019 1:00 PM

**Final Status:** APP TBL CO

This resolve requires the Department of Health and Human Services to amend its rules governing MaineCare reimbursement in order to provide cost-based reimbursement to Maine Veterans' Homes nursing facilities. \$1.3M General Fund per year.

**LD 611 An Act To Provide Supplemental Appropriations and Allocations for the Operations of State Government**

**Sponsor:** *Rep. Jorgensen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071510>

**Apropiations & Financial Services**

**Committee Status:**

**Public Hearing:**

**Final Status:**

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

This emergency bill proposes to provide supplemental appropriations and allocations necessary for the operation of State Government for the fiscal year ending June 30, 2019.

**LD 615 An Act To Protect the Integrity of the MaineCare Program**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071514>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/22/2019 10:00 AM

**Final Status:** PL 2019, CH 266

This provides language describing the situations in which the Department of Health and Human Services may not implement changes in the Medicaid program or the federal State Children's Health Insurance Program without proper authorization from the Legislature.



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## **LD 641 An Act To Save Lives through Epinephrine Autoinjector Accessibility**

**Sponsor:** *Sen. Bellows* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071596>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 3/7/2019 1:30 PM

**Final Status:** DEAD

This bill authorizes pharmacists to prescribe and dispense epinephrine autoinjectors at no cost to a person of any age who the pharmacist reasonably believes is at risk of experiencing severe allergic reactions, including anaphylaxis, or to a person who is in a position to assist the other person if the other person is at risk of experiencing severe allergic reactions, including anaphylaxis. It creates a fund within the Department of Health and Human Services to reimburse a pharmacist who has prescribed and dispensed an epinephrine autoinjector.

## **LD 653 Resolve, To Establish the Task Force To Study Opportunities for Improving Home and Community-based Services**

**Sponsor:** *Rep. Cooper* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071622>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** CARRY OVER

This resolve establishes the Task Force To Study Opportunities for Improving Home and Community-based Services. The task force membership consists of Legislators, representatives of entities knowledgeable about or involved in home and community-based services. The task force's duties include examination and review of the unmet need for home and community-based services, adequacy of the workforce providing home and community-based services, current systems for delivering home and community-based services and reimbursement arrangements in the home and community-based services sector.

## **LD 659 An Act Regarding the Use of Interchangeable Biological Products**

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071602>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTP

**Public Hearing:** 3/7/2019 1:30 PM

**Final Status:** PL 2019, CH 34

As enacted, this law provides for pharmacist substitution of interchangeable biological products for prescribed biological products in a manner similar to the current regulation of generic drug substitution. The bill defines "biological product" and "interchangeable biological product."

## **LD 666 An Act To Protect Pregnant Workers**

**Sponsor:** *Rep. Carney* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071616>

**Labor & Housing**

**Committee Status:**

**Public Hearing:** 5/6/2019 9:00 AM

**Final Status:** PL 2019, CH 490

This law provides that it is unlawful employment discrimination for an employer to fail to provide a reasonable accommodation for an employee's pregnancy-related condition, unless provision of an accommodation would impose an undue hardship on the employer.

## **LD 670 An Act To Increase the Minimum Wage for Large Employers**

**Sponsor:** *Rep. Collings* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071623>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 3/18/2019 9:00 AM

**Final Status:** DEAD

This bill increases the minimum wage of the employees of employers employing 50 or more full-time employees to \$13.00 on January 1, 2021, to \$14.00 on January 1, 2022 and to \$15.00 on January 1, 2023.



**LD 673 An Act To Amend the Laws Governing the Circumstances of Death That Must Be Reported to the Office of Chief Medical Examiner**

**Sponsor:** Rep. Moonen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071629>

**Judiciary**

**Committee Status:** PTBE

**Public Hearing:** 2/28/2019 1:00 PM

**Final Status:** PL 2019, CH 87

This law amends the law governing the Office of Chief Medical Examiner as follows.

1. It clarifies that, absent certain other circumstances, the fact that a patient dies within 24 hours of admission to a hospital or other health care facility need not be reported to the Office of Chief Medical Examiner.
2. It removes the requirement that deaths due to the consequences of long-term alcohol use be reported to the Office of Chief Medical Examiner.
3. It allows a duly appointed medicolegal death investigator, in addition to a medical examiner, to certify that further examination or judicial inquiry concerning the cause and manner of death of a person is not necessary.

**LD 684 Resolve, Relating to the Prevention and Management of Neonatal Abstinence Syndrome**

**Sponsor:** Rep. Nadeau <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071644>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/29/2019 1:00 PM

**Final Status:** DEAD

This resolve requires the Department of Health and Human Services to develop recommendations for measures related to the prevention and management of neonatal abstinence syndrome.

**LD 692 Resolve, To Address Reimbursement Rates for Licensed Clinical Social Workers under MaineCare**

**Sponsor:** Rep. Gramlich <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071661>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 3/20/2019 9:00 AM

**Final Status:** APP TBL CO

This resolve directs the Department of Health and Human Services to amend its rule Chapter 101: MaineCare Benefits Manual, Chapter III to increase reimbursement rates for counseling services provided by licensed clinical social workers to no less than the lowest reimbursement rate for the same counseling services paid by an insurance carrier licensed in this State.

**LD 697 Resolve, Directing the Department of Health and Human Services To Conduct a Review of Rules Governing In-home Personal Care Assistance Services**

**Sponsor:** Sen. Bellows <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071674>

**Health & Human Services**

**Committee Status:** OTP

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** CARRY OVER

This resolve directs the Department of Health and Human Services to review and update its rules governing the provision of and reimbursement for in-home personal care assistance services to ensure the provision of high-quality care and to provide protections to vulnerable people who receive personal care assistance services.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 699 Resolve, To Provide for Outreach Programs To Assist Women at Risk of Giving Birth to Substance-exposed Infants**

**Sponsor:** Sen. Carson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071676>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/29/2019 1:00 PM

**Final Status:** RESOLVE 2019, CH 103

This resolve requires the Department of Health and Human Services to enter into a \$160K contract with a community-based nonprofit organization to develop outreach and educational programs regarding reproductive and sexual health care for women and adolescents at highest risk of experiencing an unintended pregnancy.

## **LD 705 An Act Regarding the Process for Obtaining Prior Authorization for Health Insurance Purposes**

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071682>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** PTBE

**Public Hearing:** 3/14/2019 1:00 PM

**Final Status:** PL 2019, CH 273

This law does the following:

1. It reduces the time frame for a carrier's response to a prior authorization request from 2 business days to 72 hours or 2 business days, whichever is less, and clarifies that the same time frame for a response applies in instances when a carrier requests additional information or requires outside consultation. It also provides that a request for prior authorization is granted if a carrier fails to respond within the required time frames.
2. It clarifies a provision in existing law to reflect the change in time frame.
3. It prohibits a carrier from requiring prior authorization for medication-assisted treatment for opioid use disorder for the prescription of at least one drug for each type of medication used in medication-assisted treatment, except that a carrier may not require prior authorization for medication-assisted treatment for opioid use disorder for a pregnant woman.
4. It requires a health insurance carrier to develop an electronic transmission system for prior authorization of prescription drug orders by January 1, 2020.
5. It requires health insurance carriers to report, no later than January 1, 2020, to the Insurance Committee on efforts to develop standards for secure electronic transmission of prior authorization requests.
6. It directs the Bureau of Insurance to amend its rules.

## **LD 706 An Act To Reduce the Incidence of Obesity and Chronic Disease in the State**

**Sponsor:** Sen. Libby <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071683>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 2/27/2019 12:00 PM

**Final Status:** APP TBL CO

This bill provides for reimbursement under the MaineCare program for medical nutritional therapy and prescription drug therapy.



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## **LD 717 An Act To Provide Comprehensive Mental Health Treatment Reform**

**Sponsor:** Rep. Craven <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071700>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/27/2019 1:00 PM

**Final Status:** DEAD

This concept draft proposes to create a seamless crisis services system that allows high-risk patients timely access to inpatient care and to increase communication within the crisis services system to better manage patients after discharge.

The purpose of this bill is to save lives and improve the overall quality and integrity of the crisis services system by:

1. Creating a single point of entry for a high-risk patient by designating an independent entity of a hospital to provide clinical assessment of the patient and determine whether the patient meets inpatient criteria of care;
2. Adopting universal criteria under which priority admission for a patient is based on acuteness of crisis and length of stay in an emergency room;
3. Requiring hospitals to communicate with and make referrals to community providers for aftercare within 24 hours following discharge from the emergency room or inpatient treatment when patients are most at risk of suicide; and
4. Exploring further significant upgrades, access and training in developing prevention and postintervention services with the goal of avoiding hospitalization of patients with mental illness who are not in need of psychiatric hospitalization and can be stabilized in the community.

## **LD 724 An Act To Amend the Maine Background Check Center Act To Provide Employers Flexibility To Use Approved Alternate Vendors**

**Sponsor:** Rep. Fay <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071688>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** DEAD

This bill allows an employer seeking to conduct a comprehensive background check for a direct access worker under the Maine Background Check Center Act to apply for and obtain at any time from the Department of Health and Human Services approval to use an approved alternate vendor instead of the Background Check Center as long as all other laws and rules pertaining to the use of alternate vendors are complied with in order for the employer to obtain approval.

## **LD 730 An Act To Create the Substance Use Disorders Cabinet**

**Sponsor:** Rep. Hymanson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071701>

**State & Local Government**

**Committee Status:** ONTP

**Public Hearing:** 3/13/2019 9:00 AM

**Final Status:** DEAD

This bill establishes the Substance Use Disorders Cabinet consisting of the Commissioners of:

- Corrections,
- Education,
- Health and Human Services,
- Labor,
- Public Safety,
- the Chief Justice of the Supreme Judicial Court and,
- at the discretion of the Governor, one member of the public.

The cabinet is established to promote interdepartmental collaboration on substance use disorders policy development and program implementation and support service delivery in an integrated manner.



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## **LD 733 An Act To Promote Keeping Workers in Maine**

**Sponsor:** Rep. Schneck <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071707>

**Labor & Housing**

**Committee Status:** APP TBL

**Public Hearing:** 2/27/2019 10:00 AM

**Final Status:** PL 2019, CH 513

This law prohibits an employer from requiring or entering into a so-called noncompete agreement with an employee earning wages that are at or below 400% of the federal poverty level. Noncompete agreements are not effective for employees who have been with an organization less than 1 year (except for physicians). The employer must disclose the noncompete requirement and must provide a prospective employee with a copy of a noncompete agreement at least 3 business days before requiring the person to sign the agreement.

## **LD 738 Resolve, Directing the Commissioner of Health and Human Services To Convene a Study Group To Review the Crisis Response System in the State**

**Sponsor:** Rep. Gattine <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071718>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/23/2019 1:00 PM

**Final Status:** DEAD

This resolve requires the Commissioner of Health and Human Services to convene a study group of interested parties, including hospitals, to review the crisis response system in the State. The study group is required to submit its report, including any recommended legislation, to the HHS Committee no later than December 15, 2019. The groups shall review:

1. Average call times;
2. The average time spent on hold to connect to referral services;
3. Wait times for mobile units;
4. Any decline in the number of crisis teams and crisis stabilization unit beds available across the State and where those declines have occurred;
5. The average length of stay in crisis stabilization units; and
6. Other data considered pertinent by the study group.

## **LD 745 An Act To Support the Northern New England Poison Center**

**Sponsor:** Rep. Jorgensen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071731>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 2/27/2019 12:00 PM

**Final Status:** APP TBL CO

This bill appropriates \$281K annually to the Northern New England Poison Center to ensure continued access to 24-hour expert medical treatment advice and information on potentially harmful substances.



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## LD 756 An Act To Improve the Maine Workers' Compensation Act of 1992

**Sponsor:** Rep. Sylvester <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071762>

**Labor & Housing**

**Committee Status:** PTBE

**Public Hearing:** 5/6/2019 9:00 AM

**Final Status:** PL 2019, CH 344

This is the Workers Compensation law for 2019. It does several things:

It amends the definition of "average weekly wages, earnings or salary" to clarify that, for an injury occurring on or after January 1, 2020, any fringe or other benefit paid by the employer that does not continue during the disability must be included to the extent that the inclusion of the fringe or other benefit will not result in a weekly benefit amount that is greater than 2/3 of 125% of the state average weekly wage at the time of the injury.

It requires that the Workers' Compensation Board must vote with the support of 5 of the 7 members of the board to contract for the services of or to employ administrative law judges beginning January 1, 2020, except for the reappointment of administrative law judges appointed prior to January 1, 2020.

It allows an exception to the requirement that the first payment must be made by an employer within 14 days after notice of the injury or death if the payment cannot be made due to a factual mistake, an act of God or unavoidable circumstances.

It increases the maximum benefit level to 125% of the state average weekly wage for an injury occurring on or after January 1, 2020.

It requires a cost-of-living adjustment to be applied in cases of total incapacity after 260 weeks of benefits.

It extends the cap of benefits for partial incapacity from 520 weeks to 624 weeks.

It eliminates the provision relating to the extension of benefits for partial incapacity if the whole person impairment resulting from the injury is in excess of 18% for an injury occurring after January 1, 2020.

It clarifies how payments for paid time off are coordinated with workers' compensation benefits.

It provides that, if a deceased employee has no dependents, the employer must pay benefits to the parents of the deceased employee for a period of 500 weeks.

It extends the notice of injury requirement from 30 days to 60 days.

It caps the maximum percentage of attorney's fees that may be awarded at 10% in a lump-sum settlement in cases in which the injury occurred on or after January 1, 2020.

It authorizes the Workers' Compensation Board to consider adopting a rule to establish time frames for the filing of any petition related to a controversy with the board if a full agreement is not reached by the parties after conclusion of any mediation pursuant to the Maine Revised Statutes, Title 39-A, section 313.

It requires the Workers' Compensation Board to study the advocate program established pursuant to the Maine Revised Statutes, Title 39-A, section 153-A, including the salary paid to advocates, and make recommendations for any changes to improve the advocate program and its representation of injured workers to the Joint Standing Committee on Labor and Housing no later than January 1, 2020.

It directs the Workers' Compensation Board to convene a working group of stakeholders to evaluate issues related to work search and vocational rehabilitation requirements for injured workers and protections for injured workers whose employers have wrongfully not secured workers' compensation payments. On behalf of the working group, the Workers' Compensation Board is required to report to the Joint Standing Committee on Labor and Housing by January 30, 2020

with recommendations and any draft implementing legislation to address these issues.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 758 An Act To Clarify Work Search Requirements for Workers' Compensation**

**Sponsor:** Rep. Sylvester <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071764>

**Labor & Housing**

**Committee Status:**

**Public Hearing:** 3/6/2019 10:00 AM

**Final Status:** DEAD

Under current law, an injured worker who is only partially incapacitated by a workplace injury may be eligible for so-called 100% partial incapacity benefits if the worker is not working, as long as the worker can demonstrate that the lack of employment is due to the injury and that the worker has not been able to obtain employment, within the restrictions caused by the partial incapacity, despite an adequate work search. The Maine Supreme Judicial Court outlined the factors that must be considered when determining whether a work search by the injured worker is sufficient in the case *Monaghan v. Jordan's Meats*, 2007 ME 100, 928 A.2d 786.

This bill abrogates the current "work search rule" by placing the burden on the previous employer to demonstrate that there is suitable employment available to the injured worker in the worker's local community. If the previous employer has demonstrated suitable available employment, the injured worker may still be eligible for so-called 100% partial incapacity benefits if the worker can demonstrate continued unemployment despite reasonable efforts to secure the alternative employment identified by the previous employer.

## **LD 761 An Act To Clarify and Affirm Medicaid Eligibility for Incarcerated Individuals**

**Sponsor:** Rep. Talbot Ros <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071768>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/20/2019 1:30 PM

**Final Status:** PL 2019, CH 492

This law clarifies current law regarding Medicaid eligibility for incarcerated individuals to ensure that individuals who are eligible for Medicaid coverage are able to renew their coverage while they are incarcerated and also establishes a mechanism to ensure that individuals who are uninsured and eligible for Medicaid coverage are able to apply for coverage while they are incarcerated. The law also requires the Department of Health and Human Services to provide Medicaid coverage for treatment received by an incarcerated person outside a correctional facility as long as, at the time treatment is provided, the person is eligible for Medicaid.

## **LD 763 An Act To Ensure the Availability of Community Integration Services**

**Sponsor:** Rep. Talbot Ros <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071770>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/9/2019 1:00 PM

**Final Status:** APP TBL CO

This bill provides \$2.1M per year in General Fund funding to increase reimbursement rates in the Medicaid, Section 17 program for community integration services to \$24.25 per quarter-hour.

## **LD 775 An Act To Expand Community Support Services for Certain Adult Members of the MaineCare Program**

**Sponsor:** Rep. Gramlich <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071782>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/9/2019 1:00 PM

**Final Status:** POCKET

This Resolve directs DHHS to amend its rule MaineCare Benefits Manual, Section 17, (Community Support Services) concerning eligibility criteria for services under that section. It requires the department to report to the Health and Human Services Committee by January 15, 2020 on the rulemaking process, proposed and provisionally adopted rules and justification for the adoption of the proposed rules.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 793 An Act To Improve Accountability of Opioid Manufacturers**

**Sponsor:** *Pres. Jackson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071756>

**Judiciary**

**Committee Status:**

**Public Hearing:** 4/23/2019 9:00 AM

**Final Status:** DEAD

This bill prohibits opioid medication manufacturers and distributors from falsely advertising that an opioid medication does not have abuse liability or has a lower abuse liability than another opioid medication; distributing a quantity of opioid medications that is not medically reasonable; or failing to report orders that are not medically reasonable. It establishes a civil violation and authorizes the Attorney General to investigate violations. This legislation applies retroactively to January 1, 1985.

## **LD 798 An Act To Protect Maine Children and Students from Preventable Diseases by Repealing Certain Exemptions from the Laws Governing Immunization Requirements An Act To Protect Maine Children and Students from Preventable Diseases by Repealing Certain Exemptions from the Laws Governing Immunization Requirements**

**Sponsor:** *Rep. Tipping* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071798>

**Education & Cultural Affairs**

**Committee Status:** DIV RPT

**Public Hearing:** 3/13/2019 1:00 PM

**Final Status:** PL 2019, CH 154

Current law allows exemptions from immunization requirements based on religious or philosophical beliefs for students in elementary and secondary schools and postsecondary schools and employees of nursery schools and health care facilities. This bill removes those exemptions.

## **LD 799 An Act To Increase Faculty in Nursing Education Programs**

**Sponsor:** *Rep. Jorgensen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071808>

**Innovation, Development, Economic Advancement & Business**

**Committee Status:** APP TBL

**Public Hearing:** 4/4/2019 1:00 PM

**Final Status:** APP TBL CO

This bill amends the nursing education loan repayment program as follows:

1. It extends eligibility to apply to individuals who are currently enrolled in master's or doctoral degree programs;
2. It specifies that applicants must indicate an intention to work as full-time nursing faculty in a nursing education program in the State, and increases the required commitment from 3 to 5 years after acceptance into the nursing education loan repayment program;
3. It increases the maximum amount of loans eligible for repayment under the program from \$4,500 to \$30,000 for a master's degree, and from \$6,000 to \$60,000 for a doctoral degree.



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## **LD 803 An Act To Create 4 Regional Mental Health Receiving Centers**

**Sponsor:** Rep. Warren <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071804>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/24/2019 9:00 AM

**Final Status:** CARRY OVER

This bill establishes 4 crisis intervention centers regionally throughout the State that will be operated and maintained by the Department of Health and Human Services. It requires the crisis intervention centers to provide treatment 24 hours a day, 7 days a week and to provide sufficient staffing. It provides that the Department of Health and Human Services must adopt rules that include the certification of the crisis intervention centers; the location of the crisis intervention centers to ensure regional accessibility throughout the State; admission and discharge standards; requirements for notice of a person's admission; availability of and patients' access to treatment; the staffing model, with specific descriptions of staffing levels, roles and responsibilities; and patient rights protections; and that, to the extent possible, the rules must be consistent with the Maine Revised Statutes, Title 5, chapter 511; Title 34-B, chapter 1, subchapter 8; and Title 34-B, chapter 3, subchapter 4.

## **LD 815 An Act To Regulate the Issuance of Short-term, Limited-duration Health Insurance Policies in the State**

**Sponsor:** Pres. Jackson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071840>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 4/4/2019 1:00 PM

**Final Status:** DEAD

This bill limits the issuance of short-term, limited-duration individual health insurance policies in this State to policies with a term that is 3 months or less and further restricts an insurer or the insurer's agent or broker from issuing a short-term, limited-duration policy that replaces a prior short-term, limited-duration policy if the combined term of the new policy and all prior successive policies exceeds 3 months in any 12-month period.

The bill also requires that insurers make specific written disclosures related to the terms and benefits of the policies in at least 14-point type, including the types of benefits and consumer protections that are and are not included in the policies. The requirements of the bill apply to policies issued or renewed in this State on or after January 1, 2020.

## **LD 820 An Act To Prevent Discrimination in Public and Private Insurance Coverage for Pregnant Women in Maine**

**Sponsor:** Rep. McCreight <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071849>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2019 1:00 PM

**Final Status:** PL 2019, CH 274

This law requires the Department of Health and Human Services to provide coverage to a MaineCare member for abortion services. It provides that abortion services that are not approved Medicaid services must be funded by the State.

The law also requires that health insurance carriers that provide coverage for maternity services also provide coverage for abortion services, except for those religious employers granted an exclusion of coverage.

## **LD 836 An Act To Expand Maine's School-based Health Centers**

**Sponsor:** Rep. Handy <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071870>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 2/25/2019 12:00 PM

**Final Status:** APP TBL CO

This bill provides \$600K in ongoing funding to the school-based health centers within the Fund for a Healthy Maine program within the Department of Health and Human Services to add an additional 15 school-based health center sites.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 841 An Act To Amend the Laws Governing Damages Awarded for Wrongful Death**

**Sponsor:** Rep. Moonen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071853>

**Judiciary**

**Committee Status:** OTPA

**Public Hearing:** 4/10/2019 9:00 AM

**Final Status:** PL 2019, CH 198

This law increases the limit on damages for the loss of comfort, society and companionship and emotional distress from \$500,000 to \$750,000 in a case of wrongful death.

## **LD 867 An Act To Require Public Health Impact Statements for Certain Legislation**

**Sponsor:** Rep. Morales <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071913>

**State & Local Government**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill requires the Department of Health and Human Services, when requested by the chairs of a joint standing committee of the Legislature, to prepare and provide a public health impact statement for legislation before the committee. The public health impact statement must include the potential positive and negative public health effects of the legislation and considerations necessary to the decision-making process regarding the legislation and provide practical recommendations to increase the positive health effects and minimize negative health effects of the legislation.

## **LD 872 An Act To Forgive Education Debt for Certain Health Care Professionals Who Work in the State**

**Sponsor:** Mastraccio <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071922>

**Innovation, Development, Economic Advancement & Business**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill creates the Health Care Professional Education Loan Repayment Program administered by the Finance Authority of Maine to repay the education debt of certain health care professionals who agree to live and work in the State for a minimum of 5 years. Under the program, the authority will pay 20% of the education debt or \$25,000, whichever is lower, for each year of participation in the program up to a total of \$125,000 for a health care professional who is not employed in a federally designated health professional shortage area and 20% of the education debt or \$30,000, whichever is lower, for each year of participation in the program up to a total of \$150,000 for a health care professional who is employed in a federally designated health professional shortage area. The program is contingent on funding from the proceeds from the renewal of the contract for the operations of the State's wholesale spirits business.

## **LD 876 Resolve, Directing the Department of Health and Human Services, Office of Substance Abuse and Mental Health Services To Build Peer Respite Program Capacity in Maine by Implementing at Least One Peer Respite Program**

**Sponsor:** Rep. Madigan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071917>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This resolve directs the Department of Health and Human Services, office of substance abuse and mental health services to implement by means of a request-for-proposals process at least one peer respite program in the State to provide a voluntary, short-term residential program designed to support individuals experiencing, or at risk of, a psychiatric crisis.



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## **LD 880 An Act To Respond to Federal Changes to Social Programs**

**Sponsor:** Rep. Hymanson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071925>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** APP TBL CO

As amended, the bill would direct DHHS to increase Medicaid reimbursement rates, as appropriate, to account for the new state-imposed cost of providing paid time off to per diem workers.

## **LD 883 An Act To Establish the Opt-in Maine Paid Family Leave Insurance Program**

**Sponsor:** Rep. Daughtry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071928>

**Labor & Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill creates the Maine Paid Family Leave Insurance Program to provide wage-replacement benefits to persons who qualify for family medical leave. The program is funded by employee contributions and provides 2/3 of a person's average weekly wage or 100% of the state average weekly wage, whichever is lower, for up to 6 weeks in any 12-month period. Employee contributions are collected on a sliding scale based on wages.

## **LD 892 Resolve, To Require the Examination of Alternatives to the Service Provider Tax**

**Sponsor:** Sen. Vitelli <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071902>

**Taxation**

**Committee Status:** PASSED

**Public Hearing:** 3/6/2019 1:00 PM

**Final Status:** RESOLVE 2019, CH 81

This resolve directs DHHS in partnership with other state agencies to examine the service provider tax and alternatives to the tax and submit a report on their findings to the Tax Committee by March 1, 2020.

## **LD 899 An Act To Increase Access to Health Care by Attracting Qualified Physicians to Maine**

**Sponsor:** Rep. Corey <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071939>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 3/7/2019 1:30 PM

**Final Status:** DEAD

This bill amends the law regarding the temporary licensure of physicians to require the temporary licensure of a physician within 60 days of application for a temporary license when the Board of Licensure in Medicine determines temporary licensure of the physician is necessary to provide relief for a local or national emergency or for a situation in which the number of physicians is insufficient to supply adequate medical services or for the purpose of permitting the physician to serve as locum tenens for another physician. It reduces the fee for the temporary license from \$400 to \$100.

## **LD 915 An Act To Provide Adequate Reimbursement under MaineCare for Ambulance and Neonatal Transport Services**

**Sponsor:** President Jackso <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071956>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** APP TBL CO

This bill specifies that beginning September 1, 2019 the reimbursement rate for ambulance services under the MaineCare program may not be less than the average allowable reimbursement rate under Medicare and reimbursement for neonatal transport services under MaineCare must be at the average rate for critical care transport services under Medicare.



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## **LD 926 An Act To Protect Hospital Employees from Assault**

**Sponsor:** Rep. Hanley <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071998>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill provides that an assault on a hospital employee while the hospital employee is providing medical care is a Class C crime. It also provides that an assault on an emergency medical care provider while the emergency medical care provider is providing medical care is a Class C crime. Current law provides that an assault on an emergency medical care provider while the emergency medical care provider is providing emergency medical care is a Class C crime. The bill also corrects a cross-reference.

## **LD 931 An Act Concerning the Department of Health and Human Services**

**Sponsor:** Rep. Hymanson <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071975>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** APP TBL CO

As amended, the bill provides for reimbursement under the MaineCare program for prescription drug therapy services to treat obesity. The amendment also adds an appropriations and allocations section. The majority report provides for reimbursement under the MaineCare program for prescription drug therapy services to treat obesity. The General Fund Cost is approximately \$3M per year.

## **LD 934 Resolve, To Review the Implementation of the Maine Background Check Center Act**

**Sponsor:** Rep. Perry <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071991>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** RESOLVE 2019, CH 53

This resolve directs the Commissioner of Health and Human Services to convene a study group to assess the effects of the implementation of the system of background checks established by the Maine Background Check Center Act. The commissioner is required to submit a report by December 15, 2019 to the Health and Human Services Committee.

## **LD 942 An Act To Require Reimbursement for Medical Marijuana**

**Sponsor:** Rep. Collings <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072002>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:** 3/14/2019 1:00 PM

**Final Status:** DEAD

Part A of this bill requires a health insurance carrier to provide coverage for marijuana for medical use for a health plan enrollee who has received certification for the medical use of marijuana from an authorized medical provider. Carriers are required to directly reimburse a health plan enrollee for the costs of obtaining a medical marijuana certificate and the costs of medical marijuana. Part A also applies the same requirements to individual and group accidental injury and disability insurance. Part B of the bill requires an employer to reimburse an employee eligible for workers' compensation benefits for the costs of obtaining a medical marijuana certificate and the costs of medical marijuana.

## **LD 943 An Act To Allow Laser Spine Surgery in the State**

**Sponsor:** Rep. Stanley <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280071982>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 3/21/2019 1:00 PM

**Final Status:** DEAD

This bill allows the use of lasers during spine surgery.



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## **LD 949 An Act To Prevent Overdose Deaths**

**Sponsor:** Rep. Sylvester <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072019>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/1/2019 1:00 PM

**Final Status:** DEAD

This bill directs DHHS to certify 2 facilities in the State to provide safe and secure locations for people to self-administer previously obtained drugs. The bill requires the facilities to have health care personnel and other trained staff, to provide information concerning drug overdoses and diseases associated with drug use, to administer first aid or other medications in case of an overdose and to provide referrals to other services that clients of the facilities may need. The bill provides immunity from arrest or prosecution to clients and staff members acting in accordance with the provisions of the bill and creates a tolerance zone within 1/2 mile of each facility. The facilities are directed to report certain demographic and other information to the department, which is directed to analyze the information and report to the health and human services committee. The department is also directed to review the effectiveness of the facilities to determine whether to open additional facilities.

## **LD 964 Resolve, To Study Housing Options for Persons with Mental Health Challenges and Substance Use Disorder**

**Sponsor:** Rep. Beebe-Cen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072027>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/25/2019 1:00 PM

**Final Status:** DEAD

This resolve establishes the Study Commission to Assess Housing Needs of Persons with Mental Health Challenges and Substance Use Disorder and requires the study commission to assess the housing needs of persons who are living with mental health challenges and who have substance use disorder, with a focus on the needs of such individuals located in rural Maine and report its findings and recommendations to the Second Regular Session of the 129th Legislature.

## **LD 966 An Act To Ensure Safer Childhood Vaccines**

**Sponsor:** Rep. Harrington <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072040>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/30/2019 3:00 PM

**Final Status:** DEAD

This concept draft bill proposes to require that patient intake forms used by all health care facilities, including hospitals, emergency rooms, urgent care facilities, health care clinics and doctor's offices, include a question on the form regarding the date of the patient's most recent vaccine. This vaccine-related information will then be provided to the United States Department of Health and Human Services to aid its efforts to ensure safer childhood vaccines.

## **LD 968 An Act Making Supplemental Appropriations and Allocations for the Expenditures of State Government and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2020 and June 30, 2021**

**Sponsor:** Rep. Hubbell <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072067>

**Appropriations**

**Committee Status:**

**Public Hearing:**

**Final Status:**

Supplemental Budget (Biennial SFY 2020-21) Concept Draft



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**LD 969 An Act Making Supplemental Appropriations and Allocations for the Expenditures of State Government and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Year Ending June 30, 2019**

**Sponsor:** Rep. Hubbell <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072068>

**Appropriations**

**Committee Status:**

**Public Hearing:**

**Final Status:**

Supplemental Budget (Biennial SFY 2019) Concept Draft

**LD 972 Resolve, To Increase Access to Brain Injury Waiver Services**

**Sponsor:** Rep. Warren <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072070>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** APP TBL CO

This resolve directs the Department of Health and Human Services to increase the rates for services provided to MaineCare members receiving Home Support (Residential Habilitation) Level I under the brain injury waiver, rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 18, to no less than \$8.63 per quarter hour. It also allows up to 400 units of care coordination each year rather than only in the first year of receiving services under the waiver. The Department of Health and Human Services is directed to explore opportunities to provide additional telehealth services, including care coordination services, provided by both licensed medical personnel and nonlicensed personnel.

**LD 976 An Act To Require Additional Lead Screening for Children**

**Sponsor:** Rep. Morales <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072072>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 3/26/2019 1:00 PM

**Final Status:** PL 2019, CH 201

This law changes the definition of "lead poisoning" in the Lead Poisoning Control Act to mean a confirmed elevated level of blood lead that is equal to or exceeds 5 micrograms per deciliter. It also requires DHHS to report to the Legislature the Centers for Disease Control and Prevention changes the reference level at which it recommends public health actions be taken with respect to blood lead levels in children.

**LD 981 An Act To Implement the State's Recently Approved Request for a Section 1115 Demonstration for MaineCare**

**Sponsor:** Rep. O'Connor <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072077>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 3/25/2019 1:00 PM

**Final Status:** DEAD

This concept bill proposes to implement the State's request for approval of a so-called Section 1115 demonstration for MaineCare that was recently granted by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services. Under the bill, an individual who receives MaineCare benefits will be required to:

1. Work 20 hours a week;
2. Pay monthly premiums of up to \$40; and
3. Contribute \$10 if the individual goes to an emergency department for a nonemergency issue.



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**LD 984 Resolve, To Increase Funding for Children's Behavioral Health Issues in Order To Return to the State Children Who Are Currently Housed in Residential Treatment Systems outside of the State and To Suspend Certain Contracts Related to Psychiatric Residential Treatment Facilities**

**Sponsor:** Rep. Gramlich <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072079>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 3/29/2019 9:00 AM

**Final Status:** RESOLVE 2019, CH 54

This law requires the Department of Health and Human Services to negotiate reimbursement rates with providers to provide services to children returning to the State, including deviating from reimbursement rates established by department rules in order to access additional services.

**LD 987 An Act To Provide Autonomy for Health Care Providers To Practice Patient-centered Care by Amending the Laws Governing Medical Exemptions to Immunization Requirements**

**Sponsor:** Sen. Black <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072053>

**Education & Cultural Affairs**

**Committee Status:** DIV RPT

**Public Hearing:** 3/13/2019 1:00 PM

**Final Status:** DEAD

This bill provides that a medical exemption from immunization for the purposes of attendance at a nursery school, a child care facility, a family child care provider or an elementary, secondary or postsecondary school, or for employees at certain health care facilities, is at the sole discretion of the student's or employee's health care provider. It prohibits the adoption of rules or policies related to medical exemptions, including, but not limited to, rules or policies that establish requirements for medical exemptions and rules or policies requiring the review, acceptance or rejection of medical exemptions. The bill also removes the authority of school boards, the governing boards of private schools and municipalities to have more stringent immunization requirements than state law.

**LD 993 An Act To Expand Recovery Support Services Offered in Penobscot and Piscataquis Counties and the Greater Bangor Region To Improve Access, Treatment and Recovery for Those Affected by Substance Use Disorder by Designating a Regional Peer-supported Recovery Center**

**Sponsor:** Sen. Rosen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072059>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/25/2019 1:00 PM

**Final Status:** DEAD

This bill directs DHHS to contract with a regional peer-supported recovery center to expand recovery support services to all areas in Penobscot and Piscataquis counties and the greater Bangor region and provides \$1M in funding for the contract.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

**LD 1000 An Act To Make Supplemental Appropriations and Allocations for the Expenditures of State Government and To Change Certain Provisions of Law Necessary to the Proper Operations of State Government for the Fiscal Year Ending June 30, 2019**

**Sponsor:** Rep. Gattine <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072088>

**Appropriations**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019 CH 4

SFY 2019 Supplemental Budget Of note to hospitals: Part B repeals the limited lifetime maximum coverage and reimbursement of 24 months under the MaineCare program for buprenorphine and naloxone combination drugs for the treatment of addiction. Part C repeals the limited lifetime maximum reimbursement of 24 months under the MaineCare program for methadone for the treatment of addiction.

**LD 1001 An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2019, June 30, 2020 and June 30, 2021**

**Sponsor:** Rep. Gattine <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072089>

**Appropriations**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 343

SFY 2020-2021 Biennial Budget The biennial budget increases total spending from \$7.2 Billion in the current biennium to \$8.0 Billion in the next biennium.

Medicaid Expansion:

- State's share of expansion costs is budgeted at \$69M in SFY 2020 and \$78M in SFY 2021. With the federal match included, the total estimates for Medicaid expansion are \$482M and \$495M. These are by far the largest program increases in the budget.

- Another \$29M is set aside in a reserve account in the event of cost overruns from expansion.

- Finally, the budget calls for a fairly comprehensive study into the impact of expansion.

Hospital Tax Rebasing:

- Budget rebases the hospital tax to CY 2016 (from the current CY 2014).

- Increases the tax by approximately \$13.3M.

- 'Match' provided to hospitals in the amount of \$10.8M; this leaves a net hit to hospitals of \$2.5M per year.

Other:

- \$5.5M in opioid prevention money spread over two years of the biennium.

- \$5M per year increase in smoking cessation activities.

- \$2.5 M bump in medication assisted treatment of (state and federal).



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## **LD 1005    Resolve, To Establish a Pilot Project To Save Lives and Support People with Substance Use Disorder in Washington County**

**Sponsor:** Rep. Perry      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072086>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/25/2019      1:00 PM

**Final Status:** RESOLVE 2019, CH 98

This resolve establishes a pilot project in Washington County to provide treatment and recovery services for people with substance use disorder. The department is required to work with Healthy Acadia to develop the pilot project. The pilot project requires the establishment of a central coordinating telephone system available to anyone in Washington County at any time to assist individuals with accessing services related to substance use disorder treatment and recovery. The pilot project establishes a coordinating council made up of representatives of the community and organizations in the area involved in the health and welfare of Washington County residents. The council is responsible for providing a coordinated system of services for substance use disorder prevention, treatment and recovery and for developing and implementing a recovery resource fund to provide additional individualized services as part of a wraparound continuum of support and services.

## **LD 1006    Resolve, To Require the Development of Strategies for Reducing Health Disparities Based on Social Determinants**

**Sponsor:** Rep. Gattine      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072102>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/3/2019      1:00 PM

**Final Status:** DEAD

This resolve directs the Department of Health and Human Services to present to the Joint Standing Committee on Health and Human Services an action plan detailing strategies for reducing health disparities based on social determinants.

## **LD 1007    An Act To Expand and Enhance Maine's Behavioral Health Direct Care Workforce**

**Sponsor:** Rep. Gattine      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072098>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/19/2019      9:00 AM

**Final Status:** RESOLVE 2019, CH 99

This Resolve changes the educational requirements for behavioral health professionals providing children's home and community-based treatment to replace the requirement for a bachelor's degree to a minimum of 60 credit hours in a related field, 90 credit hours in an unrelated field combined with a plan for supervision and training or a high school diploma or equivalent with 3 years of experience working in the field combined with a plan for supervision and training. The educational requirements do not change the required behavioral health professional training or the prescribed time frames for that training. It also requires the Department of Health and Human Services to amend or establish contracts for training behavioral health professionals to train any additional individuals within existing resources, and authorizes the department to opt to charge individuals or their employers fees for training.

## **LD 1009    An Act To Provide Protections for Maine Patients Facing Step Therapy**

**Sponsor:** Rep. Warren      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072100>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** PTBE

**Public Hearing:** 3/14/2019      1:00 PM

**Final Status:** PL 2019, CH 295

This bill requires health insurance carriers to establish a process for prescription drug step therapy exceptions. It conforms the timeline for responding to a request for a step therapy override exception determination with the existing timeline for prior authorization requests. It clarifies the meaning of exigent circumstances and makes clear that a carrier is required to continue to provide access to the prescription drug subject to step therapy protocol during the consideration of a request for a step therapy override exception determination. It also adds a definition of "stable on a prescription drug" and clarifies that the provisions do not prevent a carrier from requiring an enrollee to try an interchangeable biological product.



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## **LD 1017 An Act Regarding the Elimination of Highly Toxic and Hazardous Chemicals in the Workplace**

**Sponsor:** *Sen. Carson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072106>

**Labor & Housing**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** RESOLVE 2019, CH 47

This Resolve requires the Department of Labor to develop a framework for identifying hazardous chemicals used in the workplace and identifying safer alternatives to those chemicals in collaboration with interested parties and employers and employees in industries that are likely to utilize hazardous chemicals by December 20, 2019.

## **LD 1028 An Act To Prevent and Reduce Tobacco Use with Adequate Funding and by Raising the Tax on Tobacco Products**

**Sponsor:** *Rep. McCreight* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072133>

**Taxation**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** PL 2019, CH 530

This law increases the tax on tobacco products, other than cigarettes, to 43% of the wholesale sales price, beginning January 2, 2020, and includes electronic smoking devices and liquids used in electronic smoking devices in the definition of "tobacco products." It provides that, if the tax on cigarettes is increased after January 2, 2020, the tax on smokeless tobacco and other tobacco products will be adjusted by a rate that is equivalent to the percentage change in the tax rate for one cigarette.

The law provides ongoing funding for tobacco cessation, ambulance rate increases (as provided in LD 915), CAH and "rural" hospital-based physician rate increases and rural health center rate increases and healthcare loan forgiveness tax credits (all as provided in LD 1350).

## **LD 1030 An Act To Amend the Laws Governing the Substance Use Disorder Services Commission**

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072137>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2019 1:00 PM

**Final Status:** PL 2019, CH 432

This law revises the membership and duties of the Substance Use Disorder Services Commission by introducing concepts like "intervention" and "recovery" and amending descriptions of individuals qualified to serve on the Commission.

## **LD 1052 An Act To Require Regular and Transparent Review of MaineCare Reimbursement Rates**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072164>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/3/2019 9:00 AM

**Final Status:** CARRY OVER

This bill establishes a regular review process for MaineCare reimbursement rates. The Department of Health and Human Services shall review all rates over a 3-year period except those that are already subject to regular review, based on cost, reimbursed at a capitated rate, or tied to Medicare or some other rates. The 3-year schedule and the reviews are required to be submitted to the joint standing committees of the Legislature having jurisdiction over health and human services matters and appropriations and financial affairs. The bill also establishes the MaineCare Reimbursement Rates Review Advisory Committee made up of stakeholders to provide advice and input to the department on rate reviews.



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## **LD 1072 An Act To Promote Workforce Education on Alzheimer's Disease and Dementia**

**Sponsor:** Rep. Craven <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072205>

**Health Coverage, Insurance & Financial Services**      **Committee Status:** ONTP  
**Public Hearing:** 3/21/2019 1:00 PM      **Final Status:** DEAD

This bill requires health care practitioners to disclose a diagnosis of Alzheimer's disease or dementia to an authorized representative or a family or household member except for a person that is expressly prohibited by the individual diagnosed. The health care practitioner making the diagnosis must also provide information regarding care planning services.

The bill requires that by January 1, 2023 every hospital must have a policy regarding the recognition and management of patients with Alzheimer's disease and dementia within that hospital and have the policy on file. The hospital must consult with the Department of Health and Human Services and statewide organizations with expertise in the field of Alzheimer's disease and dementia and include relevant portions of the federal Centers for Disease Control and Prevention "Healthy Brain Initiative" publication and any succeeding plans and the state plan regarding Alzheimer's disease and related dementias in Maine developed by DHHS.

The bill also requires continuing education requirements to be adopted by the Board of Licensure in Medicine, the Board of Osteopathic Licensure and the State Board of Nursing that relate to diagnosis, behavioral symptoms, respectful and effective communication, safety, signs of abuse and neglect and identifying signs of self-neglect by persons living alone with Alzheimer's or dementia. It also requires physician assistants to receive the same continuing education.

## **LD 1082 An Act To Provide for Alternative Pain Treatment before Treatment with Opioids**

**Sponsor:** Pres. Jackson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072181>

**Health Coverage, Insurance & Financial Services**      **Committee Status:** ONTP  
**Public Hearing:** 3/21/2019 1:00 PM      **Final Status:** DEAD

This bill prohibits an individual licensed to prescribe opioid medication from prescribing opioid medication to a patient who does not have an active prescription for opioid medication unless the patient has completed 24 sessions of alternative pain treatment. This bill exempts from this requirement patients who have pain associated with cancer treatment, palliative care in conjunction with a serious illness, end-of-life and hospice care, medication-assisted treatment for substance use disorder and other circumstances determined in rule by the Department of Health and Human Services. This bill requires an individual licensed to prescribe opioid medication to discuss alternative pain treatment with a patient who has an active prescription for opioid medication. This bill also provides that a referral from an individual licensed under the Maine Revised Statutes, Title 32 whose scope of practice includes prescribing opioid medication is not required for coverage for alternative pain treatment and that the cost of covered alternative pain treatment may not exceed the cost of a visit to a primary care provider.

## **LD 1085 An Act To Ensure That Maine Residents Have Adequate and Affordable Access to Health Care**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072184>

**Health Coverage, Insurance & Financial Services**      **Committee Status:** TABLED  
**Public Hearing:**      **Final Status:** CARRY OVER

This concept draft bill proposes to ensure that consumer protections in health insurance are maintained under state law.



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## **LD 1106 An Act To Improve the Health and Economic Security of Older Residents**

**Sponsor:** Rep. Brennan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072232>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** CARRY OVER

This bill removes the asset test for the Medicare savings program and the elderly low-cost drug program. It also increases the income eligibility levels for the Medicare savings program and the elderly low-cost drug program to the levels in effect prior to Public Law 2011, chapter 657. The Department of Health and Human Services is required to submit any necessary state plan amendments for approval for the increases in income eligibility.

## **LD 1110 An Act To Establish a Local Option for Sales Tax**

**Sponsor:** Rep. Gramlich <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072238>

**Taxation**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill allows a municipality to impose a local option sales tax if approved by referendum of the voters in that municipality. The referendum question must identify the rate of the local option sales tax, the categories of taxable items the local option sales tax will apply to and the purposes for which the revenue will be used. The local option sales tax would be collected and administered by the State in the same manner as the sales and use tax. Revenue from the local option sales tax is distributed to the municipality imposing the local option sales tax. Revenue received by a municipality may not be used to reduce or eliminate funding otherwise due the municipality under other provisions of law.

## **LD 1112 An Act To Provide Employee Vaccination Compensation**

**Sponsor:** Rep. Fecteau <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072247>

**Labor & Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill establishes the right of an employee to refuse any vaccine required or recommended by the employer without coercion, consequence or retaliation by the employer and the employee's right to receive the vaccination at the employee's workplace and at the expense of the employer. It also requires the employer to compensate the employee for any medical expenses incurred by the employee due to an injury or adverse reaction to a vaccine and to provide any necessary paid time off to the employee, in addition to any sick time, vacation time or other benefit offered by the employer. Compensation for the employee's injury or adverse reaction to a vaccine is provided in addition to any remedy available under the workers' compensation laws.

## **LD 1125 Resolve, To Require Reimbursement for Bed-hold Days in Adult Family Care Homes**

**Sponsor:** Sen. Timberlake <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072277>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2019 9:00 AM

**Final Status:** RESOLVE 2019, CH 94

This law requires DHHS to reimburse adult family care homes for up to 30 bed-hold days per calendar year in the same manner as residential care facilities are reimbursed.



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## **LD 1126 Resolve, To Classify Employee Health Insurance as a Fixed Cost for MaineCare Reimbursement in Nursing Homes**

**Sponsor:** *Sen. Timberlake* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072278>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2019 9:00 AM

**Final Status:** APP TBL CO

This resolve requires the Department of Health and Human Services to amend its rule (Section 67, Principles of Reimbursement for Nursing Facilities) to move health insurance costs for personnel from direct care and routine cost components to fixed costs components.

## **LD 1133 An Act To Require That Hospital Liens Be Satisfied on a Just and Equitable Basis**

**Sponsor:** *Rep. Warren* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072294>

**Judiciary**

**Committee Status:** PTBE

**Public Hearing:** 4/17/2019 1:30 PM

**Final Status:** PL 2019, CH 270

This law requires that a hospital's statutory lien be reduced by the patient's proportionate share of a patient's litigation or other recovery costs, including, but not limited to, reasonable attorney's fees. It also provides that a hospital lien must be satisfied on a just and equitable basis considering factors that diminish the patient's claim such as questions of liability or comparative negligence or other legal defenses, exigencies of trial and limits of insurance coverage.

## **LD 1135 Resolve, To Increase Funding for Assertive Community Treatment**

**Sponsor:** *Rep. Madigan* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072299>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/9/2019 1:00 PM

**Final Status:** APP TBL CO

This resolve requires DHHS to increase the MaineCare reimbursement rates for assertive community treatment by 25%, contract with a 3rd party to conduct a rate study of reimbursement rates for assertive community treatment and report with findings by January 30, 2020. The department is authorized to set new rates based on the rate study as long as the rates are no lower than those in effect on April 1, 2019.

## **LD 1138 An Act To Ensure Health Insurance Coverage for Treatment for Childhood Postinfectious Neuroimmune Disorders Including Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections and Pediatric Acute-onset Neuropsychiatric Syndrome**

**Sponsor:** *Rep. Bailey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072304>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** TABLED

**Public Hearing:** 3/28/2019 1:00 PM

**Final Status:** CARRY OVER

This bill requires health insurance coverage for treatment of childhood postinfectious neuroimmune disorders, a group of medical conditions that includes autoimmune encephalopathic conditions including pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome. The treatments authorized include certain treatments described as the standard of care in a series of articles in the 2017 Journal of Child and Adolescent Psychopharmacology, Volume 27, Number 7. The requirements apply to all individual and group policies and contracts issued or renewed on or after January 1, 2020.



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## **LD 1146 An Act To Ensure the Provision of Housing Navigation Services to Older Adults and Persons with Disabilities**

**Sponsor:** Rep. McCreight <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072289>

**Health & Human Services**

**Committee Status:** TABLED

**Public Hearing:** 4/23/2019 1:00 PM

**Final Status:** CARRY OVER

This bill creates within the Department of Health and Human Services a housing navigator who:

1. Assists disabled and elderly persons in locating housing, transitioning between housing settings and accessing home repair and home modification services and materials;
2. Maintains and makes publicly available housing assistance information and resources; and
3. Identifies gaps in housing assistance needs of elderly persons and persons with disabilities and periodically submits a report on the gaps to the director of the Department of Health and Human Services' office of aging and disability services for inclusion in the state plan on aging.

## **LD 1155 An Act To Protect Patients and the Prudent Layperson Standard**

**Sponsor:** Speaker Gideon <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072313>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 3/28/2019 1:00 PM

**Final Status:** PL 209, CH 238

This law establishes a definition of "emergency medical condition" in the law governing utilization review in the Maine Insurance Code and makes clear that the determination of an emergency medical condition relies on the prudent layperson standard regardless of the final diagnosis that is given. It clarifies that before a carrier denies benefits or reduces payment for an emergency service based on a determination of the absence of an emergency medical condition or a determination that a lower level of care was needed, the carrier's utilization review must be done by a board-certified emergency physician who is licensed in this State and that the review must include a review of the enrollee's medical record related to the emergency medical condition subject to disput



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## **LD 1162 An Act To Further Expand Drug Price Transparency**

**Sponsor:** *Sen. Vitelli* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072309>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 4/16/2019 1:00 PM

**Final Status:** PL 2019, CH 470

The law requires prescription drug manufacturers to report annually to the Maine Health Data Organization no later than January 30, 2020 and annually thereafter, on prescription drug prices when the manufacturer has during the prior calendar year increased the wholesale acquisition cost of a brand-name drug by more than 20% per pricing unit, increased the wholesale acquisition cost of a generic drug that costs at least \$10 per pricing unit by more than 20% per pricing unit or introduced a new drug for distribution in this State when the wholesale acquisition cost is greater than the amount that would cause the drug to be considered a specialty drug under the Medicare Part D program.

The law also requires prescription drug manufacturers, wholesale drug distributors and pharmacy benefits managers to provide pricing component data per pricing unit of a drug within 60 days of a request by the Maine Health Data Organization. The amendment defines "pricing component data" as data unique to each manufacturer, wholesale drug distributor or pharmacy benefits manager that evidences the cost to make a prescription drug available to consumers and the payments received by each manufacturer, wholesale drug distributor or pharmacy benefits manager to make a prescription drug available to consumers, taking into account any price concessions, and that is measured uniformly among the entities, as determined by rules adopted by the organization.

It provides that reported information is confidential, except that information may be shared in the aggregate and with the Bureau of Insurance for enforcement purposes.

Beginning November 1, 2020 and annually thereafter, MHDO must produce and post on its publicly accessible website an annual report, including information developed from the notifications and disclosures received from prescription drug manufacturers, wholesale drug distributors and pharmacy benefits managers on trends in the cost of prescription drugs, an analysis of manufacturer prices and price increases, the major components of prescription drug pricing along the supply chain and the impacts on insurance premiums and cost sharing and other information the organization determines is relevant to providing greater consumer awareness of the factors contributing to the cost of prescription drugs in the State.

## **LD 1165 An Act To Support the Operation of Fixed-wing Air Medical Transport in Northern Maine**

**Sponsor:** *Pres. Jackson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072312>

**Transportation**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill provides funding to the Northern Light A.R. Gould Hospital in Presque Isle to fund and support the operation of a fixed-wing aircraft out of Caribou.

## **LD 1197 An Act To Amend the Law Prohibiting the Denial by Health Insurers of Referrals by Out-of-network Providers**

**Sponsor:** *Sen. Foley* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072383>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 3/28/2019 1:00 PM

**Final Status:** PL 2019, CH 178

The law limits the existing law that prohibits carriers from denying payment for covered health care services solely on the basis that the referral for services was made by an out-of-network provider. It limits that prohibition only to referrals made by out-of-network direct primary care providers. It prohibits a carrier from requiring an enrollee to pay a greater cost-sharing amount than the cost-sharing that would apply to the same service if the service was referred by a participating primary care provider. It also allows a carrier to require a direct primary care provider who is not a member of the carrier's provider network to attest that the provider is a direct primary care provider through a written attestation or copy of the direct primary care agreement with the enrollee.



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## **LD 1199 An Act To Protect the Safety of Health Care Workers**

**Sponsor:** *Sen. Dow* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072386>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill provides that an assault on a health care practitioner while that health care practitioner is providing medical care or an assault on a hospital employee or person working for a hospital on a contractual basis while that employee or person is performing duties related to the provision of care for a patient or a prospective patient is a Class C crime.

## **LD 1202 Resolve, To Develop a Plan To Improve Service Delivery to Individuals Receiving Medicaid Home and Community-based Services**

**Sponsor:** *Rep. Farnsworth* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072389>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/3/2019 9:00 AM

**Final Status:** DEAD

This resolve directs DHHS to convene a stakeholder group to review the Medicaid home and community-based settings rules, review past efforts by the State to come into compliance with those rules and make recommendations about how to bring the State into compliance and recommendations on necessary statutory and regulatory changes.

## **LD 1204 An Act To Eliminate the Cap on Weekly Benefits in Workers' Compensation Cases**

**Sponsor:** *Rep. Sylvester* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072391>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

Current law caps the weekly benefit payable under the laws governing workers' compensation to a maximum amount set in statute or a percentage of the state average weekly wage, whichever is higher. This bill eliminates the cap on the weekly benefits.

## **LD 1205 An Act To Allow Full Retirement Benefits under the Maine Workers' Compensation Act of 1992**

**Sponsor:** *Rep. Sylvester* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072392>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill strikes the provisions of law that require an employer to offset an individual's workers' compensation benefits based on retirement or pension benefits being received by that individual. It also clarifies the law to avoid the interpretation of the Maine Supreme Court in *Urrutia v. Interstate Brands International*, 2018 ME 24, 179 A.3d 312, which allowed an employer to take a credit for past overpayments, due to the employer's failure to take an allowable offset of benefits, by reducing the employer's ongoing payments of workers' compensation benefits.



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## **LD 1229    Resolve, To Establish the Committee To Study and Develop Recommendations To Address Guardianship Challenges That Delay Patient Discharges from Hospitals**

**Sponsor:** Rep. McCreight    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072473>

**Judiciary**

**Committee Status:** STUDY TBL

**Public Hearing:** 4/24/2019    1:30 PM

**Final Status:** STUDY TBL CO

This resolve establishes a study group to develop recommendations to address guardianship, conservatorship and authorization of transaction challenges that result in extended hospitalization of patients clinically qualified for discharge from a hospital.

## **LD 1233    An Act Regarding Offers of Settlement**

**Sponsor:** Rep. Bailey    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072481>

**Judiciary**

**Committee Status:**

**Public Hearing:** 4/17/2019    1:30 PM

**Final Status:** DEAD

This bill provides that prior to 28 days before trial, a party to a lawsuit may serve on the adverse party a written offer to stipulate to the entry of judgment for the whole or part of the claim. It sets forth how an offer or counteroffer may be accepted or rejected. It provides for the payment of costs if an offer is rejected. It provides that reasonable expert witness fees and expenses included as discretionary costs include fees associated with consulting, preparation and testifying at deposition or trial.

## **LD 1235    An Act To Increase Safety in Health Care Facilities**

**Sponsor:** Rep. Riseman    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072485>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/1/2019    10:00 AM

**Final Status:** DEAD

Under current law, hospitals are required to annually adopt a safety and security plan to protect patients, visitors and employees of the hospital from aggressive and violent behavior. This bill extends that requirement to all health care facilities.

## **LD 1236    An Act To Clarify the Laws Governing the Licensing of Paramedics**

**Sponsor:** Rep. Handy    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072493>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 4/25/2019    1:00 PM

**Final Status:** DEAD

This bill defines paramedic and paramedic emergency medical treatment in the laws governing the provision of emergency medical treatment. It also authorizes the Emergency Medical Services' Board to establish by rule appropriate licensure levels for paramedics and the qualifications for persons to hold those licenses.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)



## LD 1239 An Act To Mandate Paid Maternity and Parental Leave

**Sponsor:** Rep. Collings <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072500>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 4/19/2019 9:00 AM

**Final Status:** DEAD

This bill requires employers with one to 49 employees to provide 2 weeks of paid maternity leave, including existing benefits, to an employee who gives birth and one week of paid parental leave to an employee whose spouse or domestic partner gives birth. Employers with more than 49 employees are required to provide 4 weeks of paid maternity leave, including existing benefits, to an employee who gives birth and 2 weeks of paid parental leave to an employee whose spouse or domestic partner gives birth. The bill also includes provisions regarding the protection of existing benefits, position restoration, denial of rights and judicial enforcement similar to the provisions of the family medical leave laws.

## LD 1256 An Act To Provide a Health Care Preceptor Tax Credit

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072492>

**Taxation**

**Committee Status:** APP TBL

**Public Hearing:** 4/17/2019 10:00 AM

**Final Status:** STUDY TBL CO

This bill establishes a refundable tax credit in the amount of \$500 per student, up to a maximum of \$1,500 per year, for a health care preceptor who provides, without compensation, instruction to and supervision of advanced practice registered nursing students in an approved course of study. A health care preceptor may be a licensed physician, physician's assistant or advanced practice registered nurse.

## LD 1261 An Act To Authorize Certain Health Care Professionals To Perform Abortions

**Sponsor:** Speaker Gideon <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072502>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 5/1/2019 10:00 AM

**Final Status:** PL 2019, CH 262

This law allows a physician assistant or an advanced practice registered nurse licensed as such in this State to perform abortions, in addition to a licensed allopathic or osteopathic physician.

## LD 1263 An Act Regarding Telehealth

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072449>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** PTBE

**Public Hearing:** 4/4/2019 1:00 PM

**Final Status:** PL 2019, CH 289

This law does the following.

1. It provides immunity from liability to health care practitioners who voluntarily provide health care services through telehealth in the same manner as immunity is provided to health care practitioners who voluntarily provide health care services in person.
2. It requires carriers that offer health plans in this State to provide coverage for health care services provided through telehealth services in the same manner as coverage is provided for services provided in person and sets forth certain standards for coverage of telehealth services.
3. It requires telemonitoring coverage where appropriate.
4. It does not allow carriers to restrict types of telehealth equipment or technology as long as they meet existing standards.
4. It clarifies that carriers may apply prior approval and credentialing requirements for providers for services provided through telehealth services only if the requirements are the same as are applied for services provided in person.
4. It makes the bill's provisions apply to health insurance policies issued or renewed on or after January 1, 2020.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 1264 An Act Relating to Insurance Coverage for Screening Mammograms**

**Sponsor:** *Sen. Breen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072450>

**Health Coverage, Insurance & Financial Services**      **Committee Status:** ONTP  
**Public Hearing:** 4/9/2019 2:30 PM      **Final Status:** DEAD

This bill amends the definition of "screening mammogram" to include 3-dimensional tomosynthesis for purposes of required health insurance coverage and reimbursement by individual plans, group plans, health maintenance organizations and nonprofit hospital and medical service organizations.

## **LD 1272 An Act To Increase Access to Low-cost Prescription Drugs**

**Sponsor:** *President Jackso* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072458>

**Health Coverage, Insurance & Financial Services**      **Committee Status:** APP TBL  
**Public Hearing:** 4/17/2019 10:00 AM      **Final Status:** PL 2019, CH 472

This law establishes a wholesale importation program for prescription drugs from Canada by or on behalf of the State in order to provide cost savings to consumers. The law also specifies that the program may not be implemented until the State has received federal approval and certification. It directs the Department of Health and Human Services to apply for federal approval no later than May 1, 2020.

## **LD 1274 An Act To Enact the Health Insurance Consumer Assistance Program**

**Sponsor:** *Sen. Sanborn* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072460>

**Health Coverage, Insurance and Financial Services**      **Committee Status:** APP TBL  
**Public Hearing:**      **Final Status:**

This bill establishes the Health Insurance Consumer Assistance Program in the Department of Professional and Financial Regulation, Bureau of Insurance to provide support for consumers, including prospective consumers, of health insurance and to health insurance customer assistance programs and health insurance ombudsman programs. Some of the services the new program may provide include assisting with filing complaints and appeals regarding decisions made by a group health plan, health insurance carrier or independent review organization and obtaining health insurance premium tax credits on behalf of consumers. The Superintendent of Insurance is required to contract with a nonprofit, independent health insurance consumer assistance entity that is not an insurer to operate the consumer assistance program, and funding is provided for that requirement.

## **LD 1275 An Act To Support Access to Health Services for Homeless Youth in Maine**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072462>

**Health & Human Services**      **Committee Status:** OTPA  
**Public Hearing:** 4/12/2019 9:00 AM      **Final Status:** PL 2019, CH 206

Under current law, a minor who has been living separately from parents or legal guardians for at least 60 days and is independent of parental support may provide consent to all medical, mental, dental and other health counseling and services.

This law allows a minor to provide consent to all medical, mental, dental and other health counseling and services by proving that the minor is living separately and is independent of parental support through various means such as a written, signed statement to that fact from the director of a governmental or nonprofit agency that provides services to homeless persons or an attorney representing the minor or proof of filing for emancipation.

This law also provides immunity to a health care practitioner who provides services to a minor if the minor consented to those services and provided proof of living separately and independently. Finally, it prohibits a minor or other person from disaffirming the consent given by the minor solely because the minor is a minor.



## **LD 1281    Resolve, To Create a Committee To Explore Regional Cooperation for Affordable Health Insurance**

**Sponsor:** *Rep. Tepler*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072522>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:**    5/9/2019    1:00 PM

**Final Status:**    DEAD

This resolve establishes the Committee To Explore Regional Cooperation for Affordable Health Insurance, which is required to study providing a more affordable health insurance option to middle-income individuals and small businesses, including convening a multistate conference to draft a proposal for a nonprofit health insurance cooperative

## **LD 1288    An Act To Establish a MaineCare Reimbursement Rate Review Process and the MaineCare Independent Rate Commission**

**Sponsor:** *Rep. Farnsworth*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072528>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:**    4/3/2019    9:00 AM

**Final Status:**    DEAD

This bill establishes a process by which the Department of Health and Human Services maintains a schedule of MaineCare program reimbursement rate reviews in which each rate is reviewed at least every 5 years. Under this process, the department reviews a rate for access, service, quality and use of service and compares the rate reimbursed with available benchmarks, including Medicare rates and usual and customary rates paid by private parties, and uses qualitative tools to assess whether reimbursements are sufficient to allow for provider retention and recipient access and to support appropriate reimbursement of high-value services. The department is required to provide a report of its review to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs, the MaineCare Independent Rate Commission, a 24-member group of interested parties providing oversight of the rate review process, and stakeholders. After holding public meetings and consulting stakeholders and stakeholder groups and consultation with the Department of Administrative and Financial Services, Bureau of the Budget, the department makes recommendations on the MaineCare reimbursement rates to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs to assist in developing the department's budget.

## **LD 1295    An Act To Determine the Need To Increase the Number of Forensic Emergency and Crisis Beds**

**Sponsor:** *Rep. Talbot Ros*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072561>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:**    CARRY OVER

This concept draft bill proposes to direct DHHS and the Department of Corrections to determine the current need for forensic emergency and crisis beds to ensure the prompt and humane treatment of arrested individuals who are suffering from mental illness and awaiting trial.

## **LD 1308    An Act To Better Fund Nursing Homes in the State To Better Help the Elderly and Disabled**

**Sponsor:** *Sen. Timberlake*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072551>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:**    4/5/2019    9:00 AM

**Final Status:**    DEAD

This concept draft bill proposes to enact measures designed to improve the funding of nursing homes in the State.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 1309    An Act To Index MaineCare Reimbursement to Nursing Homes and Other Adult Care Facilities to Increases in the Minimum Wage**

**Sponsor:** *Sen. Timberlake*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072552>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/5/2019 9:00 AM

**Final Status:** DEAD

This bill increases the reimbursement rates under the MaineCare program to nursing facilities, adult family care homes and residential care facilities by the amount of the minimum wage increase that occurs on January 1st of each year as outlined in the Maine Revised Statutes, Title 26, section 664, subsection 1. The increases in reimbursement rates must be retroactive to the date of the increase in the minimum wage.

## **LD 1313    An Act To Enact the Maine Death with Dignity Act**

**Sponsor:** *Rep. Hymanson*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072574>

**Health & Human Services**

**Committee Status:** DIV. RPT

**Public Hearing:** 4/10/2019 9:00 AM

**Final Status:** PL 2019, CH 271

This law enacts the Maine Death with Dignity Act authorizing a person who is 18 years of age or older, who meets certain qualifications and who has been determined by the person's attending physician to be suffering from a terminal disease, as defined in the Act, to make a request for medication prescribed for the purpose of ending the person's life.

## **LD 1314    An Act To Extend Protections for Genetic Information**

**Sponsor:** *Rep. White*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072577>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 4/2/2019 1:00 PM

**Final Status:** PL 2019 CH 208

This law requires that an insurer obtain the informed written consent of an individual before requesting, requiring, purchasing or using any information from an entity providing direct-to-consumer genetic testing in connection with the issuance, withholding, extension or renewal of an insurance policy for life, credit life, disability, long-term care, accidental injury, specified disease, hospital indemnity or credit accident insurance or an annuity.

## **LD 1315    An Act To Support Medically Monitored Crisis Support and Intervention**

**Sponsor:** *Rep. Gattine*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072578>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/23/2019 1:00 PM

**Final Status:** POCKET

This bill directs the Department of Health and Human Services to provide for an enhanced crisis stabilization reimbursement rate under the MaineCare program for medically monitored crisis support and intervention provided to persons 18 years of age or older with mental health and co-occurring substance use disorders who voluntarily seek treatment.

## **LD 1325    An Act To Allow Workplace Substance Use Testing for Fentanyl, Hydromorphone, Hydrocodone, Oxycodone and Oxymorphone Use at the Employer's Discretion**

**Sponsor:** *Sen. Keim*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072586>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 4/3/2019 9:00 AM

**Final Status:** DEAD

This bill allows an employer to test an employee or an applicant for employment for fentanyl, hydromorphone, hydrocodone, oxycodone and oxymorphone use during any substance use test administered by the employer.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 1337    An Act To Save Lives by Establishing a Homeless Opioid Users Service Engagement Program within the Department of Health and Human Services**

**Sponsor:** *Rep. Gattine*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072648>

**Health & Human Services**

**Committee Status:** PASSED

**Public Hearing:**

**Final Status:** RESOLVE 2019, CH 105

This Resolve establishes within DHHS a 24-month pilot program to provide rapid access to low-barrier treatment for substance use disorders and stable housing to support recovery and create stability for 50 opioid users who are among the most vulnerable and unstable in the State.

## **LD 1345    An Act To Ensure a Fair Workweek**

**Sponsor:** *Rep. Melaragno*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072643>

**Labor & Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill requires employers who employ 5 or more employees in the State to provide hourly employees at least 2 weeks' prior notice of the employees' work schedules, with compensation owed for schedule changes under certain circumstances. The bill also requires these employers to keep certain business records for at least 3 years. The bill provides that the Department of Labor, Bureau of Labor Standards may investigate possible violations and receive complaints of possible violations from the public. A fine of \$50 per day is due for any noncompliance. The Attorney General may also file a civil action seeking additional remedies. The department may adopt rules regarding compliance with and enforcement of these provisions, and the bureau is required to report to the Legislature periodically on violations of the law and the bureau's efforts.

## **LD 1350    An Act To Improve Rural Health Care**

**Sponsor:** *Pres. Jackson*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072633>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/3/2019 9:00 AM

**Final Status:** APP TBL CO

MHA BILL This bill provides that, for taxable years beginning on or after January 1, 2019, student loan payments made by a taxpayer's employer directly to a lender on behalf of a qualified health care employee are not included in federal adjusted gross income for Maine income tax purposes. The bill also directs the Department of Health and Human Services to amend its rule regarding reimbursement to rural and nonrural hospitals, acute care critical access hospitals and rural health clinics.

## **LD 1352    An Act To Provide for Consistency Regarding Persons Authorized To Conduct Examinations for Involuntary Hospitalization and Guardianship**

**Sponsor:** *Sen. Gratwick*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072635>

**Judiciary**

**Committee Status:** PTBE

**Public Hearing:** 4/24/2019 1:30 PM

**Final Status:** PL 2019, CH 276

This law changes the Maine Uniform Probate Code in the provision governing professional evaluation in an adult guardianship matter to replace the term "licensed physician or psychologist" with the term "medical practitioner," the definition of which is added to the provision by the bill and is the same as under Title 34-B, section 3801, which provides definitions for provisions governing hospitalization by psychiatric hospitals.



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33 Fuller Road, Augusta, Maine 04330

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## **LD 1353 An Act To Establish Transparency in Primary Health Care Spending**

**Sponsor:** *Sen. Sanborn* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072636>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** PTBE

**Public Hearing:** 4/25/2019 1:00 PM

**Final Status:** PL 2019, CH 244

The law requires the Maine Quality Forum to submit an annual report, beginning January 15, 2020, to DHHS and the Legislature based on claims data reported to the Maine Health Data Organization and information on methods of reimbursement for primary care reported by insurers. The annual report is required to include the percentage of total medical expenditures paid for primary care by commercial insurers, the MaineCare program, Medicare, the organization that administers health insurance for state employees and the Maine Education Association benefits trust, the average percentage of total medical expenditures paid for primary care across all payors and the methods used by these organizations to pay for primary care. The amendment also requires the Maine Quality Forum to consult with other state and national agencies and organizations on best practices in health care spending reporting.

## **LD 1360 Resolve, To Expand Eligibility for Presumptive Eligibility Determinations by Hospitals**

**Sponsor:** *Rep. Fecteau* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072673>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/8/2019 10:00 AM

**Final Status:** DEAD

This resolve directs DHHS to amend the department's Chapter 332, Part 18: Presumptive Eligibility Determined by Hospitals regarding expanding hospital presumptive eligibility, hospital presumptive eligibility cards, assisting individuals with MaineCare application forms and performance standards for qualified hospitals to require that 85% of presumptive eligibility determinations made will be found eligible for full MaineCare coverage.

## **LD 1361 An Act Regarding Health Care Providers and Patient Trust**

**Sponsor:** *Rep. O'Neil* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072682>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill prevents the State from requiring persons licensed by the Board of Osteopathic Licensure or the Board of Licensure in Medicine, including physician assistants, or the State Board of Nursing to give patients information that is medically inaccurate or perform medical services that are inconsistent with evidence-based standards. It also provides that the State may not prohibit a person licensed under these professional boards from providing patients with medically accurate information or evidence-based medical services

## **LD 1362 An Act To Fund Opioid Treatment by Establishing an Excise Tax on Manufacturers of Opioids**

**Sponsor:** *Rep. O'Neil* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072684>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 4/11/2019 1:00 PM

**Final Status:** APP TBL CO

This bill establishes the Opioid Stewardship Fund within the Fund for a Healthy Maine for the purpose of supporting opioid use disorder prevention, treatment and recovery funded by an excise tax of 0.1¢ per morphine milligram equivalent assessed against opioid drug manufacturers for opioid drugs purchased by consumers in the State.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)



**LD 1377    An Act To Enhance and Improve the Maine Developmental Services Oversight and Advisory Board and To Establish an Independent Oversight Panel To Review Deaths of and Serious Injuries to Persons with Intellectual Disabilities or Autism**

**Sponsor:** Rep. Madigan    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072705>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/3/2019 9:00 AM

**Final Status:** CARRY OVER

This bill establishes the Panel To Review Deaths of and Serious Injuries to Persons with Intellectual Disabilities or Autism. The panel coordinator must review all cases of death of and serious injury to persons with intellectual disabilities or autism receiving adult developmental services and determine those that require further review by the panel. The panel has access to records necessary for the review. The panel must provide reports to the Commissioner of Health and Human Services and the Maine Developmental Services Oversight and Advisory Board with findings and recommendations. The panel is required to provide reports to the Legislature on an annual basis and may provide trend analyses to the Legislature as necessary. Legislative reports are public documents. The bill also makes changes to the laws governing the Maine Developmental Services Oversight and Advisory Board.

**LD 1384    An Act Relating to Complementary and Alternative Medicine Licensure**

**Sponsor:** Sen. Moore    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072698>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill establishes a licensing requirement for holistic health practitioners, defines "holistic health practitioner," establishes applicant eligibility requirements and license renewal requirements and establishes the scope of practice.

**LD 1387    An Act To Increase Access to Safe and Affordable Prescription Drugs**

**Sponsor:** Pres. Jackson    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072701>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:**

**Final Status:** CARRY OVER

This bill, using the guidance developed by the federal Department of Health and Human Services, Food and Drug Administration, enacts the Maine Pharmaceutical Drug Safety Act to allow an individual in Maine to import prescription drugs from Canada as long as specific criteria are met, including that the drug is imported for personal use, that the individual importing the drug has a valid prescription, that the drug does not present an unreasonable risk to the individual and that no more than a 90-day supply of the drug is imported. The prescription drug to be imported must also meet specific requirements. The importation of controlled substances and prescription drugs for sale or resale is specifically prohibited.



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33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)



## **LD 1389 An Act To Address Transparency, Accountability and Oversight of Pharmacy Benefit Managers**

**Sponsor:** *Sen. Pouliot* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072712>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill requires that pharmacy benefit managers, which are entities that manage an insurer's prescription drug coverage, be registered by the Department of Health and Human Services. It sets several standards for registration including:

1. Allowing the department to revoke, suspend or place on probation a pharmacy benefit manager's registration for fraudulent activities, to protect the safety and interest of a consumer or if the pharmacy benefit manager violates state law;  
2. Setting out required pharmacy benefit manager business practices, including:

A. Placing a fiduciary duty on the managers with respect to the insurers who are the managers' clients;  
B. Prohibiting the manager from entering into a contract that prohibits a pharmacy or pharmacist from recommending a lower cost or alternative prescription medication than the medication under a covered person's prescription drug plan;  
C. Prohibiting the manager from requiring accreditation or certification for a pharmacy inconsistent with, more stringent than or in addition to those required by the Maine Board of Pharmacy and other state and federal authorities;  
D. Limiting the amount of payment required by a covered person for a prescription drug at the point of sale; and  
E. Prohibiting conflicts of interest; and

3. Requiring an annual report from a pharmacy benefit manager that details the rebates received by the pharmacy benefit manager from pharmaceutical manufacturers for use of the manufacturers' prescription drugs and the disposition of those rebates.

## **LD 1409 An Act To Improve Price Transparency of Prescription Drugs Sold in Maine**

**Sponsor:** *Sen. Diamond* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072758>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 4/16/2019 10:00 AM

**Final Status:** DEAD

Under current law, pharmacy benefits managers are required to register with the State. This bill imposes additional requirements on pharmacy benefits managers. The bill also requires that a carrier or pharmacy benefits manager certify on an annual basis that each health plan offered in this State by the carrier will pass on at least 50% of any prescription drug savings and rebates negotiated by the carrier's pharmacy benefits manager for the benefit of enrollees in the health plan.

In addition, the bill directs the Maine Health Data Organization to annually report information related to prescription drug costs and prescription drug price increases. The bill also directs the Superintendent of Insurance to require certain information related to price increases from drug manufacturers.

## **LD 1410 An Act To Create Paid Family and Medical Leave Benefits**

**Sponsor:** *Speaker Gideon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072759>

**Labor & Housing**

**Committee Status:**

**Public Hearing:** 4/19/2019 9:00 AM

**Final Status:** CARRY OVER

This bill establishes a paid family and medical leave benefits program administered by the Department of Labor. It is in addition to any existing program offered by employers.

The program provides up to 12 weeks of family leave and up to 20 weeks of medical leave to eligible covered individuals. An individual is eligible for leave under the program after working 26 weeks or more for any employer in the 12 months prior to submitting an application or if the individual is self-employed and has elected to be part of the program.

The maximum weekly benefit amount is capped at 100% of the state average weekly wage. The weekly benefit amount is 90% of the portion of the covered individual's average weekly wage that is equal to or less than 50% of the state average weekly wage and 67% of the portion of the covered individual's average weekly wage that is more than 50% of the state average weekly wage.

Funds for administrative costs and payment of benefits will come from a 0.55% payroll tax on employees. The rate of contribution is capped at 0.55% in the form of a payroll tax.

The bill requires payroll contributions to begin 2021 and benefits to begin in 2022.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 1418 An Act To Address Maine's Shortage of Behavioral Health Services for Minors**

**Sponsor:** Rep. McCreight <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072788>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/19/2019 9:00 AM

**Final Status:** CARRY OVER

This bill:

1. Defines "behavioral health needs" to mean a wide range of mental health disorders and illnesses, substance use disorder, developmental disabilities and autism spectrum disorder;
2. Directs the DHHS to take measures to address the issue of extended stays in hospital emergency departments by minors with behavioral health needs by:
  - A. Maintaining a daily updated online statewide list of available mental health facility or program and community service provider placements for referral purposes by hospital emergency departments;
  - B. Maintaining a quarterly updated online resource list of mental health programs or facilities and community service providers that treat behavioral health needs; and
  - C. Collecting monthly data on and study the issue of extended stays of minors with behavioral health needs in hospital emergency departments;
3. Directs the department to study the data and analysis on extended stays in hospital emergency departments by minors with behavioral health needs:
  - A. Reasons for the extended stays;
  - B. Specific behavioral health needs treatment programs and the waiting list for admission to each program; and
  - C. Funding mechanisms to provide short-term transitional assistance to minors with behavioral health needs discharged from a hospital emergency department to residential placements, partial hospitalizations or home-based programs; and
4. Directs the department to study the feasibility of adding a child behavioral needs advocate within the department to coordinate the department's activities with those of various agencies and programs that provide behavioral health needs services to minors and to submit a report to the Legislature by January 1, 2020.

## **LD 1423 An Act To Require Corporate Transparency When Taxpayer Funding Is Provided**

**Sponsor:** Rep. Sampson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072762>

**Judiciary**

**Committee Status:** ONTP

**Public Hearing:** 4/17/2019 1:30 PM

**Final Status:** DEAD

This bill changes the standards of conduct for directors under the Maine Nonprofit Corporation Act and for directors and officers under the Maine Business Corporation Act to add compliance with the laws governing monopolies and profiteering and acting in accordance with the purpose for which the corporation is organized and not in a manner that facilitates bias and partiality in governance. It specifies that officers and directors of business corporations may not act to cause a detrimental effect on the purpose of nonprofit corporations. It requires a corporation under the Maine Nonprofit Corporation Act to include a list of private contributions received in its annual report. It requires a corporation under the Maine Business Corporation Act that receives a business equipment tax exemption or participates in a tax increment financing or credit enhancement program to include a list of all donations distributed to nonprofit corporations or public entities in its annual report.

## **LD 1429 An Act To Fund Opioid Use Disorder Prevention and Treatment**

**Sponsor:** President Jackso <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072798>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/26/2019 9:00 AM

**Final Status:** CARRY OVER

This bill establishes the Opioid Use Disorder Prevention and Treatment Fund administered by the Department of Health and Human Services for the purpose of supporting opioid use disorder analysis, prevention and treatment. The fund is funded by a 2¢ fee per morphine milligram equivalent assessed against prescription opioid drug manufacturers for prescription opioid drugs distributed in the State as well as appropriations, allocations and contributions from private and public sources.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

Tel.: 207/622-4794; Fax: 207/622-3073; Website: [www.themha.org](http://www.themha.org)

## **LD 1434 An Act To Allow Certified Registered Nurse Anesthetists To Bill for Their Services**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072806>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:** 4/18/2019 1:00 PM

**Final Status:** CARRY OVER

This bill requires insurers, health maintenance organizations and nonprofit hospitals or medical service organizations to provide coverage for the services of certified registered nurse anesthetists provided to individuals.

## **LD 1460 An Act To Support Collection and Proper Disposal of Unwanted Drugs**

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072911>

**Environment & Natural Resources**

**Committee Status:**

**Public Hearing:**

**Final Status:** CARRY OVER

This bill provides for the establishment of drug take-back stewardship programs. It requires certain drug manufacturers, as defined in the bill, to operate a drug take-back stewardship program to collect and dispose of certain drugs.

## **LD 1461 An Act To Support Early Intervention and Treatment of Mental Health Disorders**

**Sponsor:** Sen. Breen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072912>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/24/2019 9:00 AM

**Final Status:** APP TBL CO

This bill requires DHHS to establish a funding mechanism and reimbursement rate for the treatment of individuals showing early signs of a psychotic disorder using a coordinated specialty care model.

## **LD 1466 An Act To Allow Community-based Organizations To Participate in Diversion Projects for Persons with Substance Use Disorder**

**Sponsor:** Rep. Talbot Ros <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072928>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:** CARRY OVER

This bill amends the Substance Use Disorder Assistance Program, which is a program that provides grants to municipalities, counties and regional jails to carry out projects designed to reduce substance use, substance use-related crimes and recidivism, to include community-based organizations as entities eligible for grants under the program. "Community-based organization" is defined as a nonprofit community organization that provides substance use disorder services to individuals, including, without limitation, substance use assessment, treatment, education or support group service.

## **LD 1479 An Act To Clarify Guardianship over Detainees under 18 Years of Age Regarding Mental Health Care**

**Sponsor:** Rep. Morales <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072994>

**Criminal Justice & Public Safety**

**Committee Status:** OTP

**Public Hearing:**

**Final Status:** PL 2019, CH 155

This bill clarifies that the statutory guardianship power of the Commissioner of Corrections over detainees under 18 years of age extends not only to necessary medical care but also to necessary mental health care.



## **LD 1486    An Act To Strengthen Supports for Adults with Intellectual Disabilities or Autism in Crisis**

**Sponsor:** Rep. Farnsworth <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072989>

**Health & Human Services**

**Committee Status:**

**Public Hearing:** 4/23/2019 1:00 PM

**Final Status:** PL 2019, CH 290

This law amends the current law regarding crisis and respite services for persons with intellectual disabilities or autism by requiring DHHS to provisionally adopt major substantive rules on crisis and respite services no later than April 1, 2020. It also requires the Department of Health and Human Services to study the existing services for persons with intellectual disabilities or autism and determine the adequacy of the MaineCare reimbursement methodology and rates paid to providers for meeting the needs of persons at risk for out-of-home placement due to challenging behavior that affects health and safety. The department is required to report its findings and recommendations to the Committee on Health and Human Services no later than January 30, 2020.

## **LD 1499    An Act To Establish the Maine Prescription Drug Affordability Board**

**Sponsor:** Pres. Jackson <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073010>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** PL 2019, CH 471

The law establishes the Maine Prescription Drug Affordability Board.

The board determines prescription drug spending targets for public entities, including for specific prescription drugs, based upon a 10-year rolling average of the medical care services component of the United States Department of Labor, Bureau of Labor Statistics Consumer Price Index medical care services index plus a reasonable percentage for inflation and minus a spending target determined by the board for pharmacy savings and in consideration of information received about the public entity's prescription drug spending and information collected by the Maine Health Data Organization.

The board makes recommendations on prescription drug spending targets, including spending targets for specific prescription drugs, with input from representatives of those public entities. The recommendations may include establishing a common prescription drug formulary among public payors, purchasing prescription drugs in bulk or through a single purchasing agreement, collaborating with other states and state prescription drug purchasing consortia to purchase prescription drugs in bulk or to jointly negotiate rebates, allowing health insurance carriers providing coverage to small businesses in the State to participate in a public payor prescription drug benefit for a fee, procuring common pharmacy benefit management services and actuarial services, negotiating specific rebates and removing drugs for which a manufacturer does not negotiate a sufficient rebate from a formulary and other methods determined by the board. The board is required to report its prescription drug spending targets and the methods recommended to meet those targets to the Legislature annually.

Not included in the law was a provision that would have allowed rate setting by the board and require the board to determine excess prescription drug costs based upon certain thresholds for prescription drug prices and price increases.



Maine Hospital Association

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## **LD 1501    An Act To Change the Law Governing Occupational Disease Claims under the Maine Workers' Compensation Act of 1992**

**Sponsor:** *Pres. Jackson*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073013>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:**    5/6/2019    9:00 AM

**Final Status:**    DEAD

This bill amends the law governing occupational disease claims under the Maine Workers' Compensation Act of 1992. The bill repeals the chapter in the laws governing workers' compensation entitled "Occupational Disease Law" and:

1. Defines "personal injury" under the laws governing workers' compensation to include any condition or disease contributed to by an employee's occupational cumulative trauma or exposure that arises out of and in the course of employment;
2. Specifies that the employer in whose employment the employee was last injuriously exposed to the occupational trauma or exposure is fully liable for all incapacity resulting from the occupational trauma or exposure, and the date of injury for an occupational cumulative trauma or exposure injury is the date that the employee becomes incapacitated from the occupational cumulative trauma or exposure;
3. Provides a method for calculating the amount of the employee's compensation if, on the date of incapacity resulting from occupational cumulative trauma or exposure, the injured employee no longer works in the same occupation in which the employee worked when the employee incurred the last injurious occupational cumulative trauma or exposure;
4. Specifies that, with respect to a personal injury that involves a condition or disease contributed to by the employee's occupational cumulative trauma or exposure that arises out of and in the course of employment, the employer in whose employment the employee was last injuriously exposed to the occupational trauma or exposure is fully liable for all incapacity resulting from the occupational trauma or exposure; and
5. Establishes that the date of injury for an occupational cumulative trauma or exposure injury is the date that the employee becomes incapacitated from the occupational cumulative trauma or exposure.

## **LD 1503    An Act To Establish the Maine False Claims Act**

**Sponsor:** *Sen. Carpenter*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073015>

**Judiciary**

**Committee Status:**

**Public Hearing:**    5/1/2019    9:00 AM

**Final Status:**    DEAD

This bill repeals the existing law governing the civil liability of persons making false claims, and enacts the Maine False Claims Act in order to protect the State against false and fraudulent claims upon or against the State and to protect the State and the Federal Government against false and fraudulent claims under the Medicaid program, known in the State as the MaineCare program. This bill provides authorization for qui tam actions, which are brought by a person for the benefit of the person and the State in the name of the State. This bill provides protection from discrimination for an employee who participates in a qui tam action. This bill provides possible recoveries for the person who brings the qui tam action in addition to recoveries for the State. This bill establishes the Maine False Claims Act Fund to receive the proceeds payable to the State as a result of false claims litigation to be used in part for investigatory, enforcement and litigation expenses.

## **LD 1504    An Act To Protect Consumers from Unfair Practices Related to Pharmacy Benefits Management**

**Sponsor:** *Sen. Sanborn*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073027>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:**    PL 2019, CH 469

This law replaces the current registration requirement for pharmacy benefits managers doing business in this State with a licensing requirement beginning January 1, 2020. It also imposes a number of new licensing requirements on a carrier that provides prescription drug benefits.



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## **LD 1523 An Act To Ensure the Quality of and Increase Access to Recovery Residences**

**Sponsor:** *Sen. Bellows* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073097>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/26/2019 9:00 AM

**Final Status:** PL 2019, CH 524

The law does a number of things including creation of a certification process for substance use disorder recovery residences.

## **LD 1539 An Act To Provide Maine Children Access to Affordable Health Care**

**Sponsor:** *Rep. Carney* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073256>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** APP TBL CO

This bill changes the maximum eligibility level for children to receive Medicaid 200% of the federal poverty level to 325% of the federal poverty level.

It removes the 3-month waiting period for enrollment in the Cub Care program following the loss of health insurance or coverage under an employer-based plan. It also removes any asset test.

It provides coverage to persons 19 and 20 years of age and to noncitizens under 21 years of age. The Department of Health and Human Services is required to use state funds to fund the program but may apply for waivers or state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to receive federal matching funds.

## **LD 1553 An Act Directing That the Towns Constituting Hospital Administrative District No. 4 Hold a Vote on the Proposed Merger with Northern Light Health**

**Sponsor:** *Sen. Davis* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073291>

**State & Local Government**

**Committee Status:** OTPA

**Public Hearing:** 4/17/2019 9:00 AM

**Final Status:** P&S 2019, CH

This bill requires that, notwithstanding any applicable notice requirements, each of the towns of Abbot, Atkinson, Bradford, Cambridge, Dexter, Dover-Foxcroft, Guilford, Milo, Monson, Parkman, Sangerville, Sebec and Willimantic hold an advisory vote no later than April 30, 2019 on the proposed merger of Hospital Administrative District No. 4 with Northern Light Health. Unless a town's charter otherwise provides, the vote must be taken at a town meeting. The results of the vote in each town must be declared by the municipal officers of the town and transmitted to the board of directors of Hospital Administrative District No. 4.

## **LD 1563 An Act To Encourage the Development of Broadband Coverage in Rural Maine**

**Sponsor:** *Sen. Bellows* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073368>

**Energy, Utilities & Technology**

**Committee Status:**

**Public Hearing:**

**Final Status:** CARRY OVER

This bill proposes to establish the Maine Broadband Initiative to encourage, promote, stimulate, invest in and support universal high-speed broadband to unserved and underserved areas of the State. The bill would also establish the Maine Broadband Initiative Fund to provide ongoing funding for high-speed broadband through funding sources that would be identified in the bill.



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## **LD 1577 An Act To Assist Nursing Homes in the Management of Facility Beds**

**Sponsor:** Rep. Perry <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073382>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/29/2019 10:00 AM

**Final Status:** APP TBL CO

This bill makes several changes to nursing home regulations. First, it restores the ability of nursing facilities to voluntarily reduce the number of their licensed beds and then later increase the number of their licensed beds to the prior level after obtaining a certificate of need and meeting certain conditions.

Second, it requires DHHS to include in its calculation of reimbursement for services provided by a nursing facility the cost incurred by the facility for a medical director. It also requires the inclusion of costs incurred by a nursing facility for the acquisition, use and maintenance of computer or cloud-based software systems to as a fixed cost.

Third, it requires DHHS to amend its rules governing adult family care services to provide reimbursement for up to 30 bed hold days per calendar year when a resident is absent from a facility.

Finally, it requires DHHS to amend its rules to include the cost of health insurance for employees attributable to MaineCare residents as a fixed cost. It also requires the department to amend these rules to include reimbursement for 50% of a nursing facility's charges for a maximum of 6 months for a newly admitted resident who is determined to be financially ineligible for MaineCare after the resident is admitted to the nursing facility and the charges remain unpaid after reasonable efforts are made by the nursing facility to collect the debt based on these charges.

## **LD 1580 An Act To Protect Licensing Information of Medical Professionals**

**Sponsor:** Rep. Moonen <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073385>

**Judiciary**

**Committee Status:**

**Public Hearing:** 5/1/2019 1:00 PM

**Final Status:** PL 2019, CH 499

This law creates a process to allow applicants and licensees of the State Board of Nursing, the Board of Osteopathic Licensure and the Board of Licensure in Medicine to review their own redacted licensing files before the respective board makes the file available for inspection or copying after the licensing file has been requested.

## **LD 1582 An Act Relating to Surgical Technologists and the Practice of Surgical Technology**

**Sponsor:** Rep. Nadeau <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073387>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:** 5/2/2019 1:30 PM

**Final Status:** DEAD

Surgical technologists are individuals with specialized education who function as members of a surgical team by providing support during every phase of a surgical case. This bill requires health care facilities to employ or contract with only certified surgical technologists for this function. A surgical technologist who is not certified, but who is practicing surgical technology on the effective date of this legislation, may continue in that employment after the effective date. After the effective date, a health care facility may hire a noncertified surgical technologist who is a recent graduate, but the individual is required to obtain certification within 6 months of graduation in order to remain employed. Further, a critical access hospital may employ a noncertified surgical technologist if that facility is unable to recruit certified personnel and maintains a record detailing its recruitment efforts. All employed surgical technologists, regardless of certification status, must meet stated continuing education requirements. Nothing in the bill prohibits a licensed practitioner from performing surgical technology duties that fall within the scope of that person's license.



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## **LD 1591    An Act To Provide Access to Health Care for Maine Citizens**

**Sponsor:** *Rep. Brennan*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073432>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:**    5/9/2019    1:00 PM

**Final Status:**    CARRY OVER

This bill would re-base the hospital tax to calendar year 2018.

It provides no match to hospitals.

It proposes to use the entire amount of the tax to expand the Medicare Buy-in Program and for subsidies under the federal Patient Protection and Affordable Care Act.

Current law provides that each hospital may voluntarily hold its consolidated operating margin to no more than 3% and its increase in its expense per case mix-adjusted inpatient and volume-adjusted outpatient discharge to no more than 110% of the forecasted increase in the hospital market basket index for the coming federal fiscal year. The bill does not change those percentages but requires the Department of Health and Human Services to annually establish recommended percentages for each hospital.

The bill requires the Department of Health and Human Services, in consultation with relevant other state agencies, federal agencies and interested parties, to design a wholesale prescription drug importation program. It requires the department to submit the design for the wholesale prescription drug importation program to the Joint Standing Committee on Health Coverage, Insurance and Financial Services and authorizes the committee to report out a bill to the Second Regular Session of the 129th Legislature.

## **LD 1602    Resolve, Establishing the Working Group on Mental Health**

**Sponsor:** *Sen. Breen*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073454>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:**    RESOLVE 2019, CH 100

This resolve establishes the Working Group on Mental Health, including one hospital representative, to assess the State's capacity to serve Maine citizens with behavioral health needs and propose a comprehensive mental health plan for the State.

## **LD 1611    An Act To Support Universal Health Care**

**Sponsor:** *Rep. Brooks*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073494>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:**    5/9/2019    1:00 PM

**Final Status:**    CARRY OVER

This bill establishes the Maine Health Plan to provide universal health care coverage to all residents of this State. The bill is modeled on proposed legislation considered in Minnesota.

## **LD 1616    An Act To Establish the Vaccine Consumer Protection Program**

**Sponsor:** *Rep. O'Connor*    <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073505>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:**    4/3/2019    3:00 PM

**Final Status:**    DEAD

This bill establishes the Vaccine Consumer Protection Program within the Department of Health and Human Services to coordinate with the National Vaccine Injury Compensation Program and provide public and provider education. It also allows for a patient to refuse vaccination.



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## **LD 1617 An Act To Create a Single-payer Health Care Program in Maine**

**Sponsor:** Rep. Sylvester <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073506>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:** 5/9/2019 1:00 PM

**Final Status:** CARRY OVER

This bill establishes a single-payer health care program in the State that provides health care services for Maine residents. The bill directs DHHS to consult with the Department of Labor and the Bureau of Insurance to develop the program. The bill requires the State to implement the program in 3 phases, based on income, beginning in 2022 for those residents not eligible for the MaineCare program. The bill also creates the Single-payer Implementation Task Force to advise the departments and make recommendations to fully implement the single-payer health care program. The program may not be implemented in 2022 without prior legislative approval.

## **LD 1623 An Act To Improve Employee Representation under the Maine Workers' Compensation Act of 1992 by Amending the Laws Governing Attorney's Fees**

**Sponsor:** President Jackso <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073524>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 5/6/2019 9:00 AM

**Final Status:** DEAD

This bill amends the law governing attorney's fees under the Maine Workers' Compensation Act of 1992. The bill:

1. Requires employers to pay reasonable costs and attorney's fees if the employee prevails on a disputed petition for payment of medical and related expenses or if the employee prevails in an appeal that is decided by the Appellate Division or by the Law Court; and
2. Removes language governing the specific computation of attorney's fees for lump-sum settlements

## **LD 1624 An Act To Prevent Discrimination under the Maine Workers' Compensation Act of 1992**

**Sponsor:** President Jackso <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073525>

**Labor & Housing**

**Committee Status:** ONTP

**Public Hearing:** 5/6/2019 9:00 AM

**Final Status:** DEAD

Current law provides that an employer may not discriminate against an employee for asserting a workers' compensation claim. In *Maietta v. Town of Scarborough*, 2004 ME 97, 854 A.2d 223, the Law Court interpreted this provision as prohibiting discrimination against an employee only if the assertion of the workers' compensation claim was the primary basis or cause for the employer's adverse action against the employee. This bill amends the law to specify that if an employee's assertion of a workers' compensation claim or right constitutes any part of the basis upon which an employer decides to discipline or terminate an employee, it is a violation of the prohibition.

## **LD 1625 An Act To Eliminate the Durational Cap on Partial Benefits under the Workers' Compensation Laws**

**Sponsor:** President Jackso <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073526>

**Labor & Housing**

**Committee Status:**

**Public Hearing:** 5/6/2019 9:00 AM

**Final Status:** DEAD

Current law limits to 520 weeks the duration of workers' compensation benefits for partial incapacity due to injuries occurring on or after January 1, 2013. This bill removes that durational cap.



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## **LD 1630    Resolve, To Ensure Access to Opiate Addiction Treatment**

**Sponsor:** *Speaker Gideon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073569>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**    5/9/2019       1:00 PM

**Final Status:**       CARRY OVER

This resolve directs the Department of Health and Human Services to set the weekly MaineCare reimbursement rate paid to outpatient opioid treatment providers at \$110 per week, or at a higher rate if the department determines a higher rate is justified.

## **LD 1639    An Act To Require Comprehensive Responsible Contracting Practices for Public Construction Projects**

**Sponsor:** *President Jackso* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073579>

**Labor & Housing**

**Committee Status:**

**Public Hearing:**

**Final Status:**       CARRY OVER

This bill imposes several new requirements on publicly-funded construction projects.

## **LD 1648    An Act To Improve Access to Experienced Primary Care Providers in Maine**

**Sponsor:** *Rep. Stewart* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073597>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:**    5/8/2019       2:00 PM

**Final Status:**       DEAD

This bill is a concept draft that proposes to amend the laws regarding the supervision and duties of licensed physician assistants.

## **LD 1650    An Act To Strengthen Consumer Protections in Health Care**

**Sponsor:** *Rep. Tipping* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073615>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:**    5/2/2019       1:30 PM

**Final Status:**       CARRY OVER

This bill makes changes to the rating provisions for individual and small group health insurance plans to reduce the rating band for age and to require that the ratio on the basis of geographic area is 1.5 to 1 and that the ratio for age and geographic area may not exceed 2.5. The changes in the bill reinstate the rating provisions in place before the enactment of Public Law 2011, chapter 90.



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## LD 1655 An Act To Improve and Modernize Home-based Care

**Sponsor:** Rep. Meyer <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073620>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/3/2019 9:00 AM

**Final Status:** APP TBL CO

This bill:

1. Establishes the Social Determinants of Health Stakeholder Advisory Group to collaborate with providers of home health care services and other services relating to the social determinants of health and make recommendations to DHHS;
2. Provides for reimbursement for telehealth or telemonitoring private duty nursing, home health services and personal care services for an adult MaineCare member with a physical disability or an adult who is elderly who is receiving MaineCare waiver services.
3. Expands the duties of the Maine Telehealth and Telemonitoring Advisory Group to include making recommendations about home technology to the DHHS;
4. Directs the DHHS, beginning in 2020 and at least every 2 years thereafter to review the rates for providers of services under a waiver for home-based and community-based services or state-funded home-based and community-based support services;
5. Directs DHHS to amend its rules for services provided under Sections 19, 40 and 96 and rule Chapter 5, Office of Elder Services Policy Manual, Section 63 so that:
  - A. A certified nurse practitioner and a physician assistant may authorize or amend a plan of care; and
  - B. Reimbursement is provided for activities performed outside of the home by a registered nurse that are directly related to a member's care and are part of the member's plan of care;
6. Directs DHHS to convene a work group to review options for adjusting rates in order to provide health care coverage and paid sick leave to home-based and community-based care providers and to report the recommendations of the work group to the Joint Standing Committee on Health and Human Services; and
7. Directs DHHS to review its in-person supervisory requirement for home-based and community-based care providers to determine whether the use of technology that provides interactive, real-time communication is feasible and practical and to report its recommendations to the Health and Human Services Committee.

## LD 1660 An Act To Improve Access to Physician Assistant Care

**Sponsor:** Sen. Sanborn <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=28007360>

**Health Coverage, Insurance & Financial Services**

**Committee Status:**

**Public Hearing:** 5/8/2019 2:00 PM

**Final Status:** CARRY OVER

This bill makes the following changes to the laws governing the licensing and scope of practice of physician assistants.

1. It increases the membership of the Board of Osteopathic Licensure and the Board of Licensure in Medicine from 10 to 11 members by changing the number of members on each board who are physician assistants from 1 member to 2 members.
2. It establishes provisions for the scope of practice, insurance coverage of services and immunity from liability for providing volunteer medical services during emergencies or disasters and clarifies that physician assistants are primary care providers when practicing in a medical specialty required for a physician to be a primary care provider.
3. It removes registration and physician supervisory requirements.
4. It establishes requirements for physician assistant collaboration and consultation with physicians and other health care professionals.
5. It changes the initial licensing fee from \$250 to \$300.
6. It provides a transition provision for physician assistant licenses that are current and not subject to disciplinary action.



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## **LD 1661 An Act To Create the Drug Donation and Redispensing Program**

**Sponsor:** *Sen. Claxton* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073608>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/8/2019 2:00 PM

**Final Status:** APP TBL CO

This bill establishes the drug donation and redispensing program under DHHS. The program collects donations of unused prescription and legend drugs from health care providers, health care facilities and other sources, including at drop-off locations throughout the State, and redispenses the drugs through participating pharmacies to qualified low-income persons.

## **LD 1662 An Act To Save Lives by Establishing the Low Barrier Opioid Treatment Response Program**

**Sponsor:** *Sen. Claxton* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073609>

**Committee Status:**

**Public Hearing:** 5/2/2019 1:00 PM

**Final Status:** CARRY OVER

This bill requires DHHS to establish the Low Barrier Opioid Treatment Response Program in Maine's federally qualified health centers to improve the availability of medication-assisted treatment and enhance the effectiveness of acute care responses to persons in urgent need of treatment for substance use disorders. The department is required to implement the program on a pilot basis initially and expand the program statewide. The department is required to report findings on these subjects and on initial pilot implementation to the Health and Human Services Committee no later than January 15, 2020.

## **LD 1666 An Act To Require Certain Health Care Providers To Provide Patients Detailed Information on the Risks Associated with the Use of Opioid Medications and Schedule II Drugs**

**Sponsor:** *Rep. Pickett* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073636>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill requires a health care provider who is a prescriber of any opioid medication or a medication that is a schedule II drug, before issuing an initial prescription and before issuing a 3rd prescription of an opioid medication or a medication that is a schedule II drug, to inform a patient of the risks of using the medication, the reason the medication is necessary and alternative treatments that may be available. It also requires the health care provider to include a note in the patient's medical record that the health care provider discussed the information with the patient.

## **LD 1672 An Act Regarding the Admissibility of Certain Health Care Records as Evidence**

**Sponsor:** *Rep. Bailey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073686>

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill makes changes to the law governing the admissibility of health care records as evidence in court. It specifies that records, including itemized bills, kept by health care practitioners, health care entities, health care providers, pharmacists and pharmacies may be admissible in court as evidence of (1) the fair and reasonable charge for such services or the necessity of services or treatments; (2) the diagnosis provided by the medical entity; (3) the prognosis provided by the medical entity; (4) the opinion provided by the medical entity regarding the proximate cause of the condition diagnosed by the medical entity; and (5) the opinion provided by the medical entity regarding any disability or incapacity proximately resulting from the condition diagnosed by the medical entity.



Maine Hospital Association

33 Fuller Road, Augusta, Maine 04330

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## **LD 1676 An Act To Enhance the Ability of the State To Prosecute the Crime of Operating Under the Influence**

**Sponsor:** Rep. McLean <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073693>

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 368

This law amends the laws governing the testing of breath, blood and urine samples for the presence of alcohol and drugs by:

1. Allowing such testing to occur at a laboratory licensed to do so under the laws of this State or any other state and also certified by the Federal Government under federal law;
2. Allowing, for the taking of blood and urine samples, the use of specimen collection tubes of the type normally used in such a laboratory; and
3. Providing immunity from liability of persons who draw blood at the request of a law enforcement officer.

## **LD 1689 An Act To Address the Opioid Crisis through Evidence-based Public Health Policy**

**Sponsor:** Sen. Sanborn <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073754>

**Heath & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/13/2019 1:00 PM

**Final Status:** APP TBL CO

This bill expands the scope and capabilities of hypodermic apparatus exchange programs certified by the Department of Health and Human Services, Maine Center for Disease Control and Prevention.

## **LD 1694 An Act To Amend the Mental Health Insurance Coverage Laws**

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073765>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 5/15/2019 10:00 AM

**Final Status:** RESOLVE 2019, CH 72

This law requires the Superintendent of Insurance to determine the compliance of health insurance carriers doing business in this State with federal and state mental health parity laws. The Superintendent of Insurance is required to either authorize a market conduct examination or use a survey tool to assess compliance and to report back to the Insurance Committee no later than January 30, 2020.

## **LD 1701 An Act To Clarify Various Provisions of the Maine Human Rights Act**

**Sponsor:** Rep. Bailey <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073815>

**Judiciary**

**Committee Status:**

**Public Hearing:** 5/20/2019 9:00 AM

**Final Status:** PL 2019, CH 464

This law makes changes to the Maine Human Rights Act. It clarifies the Act's coverage of claims based on association and based on the perception that an individual belongs to a protected class; and provides a definition of "gender identity." It establishes that a leave of absence can be a reasonable accommodation for a disability in employment. It prohibits single-gender, single-occupancy restrooms. It also makes grammatical changes and corrects cross-references.



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## **LD 1708 An Act To Provide for the Merger of Hospital Administrative District No. 4 into MRH Corp., a Maine Nonprofit, Nonstock Private Corporation**

**Sponsor:** Rep. Higgins <http://legislature.maine.gov/legis/bills/getPDF.asp?paper=HP1220&item=1&snum=129>

**State & Local Government**

**Committee Status:** APP TBL

**Public Hearing:** 5/15/2019 11:00 AM

**Final Status:** P&S 2019, CH 14

Private and Special Law 1973, chapter 76 created the charter for Hospital Administrative District No. 4, which is served by Mayo Regional Hospital. While the charter allows for the dissolution of the district, it does not provide for the merger. The effect of this law is to authorize Mayo Regional Hospital to merge into a new entity known as MRH Corp., a Maine nonprofit, nonstock private corporation that has as its sole member Eastern Maine Healthcare Systems and, upon the effective date of the merger, dissolve the district. MRH Corp. is required to continue to serve the health care needs of the communities served by the district.

## **LD 1716 An Act To Update the Licensing Laws for Occupational Therapy Practice**

**Sponsor:** Rep. Mastraccio <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073895>

**Health Coverage, Insurance and Financial Services**

**Committee Status:** PTBE

**Public Hearing:** 5/15/2019 10:30 AM

**Final Status:** PL 2019, CH 287

This law updates language in the laws governing occupational therapy practice, including occupational therapists and occupational therapy assistants and repeals the continuing education requirement for licensees. The law also repeals a residency provision for applicants and the character reference requirement for foreign-trained applicants.

## **LD 1724 An Act To Amend the Maine Emergency Medical Services Act of 1982 and Related Provisions**

**Sponsor:** Sen. Deschamba <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073914>

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 370

This law amends the Maine Emergency Medical Services Act of 1982 and related provisions. The law:

- Adds 3 positions to the Medical Direction and Practices Board: a pediatric physician, an emergency medical services person licensed to provide basic life support and an emergency medical services person licensed to provide advanced life support;
- Makes the statewide associate emergency medical services medical director an ex officio member of the Emergency Medical Services Board; and
- Gives the Emergency Medical Services Board the authority to deny or refuse to renew an emergency medical services person license and to revoke a license.

## **LD 1746 An Act To Amend the Licensing Laws of Certain Professions and Occupations**

**Sponsor:** Sen. Herbig <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280073972>

**Innovation, Development, Economic Advancement & Business**

**Committee Status:** DIV RPT

**Public Hearing:** 5/21/2019 1:30 PM

**Final Status:** PL 2019, CH 503

The bill makes many changes to the licensing laws of certain professions and occupations including:

- It adds failure by a licensee to provide treatment records to a patient within a reasonable time when requested by the patient in writing as a new ground for discipline.
- It authorizes the issuance of licenses to speech-language pathology assistant applicants who have a degree higher than an associate degree and exempts temporary licensees, speech-language pathology assistants and trainee licensees from continuing education requirements at the time of license renewal.



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## **LD 1755 An Act To Move Maine Toward Affordable Health Care for Everyone**

**Sponsor:** *Pres. Jackson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074017>

**Health Coverage, Insurance & Financial Services**

**Committee Status:** TABLED

**Public Hearing:**

**Final Status:** CARRY OVER

This bill requires the Commissioner of Health and Human Services to submit a waiver under Section 1332 to establish a MaineCare purchase option so that residents of Maine who are not otherwise eligible for the MaineCare program may participate in the program. The waiver must include authority for individuals who qualify for advance tax credits and cost-sharing credits to use them to purchase coverage through the MaineCare program. The commissioner is required to implement mechanisms to ensure the long-term sustainability of the MaineCare purchase option. Rates are set by the Department of Health and Human Services and determined actuarially, and the open enrollment period is the same as the period for individuals purchasing insurance on the federal exchange.

## **LD 1758 An Act To Clarify and Amend MaineCare Reimbursement Provisions for Nursing and Residential Care Facilities**

**Sponsor:** *President Jackso* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074023>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/23/2019 1:00 PM

**Final Status:** POCKET

This bill is emergency legislation amending statutory and unallocated provisions to require the Department of Health and Human Services to amend the department's rules regarding MaineCare reimbursement of nursing facility and residential care facility costs, including:

1. Clarifying and requiring additional cost-of-living adjustments to reimbursed costs based upon:
  - A. The costs paid by nursing facilities for goods and services required to provide patient care;
  - B. The forecasted increase in the skilled nursing facility market basket index for the coming federal fiscal year published by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services; and
  - C. Any further changes to the United States Department of Labor, Bureau of Labor Statistics Consumer Price Index medical care services index or market basket index projections over the payment year when the department is carrying out cost report audits and determining final prospective rates pursuant to department rules regarding costs related to resident care under principles of reimbursement for nursing facilities during the payment year;
2. Clarifying and amending nursing facility reimbursement provisions enacted in Public Law 2017, chapter 460 regarding a 10% special supplemental wage allowance by:
  - A. Requiring the allowance to include contract labor and requiring an additional 10% wage allowance in state fiscal year 2019-20 and incorporating both requirements into a rebasing of the reimbursement rates in future years;
  - B. Prohibiting department rules that require a nursing facility to ensure or otherwise demonstrate that the increase in rates applies only to wages and benefits;
  - C. Changing the low-cost, high Medicaid facility supplemental payment by removing the low-cost requirement; and
  - D. Providing a supplemental allowance of 60¢ per reimbursed MaineCare resident day for each 1% over 70% MaineCare occupancy to nursing facilities with specialty medical-psychiatric beds or units and to nursing facilities that provide intensive acquired brain injury rehabilitation services; and
3. Clarifying and amending residential care facility reimbursement provisions enacted in Public Law 2017, chapter 460 regarding a 10% special supplemental wage allowance by:
  - A. Requiring the allowance to include contract labor and requiring an additional 10% wage allowance in state fiscal year 2019-20 and incorporating both requirements into a rebasing of the reimbursement rates in future years;
  - B. Prohibiting department rules that require a residential care facility to ensure or otherwise demonstrate that the increase in rate applies only to wages and benefits; and
  - C. Requiring reimbursement rates for allowable direct care, personal care services and routine care costs to be adjusted yearly for inflation.



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## **LD 1803 An Act To Update the Laws Regarding Death and Marriage Records**

**Sponsor:** Rep. Hymanson <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074332>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2019, CH 340

Among other things, the law would allow a health care provider who certified a death certificate to correct or complete a death certificate by means of an electronic amendment. Current law allows health care providers who certified a death certificate to amend the certificate by the means of a paper supplemental form. This change would allow health care providers to submit the supplemental form electronically and is consistent with 22 MRSA §2842(4) which currently allows a Medical Examiner to submit an electronic amendment.

## **LD 1809 Resolve, To Increase Funding for Evidence-based Therapies for Treating Emotional and Behavioral Problems in Children**

**Sponsor:** Rep. Madigan <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074344>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** POCKET

This resolve requires the Department of Health and Human Services to increase reimbursement rates for multisystemic therapy, multisystemic therapy for problem sexualized behavior and functional family therapy by 20% until June 30, 2020. It requires the department to contract for a 3rd-party rate study of the reimbursement rates for those therapies, including developing a rate set on a per case per week basis rather than the current 15-minute increments. The rate study must be completed no later than December 1, 2019.



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## **LD 1811    An Act To Enhance Personal and Public Safety by Requiring Evaluations of and Judicial Hearings for Persons in Protective Custody Regarding Risk of Harm and Restricting Access to Dangerous Weapons**

**Sponsor:** *Sen. Keim*      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074339>

**Committee Status:**

**Public Hearing:**

**Final Status:**      PL 2019, CH 411

This law provides an option for law enforcement to take a person into protective custody and have assessed a person who presents a likelihood of foreseeable harm to the person or to others.

"Likelihood of foreseeable harm" is defined as a substantial risk in the foreseeable future of serious physical harm to the person as manifested by recent behaviors or threats of, or attempts at, suicide or serious self-inflicted harm; or a substantial risk in the foreseeable future of serious physical harm to other persons as manifested by recent homicidal or violent behavior or by recent conduct or statements placing others in reasonable fear of serious physical harm.

The law enforcement officer is directed to have the person in protective custody assessed by a medical practitioner. If the assessment finds that the person presents a likelihood of foreseeable harm, the law enforcement officer must seek an endorsement from a judicial officer that the person presents a likelihood of foreseeable harm, which authorizes law enforcement to notify the person that the person is a restricted person and is prohibited from possessing, controlling, acquiring or attempting to possess, control or acquire a dangerous weapon pending the outcome of a judicial hearing. The restricted person must immediately and temporarily surrender any weapon possessed, controlled or acquired by the restricted person to a law enforcement officer.

A restricted person who makes all practical and immediate efforts to comply with a surrender notice is not subject to arrest or prosecution as a prohibited person under the Maine Revised Statutes, Title 15, section 393, subsection 1, paragraph E-1 or E-2. If a law enforcement agency has probable cause to believe the restricted person possesses or controls but has not surrendered a weapon, law enforcement may, prior to or as part of a judicial hearing, search for and seize such a weapon when authorized by a judicially issued warrant or other circumstances approved by law.

The district attorney is required to file a petition for judicial review of the initial restrictions by the District Court. Within 14 days of the notice of restricted status given to the restricted person, the court is required to hold a hearing to determine whether to dissolve or extend the initial restrictions. The restricted person has the right to be represented by counsel. The district attorney has the burden of proving by clear and convincing evidence that the restricted person presents a likelihood of foreseeable harm. The court may dissolve the initial restrictions or extend them for up to one year.

This law directs the executive branch to work with medical practitioners and law enforcement to develop and release, by January 1, 2020, a request for proposals for the development and acquisition of the technology necessary to enable assessments under Title 34-B, section 3862-A at locations other than health care facilities.

By February 1, 2020, the Department of Public Safety must develop a plan, including any cost estimates, to implement a database system to support this legislation.

The provisions for assessments for likelihood of foreseeable harm and restricted person status take effect July 1, 2020.

## **LD 1816    An Act To Ensure the Safety and Well-being of Infants Affected by Substance Exposure**

**Sponsor:** *Rep. McCreight*      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074395>

**Health & Human Services**

**Committee Status:**    OTP

**Public Hearing:**

**Final Status:**      PL 2019, CH 342

This law modifies DHHS reporting requirements imposed on hospitals caring for newborns to include infants affected by substance use regardless of whether the mother's substance use was legal or illegal. In addition, this bill clarifies provisions regarding withdrawal symptoms so that the infant is no longer required to demonstrate withdrawal symptoms and instead is required to be affected by withdrawal symptoms. This bill also changes the requirement for the safe plan of care to require that service referrals be made not just for a mother but for any caregivers of the infant. These changes reflect changes in the federal Child Abuse Prevention and Treatment Act.



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## **LD 1822    An Act To Protect Access to Services for Adults with Serious and Persistent Mental Illness**

**Sponsor:** *Rep. Gattine*      <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280074407>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:**      CARRY OVER

This bill establishes the right of an adult with serious and persistent mental illness who is denied access to certain services by a provider contrary to the terms of the provider's contract with the Department of Health and Human Services to seek informal department review of the provider's action and informal dispute resolution by the department to facilitate access to the service. If the adult continues to be denied access to the mental health service following department review, the adult may bring a private civil action in Superior Court for injunctive relief to enforce the terms of the provider's contract with the department. The bill requires the department to adopt routine technical rules governing the process for informal department review, which must include a definition of "adult with serious and persistent mental illness."

## **LD 1838    Resolve, Requiring the Department of Health and Human Services To Examine Options for Upper Payment Limit Adjustments for MaineCare Services**

**Sponsor:**      <http://legislature.maine.gov/LawMakerWeb/summary.asp?paper=HP1309&SessionID=13>

**Health & Human Services**

**Committee Status:**    APP TBL

**Public Hearing:**

**Final Status:**      POCKET

This resolve requires DHHS to examine upper payment limit options to increase the federally approved limits for services provided under MaineCare. The department may contract with any consultant or 3rd-party organization that the department determines appropriate for this purpose. The department may also consult with any stakeholders that the department determines appropriate.



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