

Health and Human Services

PUBLIC 191 **An Act to Allow Members of the Maine Public Drinking Water Commission to Serve More than 2 Consecutive Terms** **LD 147**

<u>Sponsor(s)</u> MARTIN MILLETT	<u>Committee Report</u> OTP	<u>Amendments Adopted</u>
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Public Law 2003, chapter 191 allows members of the Maine Public Drinking Water Commission to serve more than 2 consecutive terms.

PUBLIC 215 **An Act To Ensure Comprehensive Cancer Control in Maine** **LD 973**

<u>Sponsor(s)</u> MARTIN MCLAUGHLIN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-105
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Public Law 2003, chapter 215 establishes a cancer prevention and control program to provide leadership for and coordination of cancer prevention, research and treatment activities within the State. The program is authorized to receive federal grant money. The program will consult with statewide organizations concerned with the treatment and prevention of cancer.

PUBLIC 264 **An Act To Include a Representative of Mental Health Providers on the Board of Directors of the Maine Health Data Organization** **LD 421**

<u>Sponsor(s)</u> LAVERRIERE-BOUCHER BRENNAN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-253
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Public Law 2003, chapter 264 requires that a representative of mental health providers be appointed to the Board of Directors of the Maine Health Data Organization as one of the 9 members of the board representing providers.

PUBLIC 351 **An Act To Provide Peer Support and Advocacy Services To Participants in the ASPIRE-TANF Program and the Parents as Scholars Program** **LD 878**

<u>Sponsor(s)</u> LAVERRIERE-BOUCHER MAYO	<u>Committee Report</u> OTP-AM MAJ ONTP MIN	<u>Amendments Adopted</u> H-398
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Public Law 2003, chapter 351 directs the Department of Human Services to establish a volunteer peer support and advocacy demonstration project in 4 of its offices to provide information, support and advocacy services to ASPIRE-TANF program and Parents as Scholars Program participants. The law requires the department to

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report on the project to the Joint Standing Committee on Health and Human Services by March 1, 2004. The law includes a sunset provision that repeals the project July 1, 2005.

PUBLIC 366 An Act To Delay the Repeal of Laws Governing the State's LD 1491
Response to an Extreme Public Health Emergency

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PENDLETON NORBERT	OTP	

Public Law 2003, chapter 366 extends the laws on extreme public health emergencies and bioterrorism to October 31, 2005.

PUBLIC 367 An Act To Amend the Laws with Regard to Legislative Reports on LD 1477
Children's Mental Health Services

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE	OTP	

Public Law 2003, chapter 367 reduces the number of reports on children's mental health services that the Department of Behavioral and Developmental Services is required to make to the Joint Standing Committee on Health and Human Services and the Children's Mental Health Oversight Committee from 2 per year to 1 per year.

PUBLIC 368 An Act To Change the Membership of the Review Team for LD 1478
Aversive Behavior Modifications and Safety Devices for Persons
with Mental Retardation or Autism

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN BRENNAN	OTP-AM	H-411

Public Law 2003, chapter 368, changes the membership of the team required to review aversive behavior modification techniques proposed as treatment for an individual with mental retardation or autism by removing from the team the chief administrator and the representative of the program or facility proposing to use the technique. The law makes the same change to the membership of the team required to review the use of devices that reduce or inhibit the movement of an individual with mental retardation or autism.

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PUBLIC 369 An Act To Extend Licensing Periods for Agencies Providing Mental Health Services

LD 1488

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRENNAN CRAVEN	OTP-AM	S-198

Public Law 2003, chapter 369 extends from 2 to 3 years the maximum time period for a full license to operate an agency or facility to provide mental health services. Public Law, chapter 369 takes effect on October 1, 2003, except that for any agency or facility that currently holds this type of license, the law takes effect after completion of the current license period.

PUBLIC 375 An Act to Require Disclosure of Retail Prescription Drug Prices

LD 102

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LEMOINE TREAT	OTP-AM MAJ ONTP MIN	H-463

Public Law 2003, chapter 375 requires disclosure in writing by the pharmacist when filling a prescription of the usual and customary price and the payment required of the patient. The law imposes these requirements January 1, 2006 or when computer software with regard to prescription drug price and patient payment is updated by a pharmacy, whichever occurs first.

PUBLIC 376 An Act To Amend the Maine Registry of Certified Nursing Assistants

LD 780

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
ANDREWS DAGGETT	OTP-AM	H-504

Public Law 2003, chapter 376 specifies the health care settings in which employment restrictions on certified nursing assistants apply. It clarifies that the entity responsible for substantiating allegations of abuse or neglect is the Department of Human Services.

Public Law 2003, chapter 376 was enacted as an emergency measure effective June 2, 2003.

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PUBLIC 379 An Act to Ban Smoking in Beano and Bingo Halls

LD 227

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
COWGER MAYO	OTP MAJ ONTP MIN	H-309 DUNLAP

Public Law 2003, chapter 379 prohibits smoking in places where beano or bingo games are being conducted, but allows smoking in places where high-stakes beano or bingo games are being conducted by a federally recognized Indian tribe.

PUBLIC 384 An Act to Encourage the Use of Generic Drugs

LD 329

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRENNAN	OTP-AM	S-191

Public Law 2003, chapter 384 requires a pharmacist to fill a prescription with a generic and therapeutic equivalent of the drug if the prescribing physician does not affirmatively specify that a particular brand-name drug be dispensed. The law contains special considerations for the MaineCare Program.

**PUBLIC 388 An Act To Change the Time Requirement for Mental Retardation
Evaluations**

LD 1480

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WALCOTT	OTP-AM MAJ ONTP MIN	H-471

Public Law 2003, chapter 388 changes the amount of time that the Department of Behavioral and Developmental Services has to obtain a comprehensive evaluation of an applicant for mental retardation services from 30 days to 90 days. The law requires the department to report to the Joint Standing Committee on Health and Human Services by January 30, 2004, on the length of time from application to completion of the comprehensive evaluation report for applicants for mental retardation services during calendar year 2003.

**PUBLIC 389 An Act To Amend Laws Relating to Development of Service Plans
for Persons with Mental Retardation**

LD 1593

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WALCOTT	OTP	

Public Law 2003, chapter 389 amends the laws relating to services for persons with mental retardation to reflect the person centered planning process that is the current practice of the Department of Behavioral and Developmental Services.

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PUBLIC 394 An Act To Honor the Intent of Organ Donors

LD 257

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH PENDLETON	OTP-AM	H-445

Public Law 2003, chapter 394 states the general rule to honor the intent of a person who has indicated the intention to be an organ donor after death. The law provides a mechanism for overriding that intention. The law requires the Secretary of State's Office to provide information on organ donation to applicants drivers licenses and driving schools and, upon completion of a new computer system, to maintain the Maine Organ Donor Registry. The law becomes effective July 1, 2004.

**PUBLIC 398 An Act To Amend the Life Safety Requirements for Residential
EMERGENCY Care Facilities**

LD 1287

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DAGGETT FLETCHER	OTP-AM	S-192 S-238 MARTIN

Public Law 2003, chapter 398 clarifies certain changes to the life safety requirements for residential care facilities. It exempts residential care facilities with 4 or fewer beds from the requirements of certification by a design specialist.

Public Law 2003, chapter 398 was enacted as an emergency measure effective June 3, 2003.

PUBLIC 399 An Act To Improve Out-of-home Abuse and Neglect Investigations

LD 1314

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE BRENNAN	OTP-AM	H-459

Public Law 2003, chapter 399 requires the Department of Human Services' out-of-home abuse and neglect investigating team to initiate an investigation within 72 hours or request a safety plan when a report alleging jeopardy to a child in a residential care facility has been made. It requires the team to complete investigations within 6 months, except in circumstances when the information needed to complete the investigation is unavailable. The law also requires the team, in its investigative report, to specify whether the allegations have been substantiated and identify the responsible party. Finally, the law specifies that findings of out-of-home abuse and neglect are subject to the due process requirements of the Maine Administrative Procedures Act.

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PUBLIC 408 **An Act To Implement Federal Requirements in Child Protection Matters** **LD 1597**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRENNAN KANE	OTP-AM	S-221

Public Law 2003, chapter 408 amends the laws governing cases in which a court orders the removal of a child from a home. It also amends the laws governing court review of cases in which a court has made a jeopardy order and the laws governing when the Department of Human Services must file a termination petition.

PUBLIC 411 **An Act To Effectively Separate Children's Homes from Adult Residential Care Facilities Regarding Fire Safety** **LD 1542**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE WESTON	OTP-AM	H-487

Public Law 2003, chapter 411 applies the bill's requirements for children's homes with 7 to 16 beds to homes with 4 to 16 beds. It clarifies the requirement for facilities with 6 or fewer beds.

PUBLIC 416 **An Act To Implement Regulatory Reforms and To Address Staffing Issues in Long-term Care Facilities** **LD 1607**
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
COLWELL MARTIN	OTP-AM	H-525

Public Law 2003, chapter 416 amends the shared staffing provision of law, directs the long-term care ombudsman program to study long-term care eligibility assessments and reassessments, directs the State Board of Nursing to study the educational requirements for certified nursing assistants and directs the Nursing Home Administrators Licensing Board to study the requirements for nursing home administrators. The law adds members to the group of interested parties who will review improvements to nursing facility inspection activities and includes a study of assessments for cognitive needs.

Public Law 2003, chapter 416 was enacted as an emergency measure effective June 4, 2003.

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**PUBLIC 417 An Act To Amend the Laws Governing the Maine Developmental
Disabilities Council**

LD 1099

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BROMLEY DUDLEY	OTP-AM	S-183

Public Law 2003, chapter 417 removes the Maine Developmental Disabilities Council from within the Department of Behavioral and Developmental Services and establishes the council as an independent advisory agency. The law clarifies that employees of the council are not considered state employees except for the purposes of the state retirement system, the state employee health program and the Maine Tort Claims Act.

Public Law 2003, chapter 417 takes effect September 30, 2003.

PUBLIC 418 An Act to Ensure Patient Access to Medical Records

LD 363

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MILLS J	OTP MAJ ONTP MIN	

Public Law 2003, chapter 418 establishes the maximum amount that a patient may be charged to obtain a copy of the patient's medical records and allows patient's authorized representative to receive medical records.

**PUBLIC 419 An Act To Improve Complaint Resolution and Hearing Procedures
in the Department of Human Services**

LD 1356

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DAGGETT DUGAY	OTP-AM MAJ ONTP MIN	S-233

Public Law 2003, chapter 419 provides limitations on the authority of the Department of Human Services to recover overpayments, amends the informal appeal process, allows arbitration and restricts the sanction of total recoupment. It requires MaineCare provider relations personnel to assist MaineCare providers in addressing and resolving disagreements and corrects outdated language. It requires rulemaking to define the ownership and control relationships that apply in MaineCare offset situations. It requires a report from the Department of Human Services and the Department of Behavioral and Developmental Services on recommendations regarding complaint resolution and the hearing process.

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PUBLIC 421 An Act To Revise and Amend Certain Public Health Laws

LD 1602

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE WESTON	OTP-AM	H-505

Public Law 2003, chapter 421 defines columbarium and community mausoleum. It also inserts the word "community" to distinguish between the burial of dead human remains in a community mausoleum or other structure and the burial of dead human remains in a privately owned or family mausoleum, which is limited to six or fewer crypts.

This law amends the cancer registry laws to call for reporting certain benign tumors and to extend certain reporting deadlines and amends the childhood lead poisoning laws.

PUBLIC 430 An Act To Require Full Disclosure of Prescription Drug Marketing Costs

LD 254

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE TREAT	OTP-AM MAJ ONTP MIN	H-465

Public Law 2003, chapter 430 requires prescription drug manufacturers and labelers whose drugs are dispensed to state residents to file annual reports with the Department of Human Services regarding their expenses for marketing their drugs. The law requires the department to file an annual report with the Legislature and the Attorney General regarding the information filed and a biennial report that contains analysis of information and recommendations. The law continues the confidentiality of trade information that is protected under state and federal law. The law provides for a fine of \$1,000 for failure to report as required. The law provides for rulemaking by the department and contains an effective date of July 1, 2004. The law directs the Department of Human Services to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 1, 2005 and July 1, 2005 regarding assessment of fees on prescription drug manufacturers and labelers and the use of those fees to support the work of the department.

PUBLIC 444 An Act To Regulate the Delivery and Sales of Tobacco Products and To Prevent the Sale of Tobacco Products to Minors

LD 1236

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CUMMINGS DAGGETT	OTP-AM MAJ ONTP MIN	H-538

Public Law 2003, chapter 444 prohibits the delivery of tobacco products in the State from unlicensed retailers. It requires the Attorney General to make available lists of licensed and known unlicensed tobacco retailers. It prohibits unlicensed sales of tobacco products using telephonic or other electronic method of voice transmission or delivery services or the Internet. It imposes requirements on delivery sales and provides for enforcement by the

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Attorney General. It provides for seizure and forfeiture of contraband products in the same manner as and in accordance with the provisions applicable to contraband cigarettes.

PUBLIC 449 An Act To Preserve the Role of Assisted Living

LD 1197

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MAYO KANE	OTP-AM MAJ ONTP MIN	S-236

Public Law 2003, chapter 449 clarifies that a license is not required to operate an independent housing with services program. It clarifies that the rules that apply to assisted living programs do not apply to independent housing with services programs. It requires that rules for assisted living programs be consistent with federal tax requirements for projects financed by low-income housing tax credits. It requires the Maine State Housing Authority to apply for a private letter ruling regarding tax credit financed projects and the rules of the Department of Human Services and requires a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters. It requires the Department of Human Services and the Maine State Housing Authority to work with interested parties on landlord-tenant responsibilities as they pertain to assisted living programs. It directs the Department of Human Services to amend the rules for independent housing with services programs to allow for copayments of 20% to 40% of the cost of services.

PUBLIC 456 An Act To Protect Against Unfair Prescription Drug Practices

LD 554

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT LEMOINE	OTP-AM MAJ ONTP MIN	S-204

Public Law 2003, chapter 456 specifies the fiduciary duties of pharmacy benefits managers and the obligation to serve the covered entities with whom they contract and the covered individuals provided health care benefits by the covered entities. The law requires disclosure of financial terms that apply between a pharmacy benefits manager and a manufacturer or labeler. The law requires consultation with and agreement of the prescribing health professional or a representative of that professional before a pharmacy benefits manager may switch a prescription drug to be dispensed to a covered individual. The law prohibits agreements to waive provisions of the law. Violations of the law are violations of the Maine Unfair Trade Practices Act and are enforceable by private action or the Attorney General.

PUBLIC 465 An Act To Establish the Long-term Care Oversight Committee **EMERGENCY**

LD 57

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE PENDLETON	OTP-AM	H-443 S-276 GAGNON

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Public Law 2003, chapter 465 establishes the Long-term Care Oversight Committee to oversee policies and programs in the Department of Human Services with regard to long-term care for adults with disabilities and the elderly. The Committee, composed of 3 legislators and 14 public members, may meet up to 4 times per year and is required to submit an annual report to the Health and Human Services Committee.

This law was signed as an emergency and takes effect June 18, 2003.

PUBLIC 467 **An Act To Improve the Fairness of the Health Care Provider Tax and To Ensure Fair Implementation of Health Care Reimbursement Reforms** **LD 1293**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN	OTP-AM	S-220

Public Law 2003, chapter 467 makes technical corrections to the laws imposing the health care provider tax. It authorizes the Health and Human Services Committee to consider long-term care financing, including dedication of the health care provider tax and statutory requirements for enhanced reimbursement levels and to report out a bill to the Second Regular Session of the 121st Legislature.

PUBLIC 469 **An Act To Provide Affordable Health Insurance to Small Businesses and Individuals and To Control Health Care Costs** **LD 1611**
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
O'NEIL TREAT	OTP-AM	H-565 S-288 TREAT

Public Law 2003, chapter 469 establishes Dirigo Health as an independent executive agency to arrange for the provision of health coverage to small employers and their employees and dependents and to individuals on a voluntary basis. Dirigo Health is also required to monitor and improve the quality of health care in this State. Dirigo Health is governed by a board of directors. Five voting members must be appointed by the Governor and confirmed by the Legislature.

Dirigo Health must contract with health insurance carriers to offer health insurance to eligible small businesses and individuals through Dirigo Health Insurance. The health insurance benefits must be determined by the board and must comply with all statutory requirements of the Maine Insurance Code, including mandated benefits. The law also provides additional assistance through subsidies, based on a sliding scale, to employees and individuals with earnings below 300% of the federal poverty level who are enrolled in Dirigo Health. Employers who participate in Dirigo Health Insurance may be required to contribute up to 60% toward the cost of coverage for employees who work at least 20 hours per week and their dependents. The employer contribution rate for employees who work less than full time must be prorated. Coverage through Dirigo Health Insurance must begin no later than October 1, 2004.

In the first year of operation, funding for Dirigo Health is provided through the General Fund. After July 1, 2005, funding for subsidies and the Maine Quality Forum must be provided through savings offset payments paid by health insurance carriers, employee benefit excess insurance carriers and third-party administrators. The board of

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directors is required to establish the savings offset amount, not to exceed 4% of annual premium revenue or its equivalent, on an annual basis and those savings offset payments may not exceed the aggregate cost savings attributable to reductions in bad debt and charity care costs as a result of the operation of Dirigo Health and the expansion in MaineCare.

The law expands MaineCare coverage for children and adults and provides coverage for expansion enrollees who enroll individually and who enroll through Dirigo Health as part of an employer group. The expansion of MaineCare eligibility may not become effective until Dirigo Health becomes operational. Monthly reporting on the noncategorical adult MaineCare expansion will be required to monitor enrollment.

Within Dirigo Health, the law establishes a high-risk pool for persons whose care costs are over \$100,000 per year and for those with certain named diagnoses. It requires Dirigo Health to develop disease management protocols for persons in the high-risk pool. If after 3 years Dirigo Health underperforms relative to the trends in average premium rates and average rates of uninsured individuals compared to those trends in states with high-risk pools, Dirigo Health is charged with submitting legislation to create a high-risk pool on January 1, 2008.

The law establishes the Maine Quality Forum within Dirigo Health to collect and disseminate research, adopt quality and performance measures, coordinate quality data, issue quality reports in conjunction with the Maine Health Data Organization, conduct consumer education and technology assessment reviews, encourage the adoption of electronic technology, make recommendations for the biennial State Health Plan and issue an annual report. The Maine Quality Forum Advisory Council is established to assist the board and the forum. The Maine Health Data Organization will adopt rules to collect data on health care quality based on the quality measures adopted by the Maine Quality Forum and issue reports on health care services, costs and quality.

The law requires the Governor to issue a biennial State Health Plan and establishes an advisory council to assist in the development of the plan. Part B also establishes the capital investment fund, an annual limit for resources allocated under the certificate of need program. Within the capital investment fund, 12.5% of the total is required to be designated for nonhospital projects for a period of 3 years. The law specifies that a certificate of need or public financing that affects health care costs may not be provided unless it meets the goals and budgets in the State Health Plan.

The law applies certificate of need (CON) requirements to the portions of an ambulatory surgical facility used by patients or to support ambulatory surgical care and to new technology that costs over \$1,200,000 in the office of a private practitioner. It establishes an automatic adjustment to the CON thresholds based on the Consumer Price Index, medical index. It expands the bases on which the Commissioner of Human Services makes CON decisions, adding consistency with the State Health Plan, reference to quality outcomes, reference to inappropriate increases in service utilization and the limits of the capital investment fund. It allows the Commissioner of Human Services to receive reports from a panel of experts on CON applications and requires evaluations from the Department of Human Services, Bureau of Health and the Superintendent of Insurance. It requires hospitals and health care practitioners to make information on the charges for commonly offered health care services available to the public.

The law requires health care practitioners to submit claims to health insurance carriers in electronic format beginning October 16, 2003. Until October 16, 2005, health care practitioners with fewer than 10 full-time equivalent employees are not required to submit claims electronically. After that date, those practitioners may apply to the Superintendent of Insurance for an exemption from the electronic claims filing requirement.

The law requires the Superintendent of Insurance to adopt rules for the filing of annual report supplements by health insurers and health maintenance organizations. It requires small group health plans to submit rate filings to the Superintendent of Insurance and imposes rate hearings and rate reviews on those filings unless a carrier opts

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to guarantee a 78% loss ratio or refund excess premiums. It requires individual and small group health insurance rates to reflect savings offset payments and any recovery of those offsets in premium rates. It requires large group health carriers to file annually certification that rating practices and methods meet actuarial principles and that savings offset payments and recovery offsets have been properly included in the filing. It allows managed care health plans to apply to the Superintendent of Insurance for permission to offer health plans with financial incentive provisions to encourage the use of designated providers of specialty and hospital care if the plan does not exceed the Bureau of Insurance Rule Chapter 850 travel standards by 100% and meets quality criteria. The Superintendent of Insurance is required to adopt rules relating to quality criteria by January 1, 2004 and submit those rules for legislative review before final adoption. The provision regarding managed care plans offering health plans with financial incentive provisions is repealed on July 1, 2007 unless continued by the Legislature. It requires the Superintendent of Insurance to conduct a study of the impact of a cap of \$250,000 on noneconomic damages in medical malpractice lawsuits on the cost of medical malpractice insurance.

The law sets voluntary constraints on financial growth for a period of one year by health care practitioners, hospitals and health insurance carriers. It also requires the Governor's Office of Health Policy and Finance and the Maine Hospital Association to agree on a timetable, format and methodology for reporting on hospital charges, cost efficiency and consolidated operating margins. It requires the Department of Human Services to conduct a comprehensive study of MaineCare reimbursement rates and to report by January 15, 2005. It establishes the Commission to Study Maine's Hospitals and requires that commission to report by November 1, 2004.

The law requires the Governor to work to improve access to care for veterans and to improve Medicare reimbursements for Maine providers and establishes a task force to study health care services provided to Maine veterans.

The law restores \$500,000 in General Fund money to restore the physician incentive payment program within the MaineCare program.

PUBLIC 493 An Act To Protect Workers from Secondhand Smoke and To Promote Worker Safety LD 1346

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TURNER	OTP-AM MAJ	S-249
DUPLESSIE	ONTP MIN	

Public Law 2003, chapter 493 bans smoking in taverns and lounges, except that it allows smoking in designated smoking areas in off-track betting facilities and simulcast racing facilities at commercial tracks.

Public Law 2003, chapter 493 takes effect January 1, 2004.

PUBLIC 494 An Act To Improve the Maine Rx Program LD 1634

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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TREAT KANE		H-570 BRANNIGAN

Public Law 2003, chapter 494 enacts the Maine Rx Plus Program, amending the Maine Rx program that was upheld in the U.S. Supreme Court in the spring of 2003. The law imposes an income eligibility limit for the Maine Rx Plus program of 350% of the federal poverty level. The law corrects dates for the program and adds a quality assurance component. The law transfers funds from the General Fund to the Department of Human Services to implement and operate Maine Rx Plus.

P & S 21 An Act to Elevate the Standards of Foster Parenting in the State LD 239

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LAVERRIERE-BOUCHER BRYANT	OTP-AM	H-399

Private and Special Law 2003, chapter 21 specifies that the Department of Human Services must require its Foster/Adoptive Parent Advisory Committee to report to the Joint Standing Committee on Health and Human Services every 6 months. The law also requires the Foster/Adoptive Parent Advisory Committee to have a foster or adoptive parent as one of the cochairs of the committee.

P & S 24 An Act to Keep Foster Children Safe and Healthy LD 55

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LAVERRIERE-BOUCHER BRENNAN	OTP-AM MAJ ONTP MIN	H-170 H-240 TRAHAN

Private and Special Law 2003, chapter 24 requires the Department of Human Services to adopt rules on smoking in foster homes and in private vehicles of foster parents. The amendment designates the rules as major substantive rules.

RESOLVE 11 Resolve, To Amend the Laws Governing the Health Care LD 201
Workforce Leadership council

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A MARTIN	OTP-AM	H-163

Resolve 2003, chapter 11 amends Resolve 2001, chapter 89, which established the Health Care Workforce Leadership Council. Because members of the council were appointed late, the council was unable to meet the

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deadline for their interim report. This resolve sets a date for the interim report in November 2003, retains the final report deadline of November 3, 2004 and requires that the interim and final reports also address the potential role of and need for a permanent health care workforce council or center.

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RESOLVE 17 **Resolve, Directing the Department of Behavioral and Developmental Services To Conduct a Study Regarding a Registry of Direct Care Workers Working with Persons with Mental Retardation** **LD 95**

<u>Sponsor(s)</u> DUDLEY MARTIN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-162
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Resolve 2003, chapter 17 directs the Department of Behavioral and Developmental Services to conduct a study regarding the creation of a registry for direct care workers working with persons with mental retardation. The law requires the department to report the results of its study to the Joint Standing Committee on Health and Human Services by December 1, 2003.

RESOLVE 24 **Resolve, To Enhance Services to Children and Families** **LD 558**
EMERGENCY

<u>Sponsor(s)</u> LAVERRIERE-BOUCHER	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-293
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Resolve 2003, chapter 24 requires the Department of Human Services to adopt routine technical rules on matters relating to levels of care in the foster care system, including assessment of children and reimbursement rates. The resolve also requires the department to notify the Joint Standing Committee on Health and Human Services of any such rules that are proposed.

Resolve 2003, chapter 24 was passed as an emergency measure effective May 16, 2003.

RESOLVE 27 **Resolve, To Establish a System for Electronic Filing of Death Certificates** **LD 896**

<u>Sponsor(s)</u> MAYO RICHARDSON J	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-104
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Resolve 2003, chapter 27 requires the Department of Human Services, Bureau of Health to convene an advisory committee on the development of a plan and funding for an electronic death certificate filing system. It requires a report back by January 15, 2004 to the Joint Standing Committee on Health and Human Services. It requires the Bureau of Health to provide staffing for the work of the advisory committee.

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RESOLVE 28 Resolve, Regarding Fire Safety Issues in Head Start Preschool Programs Located in Public Schools LD 1105

<u>Sponsor(s)</u> MILLS P	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-254
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Resolve 2003, chapter 28 requires that the Department of Human Services and the Department of Education convene an advisory work group to examine fire safety issues in Head Start preschool programs that are located in public schools. The resolve requires the advisory task force to make recommendations to the two departments by November 14, 2003, and to report to the Joint Standing Committee on Health and Human Services by January 30, 2004.

RESOLVE 29 Resolve, To Lower the Costs of Prescription Drugs through the Use of the Federal Public Health Service Act LD 711

<u>Sponsor(s)</u> TREAT KANE	<u>Committee Report</u> OTP	<u>Amendments Adopted</u>
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Resolve 2003, chapter 29 requires the Department of Human Services to study and report to the Joint Standing Committee on Health and Human Services by January 1, 2004 on the benefits that could be recognized by the State if it utilized Section 340B of the federal Public Health Services Act to provide prescription drugs to Maine's most vulnerable patient populations. The resolve authorizes the committee to report out legislation to the Second Regular Session of the 121st Legislature.

RESOLVE 35 Resolve, Directing the Maine Health Data Organization To Evaluate the Current System of Annual Assessments and User Fees LD 532

<u>Sponsor(s)</u> NUTTING WESTON	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-255
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Resolve 2003, chapter 35 requires the Maine Health Data Organization to evaluate its current system of annual assessments and user fees and make recommendations for improvement to the Joint Standing Committee on Health and Human Services by January 30, 2004.

Health and Human Services

RESOLVE 52 **Resolve, To Ensure Appropriate Care for Older Persons with Dementia and Certain Other Diseases** **LD 1075**

<u>Sponsor(s)</u> KANE MAYO	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-446
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Resolve 2003, chapter 52 directs the Department of Human Services and the Department of Behavioral and Developmental Services to establish and support the Joint Advisory Committee on Select Services for Older Persons, establishes the duties of the committee and sets reporting periodic dates.

RESOLVE 54 **Resolve, Regarding Legislative Review of Chapter 120: Release of Information to the Public, a Major Substantive Rule of the Maine Health Data Organization** **LD 1527**
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u> OTP	<u>Amendments Adopted</u>
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Resolve 2003, chapter 54 authorizes final adoption of Chapter 120: Release of Information to the Public, a major substantive rule of the Maine Health Data Organization.

Resolve 2003, chapter 54 was passed as an emergency measure effective May 30, 2003.

RESOLVE 55 **Resolve, Regarding Consumer Information for Medicare Beneficiaries** **LD 903**

<u>Sponsor(s)</u> DAMON	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-199
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Resolve 2003, chapter 55 directs the Department of Human Services and the Department of Professional and Financial Regulation, Bureau of Insurance to work with a statewide organization providing legal services for the elderly and other consumer advocates to examine current practices for providing information to Medicare beneficiaries about Medicare supplement policies and to develop practices and procedures for providing information.

Health and Human Services

RESOLVE 57 **Resolve, to Expand the Choices of People Seeking Mental Health Therapy Under the MaineCare Program**

LD 58

<u>Sponsor(s)</u> LAVERRIERE-BOUCHER CATHCART	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-444
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Resolve 2003, chapter 57 authorizes the establishment of a demonstration project to permit a limited number of licensed clinical social workers, licensed clinical professional counselors and licensed marriage and family therapists to directly bill the Department of Human Services for mental health treatment provided to MaineCare members. The resolve requires the demonstration project to be budget-neutral and prohibits it from interfering in the relationships between MaineCare members and their mental health providers. The resolve requires reporting by January 15, 2004 and October 30, 2004.

RESOLVE 58 **Resolve, Directing the Department of Agriculture, Food and Rural Resources To Develop Guidelines for Requiring Handwashing Sinks in Certain Convenience Stores**

LD 1596

<u>Sponsor(s)</u> MCGOWAN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-484
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Resolve 2003, chapter 58 directs the Department of Agriculture, Food and Rural Resources, which has jurisdiction over most convenience stores, to establish guidelines to ensure that convenience stores that prepare only a minor amount of food and are assigned a low-risk code are not required to install a sink used exclusively for handwashing.

RESOLVE 61 **Resolve, Regarding Legislative Review of Portions of the**
EMERGENCY **MaineCare Benefits Manual, Chapter 111, Section 97: Private Non-Medical Institutions and Appendices B, C, D, E and F, a Major Substantive Rule of the Department of Human Services**

LD 1586

<u>Sponsor(s)</u>	<u>Committee Report</u> OTP	<u>Amendments Adopted</u>
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Resolve 2003, chapter approves major substantive rules of the Department of Human Services in the MaineCare Benefits Manual, Chapter 111, Section 97: Private Non-Medical Institutions and Appendices B, C, D, E and F. The resolve takes effect June 3, 2003.

Health and Human Services

RESOLVE 64 **Resolve, To Increase Public Access to the Prior Authorization Process** **LD 1288**

<u>Sponsor(s)</u> TURNER DUGAY	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-197
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Resolve 2003, chapter 64 directs the Department of Human Services to review MaineCare procedures applicable to the drug utilization review committee, to open those procedures to the public to the extent possible and to report to the Joint Standing Committee on Health and Human Services by October 1, 2003.

RESOLVE 66 **Resolve, Regarding Legislative Review of Chapter 113: Rules and Regulations Governing the Licensing and Functioning of Assisted Housing Programs, a Major Substantive Rule of the Department of Human Services, Bureau of Elder and Adult Services** **LD 1580**
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-514
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Resolve 2003, chapter 66 approves a major substantive rule of Chapter 113: Rules and Regulations Governing the Licensing and Functioning of Assisted House Programs, a rule of the Department of Human Services, Bureau of Elder and Adult Services, provided certain changes are made. The resolve takes effect June 4, 2003.

RESOLVE 67 **Resolve, Regarding Legislative Review of Portions of the MaineCare Benefits Manual, Chapter 11 and Chapter 111, Section 40, Home Health Services, a Major Substantive Rule of the Department of Human Services, Bureau of Medical Services** **LD 1588**
EMERGENCY

<u>Sponsor(s)</u>	<u>Committee Report</u> OTP	<u>Amendments Adopted</u>
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Resolve 2003, chapter 67 approves major substantive rules for the Department of Human Services for Portions of the MaineCare Benefits Manual, Chapter 11 and Chapter 111, Section 40: Home Health Services, major substantive rules of the Department of Human Services, Bureau of Medical Services.

Resolve 2003, chapter 67 was passed as an emergency measure effective June 4, 2003.

Health and Human Services

RESOLVE 68 **Resolve, Regarding Notice of Deficient Care in Long-term Care Settings** **LD 1264**

<u>Sponsor(s)</u> DUDLEY MAYO	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-466
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Resolve 2003, chapter 68 requires the Department of Human Services, Bureau of Medical Services, Division of Licensing to work together with interested parties, providers and advocates to review information that is available to the public on deficiencies in long-term care settings. It requires a report with recommendations to the Joint Standing Committee on Health and Human Services no later than February 1, 2004.

RESOLVE 69 **Resolve, Regarding Opportunities To Decrease the Occurrence of Developmental Disabilities and Mental Health Challenges in Childhood** **LD 1364**

<u>Sponsor(s)</u> LERMAN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-467
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Resolve 2003, chapter 69 authorizes the Maine Developmental Disabilities Council to submit a report and recommendations to the Joint Standing Committee on Health and Human Services based on the results of the project it is undertaking to identify opportunities to decrease the occurrence of developmental disabilities and mental health challenges in childhood. The resolve authorizes the committee to report out legislation to the Second Regular Session of the 121st Legislature based on the council's recommendations.

RESOLVE 70 **Resolve, Directing the Department of Human Services To Enact Rules To Reduce the Health Risks Associated with Latex Gloves** **LD 767**

<u>Sponsor(s)</u> PENDLETON DUPLESSIE	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-177 S-225 BRENNAN
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Resolve 2003, chapter 70 directs the Department of Human Services, Bureau of Health to adopt rules requiring the development of protocols regarding the use of latex gloves. It directs the Bureau of Health to report back to the Joint Standing Committee on Health and Human Services regarding the rules, the development of protocols, the anticipated impact of the protocols and whether legislation is required to further address allergies to latex gloves by January 30, 2004. It designates the rules as routine technical rules. The resolve directs the Department of Labor to study the use of latex gloves in commercial establishments, industrial facilities and state agencies.

Health and Human Services

RESOLVE 84 Resolve, To Study the Needs of Deaf and Hard-of-hearing Children and Adolescents LD 553

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
EDMONDS SMITH W	OTP-AM	H-553 RICHARDSON J H-590 DUPLESSIE S-182

Resolve 2003, chapter 84 establishes the Task Force to Study the Needs of Deaf and Hard-of-hearing Children and Adolescents. The task force is composed of 4 legislators, 11 members of the public, the Commissioner of Human Services, the Commissioner of Education and the Commissioner of Behavioral and Developmental Services. The task force is authorized to meet up to 4 times and is required to submit a report, including suggested legislation, to the 2nd Regular Session of the 121st Legislature no later than December 3, 2003.

RESOLVE 95 Resolve, To Study Obesity and Methods To Decrease the Cost of Health Care and Increase the Public Health LD 471

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FAIRCLOTH BRENNAN	OTP-AM	H-464 H-585 KANE

Resolve 2003, chapter 95 establishes the Commission to Study Public Health to study the causes of obesity and methods to decrease the cost of health care and improve public health. The commission is composed of 31 members, of whom 4 are legislators. The Commission is required to submit a report to the Legislature by December 1, 2003 and may introduce its own legislation.

RESOLVE 96 Resolve, Regarding the Operation of the Maine Registry of Certified Nursing Assistants LD 281

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BUNKER STANLEY	OTP-AM MAJ ONTP MIN	H-542 S-292 CATHCART

Resolve 2003, chapter 96 requires the Department of Public Safety to adopt rules providing free access to criminal history record information for the Maine Registry of Certified Nursing Assistants. It requires the Department of Education to adopt rules requiring the CNA course fee to include the record check fee. It requires the Department of Human Services to report to the Health and Human Services Committee on the method of conducting CNA record checks by 12/31/03, 7/1/04 and 12/31/04. The resolve provides an appropriation for the Department of Public Safety for staff and operating costs.

Health and Human Services

**RESOLVE 97
EMERGENCY**

**Resolve, Directing the Department of Human Services To Establish
an Advisory Task Force to Examine Staff-child Ratios and
Maximum Group Size in Child Care Facilities**

LD 732

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DUPREY B SAWYER	OTP-AM	H-168 S-277 GAGNON

Resolve 2003, chapter 97 directs the Department of Human Services to convene an advisory task force to study staff-child ratios and maximum group size in child care facilities. The resolve requires the task force to make recommendations to the department by December 3, 2003 and requires the department to review those recommendations and report its conclusions to the Joint Standing Committee on Health and Human Services by January 5, 2004. The resolve also requires the department to retain current child care rules in effect until June 15, 2004 to allow for the task force to complete its work and the department to conduct additional rulemaking if necessary.

Resolve 2003, chapter 97 was passed as an emergency measure effective June 25, 2003.