**10** and **14**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS)**

Annual Regulatory Agenda

October 1, 2014 – September 30, 2015

*(includes amendments)*

List of reported agendas:

**Licensing Rules** (several umbrella-unit numbers). Then:

**10-144: Office of MaineCare Services, Division of Policy**

**10-144: Office for Family Independence** (formerly Office of Integrated Access and Support)

**10-144: Maine Center for Disease Control and Prevention**

*(includes* ***90-429****, Board of Licensure of Water Treatment Plant Operators)*

**10-146: Office of Data, Research and Vital Statistics**

**10-148: Office of Child and Family Services** *(chapters not already listed under Licensing Rules)*

**14-118: Office of Substance Abuse**

**10-149 & 14-197** **Office of Aging and Disability Services (**formerly the Office Elder Services and the Office of Adults with Cognitive and Physical Disability Services)

**Licensing Rules**:

**10-144**: DHHS – General

**10-148**: Office of Child and Family Services

**10-149 & 14-197**: **Office of Aging and Disability Services (**formerly the Office Elder Services and the Office of Adults with Cognitive and Physical Disability Services)

**14-118**: Office of Substance Abuse

**14-191**: Mental Health & Mental Retardation

**14-193**: Office of Adult Mental Health

AGENCY NAME: **Division of Licensing and Regulatory Services**

**CONTACT PERSON**: Kenneth Albert, Director, Division of Licensing and Regulatory Services, #11 State House Station, 41 Anthony Avenue, Augusta, ME 04333-0011. Tel: (207) 287-9300 E-mail: Kenneth.Albert@maine.gov

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA**: None.

**EXPECTED RULE-MAKING ACTIVITY, October 1, 2014 – September 30, 2015:**

**10-144 CHAPTER 110**

Regulations Governing the Licensing and Functioning of Skilled Nursing Facilities and Nursing Facilities

STATUTORY BASIS: 22 M.R.S.A. Chapter 405; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE: The rules will implement legislation, including Resolve 2007, Chapters 61, 80 and 324 by amending provisions including by not limited to: sanctions; license terms up to 24 months; operating without a license; the use of restraints; and review rules governing transfer, discharge and denial of admission or readmission to a nursing facility. The [APOC] recommendations, including but not limited to deeming for federal regulatory and national accreditation standards to eliminate duplication of regulatory oversight at the state level.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES; Other state agencies, providers and consumers of services provided by nursing facilities.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 113**

Regulations Governing the Licensing and Functioning of Assisted Housing Programs

STATUTORY BASIS: 22 M.R.S.A. Chapters 1663 and 1664; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE. Changes introduced by the Centers for Medicare and Medicaid Services (CMS) will impact Maine’s private non-medical facilities and require regulatory changes that will repeal the PNMI licensing rules and replace them with licensing rules for personal care homes.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Other state agencies, providers, and consumers of services currently provided by private non-medical facilities, Level I, II, III, and IV.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 117**

Regulations Governing the Licensing and Functioning of Adult Day Services Programs

STATUTORY BASIS: 22 M.R.S.A. Chapter 1505 (Adult Day Care) and Chapter 1679 (Adult Day Care Program); 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE: Amend rules to include licensed adult day “medical care” programs.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Other state agencies, providers, and consumers of adult day care services

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 119**

Regulations Governing the Licensing and Functioning of Home Health Care Services in the State of Maine

STATUTORY BASIS: 22 M.R.S.A. Chapter 419; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE: Amend rules to comply with federal and state statutory changes to allow Home Health Agencies meeting the Federal Conditions of Participation for Home Health Agencies, 42 Code of Federal Regulations §484.10-§484.55, to be deemed to meet the State of Maine Home Health Care Services licensing requirements and to reflect the Board of Nursing language regarding the delegation of certain aspects of medication to the Certified Nursing Assistants (CNAs) in the Home Health Care setting.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Other state agencies, providers, and consumers of Home Health Care services.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 120**

Regulations Concerning the Licensing and Functioning of Hospice Programs

STATUTORY BASIS: 22 M.R.S.A. Chapter 1681; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE. Amend the rules to include federal regulatory changes.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Other state agencies, providers, and consumers of services provided by intermediate care facilities for persons with mental retardation.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 122**

Rules Governing the Maine Medical Use of Marijuana Program

STATUTORY BASIS: 22 M.R.S.A. Chapter 558-C; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE: To implement over 10 Public Laws enacted by the 126th Legislature.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Other state agencies, providers, and consumers of medical use marijuana.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 128**

Rules and Regulations Governing the Functioning of Certified Nursing Assistants

STATUTORY BASIS: 22 M.R.S.A., §§ 42 and 1812G; 22-A M.R.S.A. §205.

PURPOSE: Amend rules in accordance with PL 2009, chapter 215, including definitions, complaint investigation, and registry listing of unlicensed assistive persons with substantiated complaints.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Healthcare facilities, long-term care facilities, personal care agencies and placement agencies, temporary nurse agencies and unlicensed assistive persons.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 129**

Rules and Regulations Governing In-Home Personal Care and Support Workers.

STATUTORY BASIS: 22 M.R.S.A. §§ 42 and 1717; 22-A M.R.S.A. §205.

PURPOSE: The rules will be amended to implement Resolve 2007, Chapter 324, including but not limited to: the registration of personal care agencies and placement agencies, enforcement authority, and penalties including injunctive relief for operating an unregistered personal care agency or placement agency.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES; Other state agencies, providers and consumers of services provided by personal care agencies and placement agencies.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-144 CHAPTER 150**

Free Care Guidelines

STATUTORY BASIS: 22 M.R.S.A. §1716; 22 M.R.S.A. §42; 22-A M.R.S.A. §205.

PURPOSE: The rules shall be amended in accordance with discussions held by the 126th Maine Legislature regarding LD 610 (DEAD) and the federal Affordable Health Care legislation. The rules shall amend the guidelines for the free care policies of hospitals including minimum income guidelines to be used in determining whether individuals are unable to pay for hospital services.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES: Providers, and consumers.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**CERTIFICATE OF NEED RULES:**

**10-144** **CHAPTER 503**

Maine Certificate of Need Procedures Manual for Health Care Facilities (other than Nursing Care Facilities)

STATUTORY BASIS: 22 M.R.S.A. Chapter 103-A, Maine Certificate of Need Act of 2002; Public Law 2011, Chapter 424; 22 M.R.S.A. §42, and 22-A M.R.S.A. §205.

PURPOSE: The current 2 CON rules will be repealed and replaced by a single CON rule that will include what is now in Section 71 (nursing facility CON provisions) and a number of statutory changes mandated by the Legislature. SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES; Other state agencies, providers and consumers.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**10-149** **CHAPTER 5, SECTION 71**

Certificate of Need for Nursing Facility Level of Care Projects

STATUTORY BASIS: 22 M.R.S.A. Chapter 103-A, Maine Certificate of Need Act of 2002; Public Law 2011, Chapter 424; 22 M.R.S.A. §42, and 22-A M.R.S.A. §205.

PURPOSE: This rule will be repealed and Chapter 503 (above) will include nursing facility CON provisions.

SCHEDULE FOR ADOPTION: Repeal is scheduled for September 2015.

AFFECTED PARTIES; Other state agencies, providers and consumers.

CONSENSUS-BASED RULE DEVELOPMENT: N/A.

**10-144 CHAPTER 501**

Maine Certificate of Need Limitations

STATUTORY AUTHORITY: 22 M.R.S.A. §342

PURPOSE: This rule will be repealed. These rules limit the CON applications the state will accept.

ANTICIPATED SCHEDULE: Repeal is scheduled for September 2015.

AFFECTED PARTIES: Providers subject to the certificate of need process.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**[NEW] No Chapter Number and Title** [core licensing standards rule]

***“RULES LICENSING BEHAVIORAL HEALTH PROGRAMS”***

STATUTORY BASIS: 5 M.R.S.A. Chapter 521; 22 M.R.S.A. Chapter 1669; 22 M.R.S.A. §42; 22-A M.R.S.A. §205; and 34-B M.R.S.A. Chapter 3.

PURPOSE: Three (3) licensing and certification rules will be repealed and replaced by a single behavioral health programs licensing rule. The new rule will implement the Administrative Processes Oversight Committee [APOC] recommendations, including the development of core licensing standards for behavioral health programs, including mental health, substance abuse treatment, and children’s residential programs. Incorporated into the new behavioral health licensing rule will be PL 2007, Chapter 320 that amends the definition of children to include a person under the age of 21 and authorizes adult parents to reside with their children. The amended definition of children aligns licensing rules with MaineCare and the Office of Child and Family Services rules. The new rules will include deeming provisions for accredited providers to avoid redundancies in the licensing and accreditation processes. The following rules will be repealed and replaced:10-148Code of Maine Rules (C.M.R.) Ch.18 and 18-A;Rules for the Licensure of Residential Child Care Facilities and Rules for the Licensure of Private Non-Medical Institutions-[PNMI] Residential Child Care Facilities;14-118 C.M.R. CHAPTER 5**.** Regulations for Licensing and Certifying of Substance Abuse Treatment Programs;14-193 C.M.R. CHAPTERS 6 and 6-A**.** Licensing of Mental Health Facilities and Licensing of Private Non-medical Institutions [PNMI] Mental Health Facilities.

SCHEDULE FOR ADOPTION: The rules are scheduled for September 2015.

AFFECTED PARTIES; Other state agencies, providers and consumers.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

UMBRELLA-UNIT: **10-144**

AGENCY NAME: **Office of MaineCare Services - Division of Policy**

**CONTACT PERSON**: Beth Ketch, Director- Division of Policy and Provider Services, Office of MaineCare Services, #11 State House Station, Augusta, ME 04333-0011. Tel. (207) 287-4078

**2011-2012 Regulatory Agenda (Rules) - Department of Health and Human Services - State of Maine- Office of MaineCare Services, Division of Policy**

CONTACT PERSON: Beth Ketch, Director- Division of Policy and Provider Services, Office of MaineCare Services, #11 State House Station, Augusta, ME 04333-0011. Tel. (207) 287-4078

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:**

Chapter 101 - MaineCare Benefits Manual- several sections:

Chapter II, Section 45, Hospital Services Effective via Emergency: 8/27/13

Chapter III, Section 45, Hospital Services Effective via Emergency: 11/15/13

Chapter II, Section 13, Targeted Case Management Effective via Emergency: 12/30/13

Chapter III, Section 67, Principles of Reimbursement for Nursing Facilities Effective via Emergency: 2/28/14

Chapter II, Section 4, Ambulatory Surgical Center Services Effective via Emergency: 7/1/14

**CONSENSUS BASED RULEMAKING:** None

**EXPECTED RULEMAKING ACTIVITY- October 1, 2014- September 30, 2015:**

**CHAPTER 101**: MaineCare Benefits Manual: Chapters I, II, III, IV, V, VI, VII, VIII, X and relevant Principles of Reimbursement

STATUTORY AUTHORITY: 22 M.R.S.A. §42, §3173; P.L. 99 Chapter 777

PURPOSE: These rules describe requirements for the provision and reimbursement of services under the MaineCare (formerly, Maine Medicaid and State Child Health Insurance Program (SCHIP), also known as Cub Care) program. It also describes certain administrative functions necessary for the operation of the MaineCare Program. They will be amended to comply

with federal changes, to update policy and to implement new services and regulations, as necessary.

ANTICIPATED SCHEDULE: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes as a result of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

AFFECTED PARTIES: MaineCare members, MaineCare providers, and Managed Care Organizations

**CHAPTER 104:** Maine State Services Manual

STATUTORY AUTHORITY: 22 M.R.S.A. §257

PURPOSE: These rules describe requirements for the provision and reimbursement of services under the state funded services including medical eye care, Drugs for the Elderly (DEL) Benefit, and Maine Rx+ Benefit. It also describes certain administrative functions necessary for the operation of these Benefits. They will be amended to comply with federal changes, to update policy and to implement new services and regulations, as necessary.

ANTICIPATED SCHEDULE: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes as a result of identified problems require the timely amendment or adoption of new rules over the course of the year. It is anticipated that

Chapter 107 Medical Eye Care will be incorporated into this chapter.

AFFECTED PARTIES: Participants and providers in DEL and other state funded benefits.

**CHAPTER 107:** Medical Eye Care Program

STATUTORY AUTHORITY: 22 M.R.S.A. §42, §3173

PURPOSE: These rules govern the operation of Maine's State-funded Eye Care Program. They will be amended to reflect administrative changes found necessary through monitoring of this program.

ANTICIPATED SCHEDULE: It is not possible to predict when changes will be made to the above regulations because of the nature of this policy. State-initiated changes as a result of identified problems will require the timely amendment of the rules. It is anticipated this chapter will be incorporated into Chapter 104.

AFFECTED PARTIES: Children and adults not eligible for Medicaid for whom the State would reimburse for certain eye care services as well as the providers of these services

**CHAPTER 275:** Reporting Requirements for Pharmaceutical Manufacturers and Labelers

STATUTORY AUTHORITY: 22 MRSA §2698-A, 22 MRSA §2700-A

PURPOSE: These rules define statutory obligations of manufacturers and labelers of prescription drugs and biological products to publicly register and report results of clinical trials and also report gifts to prescribers and marketing costs in Maine.

ANTICIPATED SCHEDULE: It is not possible to predict when additional changes will be made to the above regulations because of the nature of this policy. State-initiated changes as a result of identified problems will require the timely amendment of the rules. Two changes for the upcoming year include new requirements for prescriber confidentiality and academic detailing.

AFFECTED PARTIES: Residents of Maine

UMBRELLA-UNIT: **10-144**

AGENCY NAME: **Office for Family Independence (OFI):** Eligibility, Employment and Training and Support Enforcement and Recovery

**ELIGIBILITY AND EMPLOYMENT AND TRAINING CONTACT PERSON**: Bethany Hamm, Director, Office for Family Independence, #11 State House Station, Augusta, ME 0433-0011. Tel: (207) 624-4101. E-mail: bethany.hamm@Maine.gov

**SUPPORT ENFORCEMENT AND RECOVERY CONTACT PERSON**: Jerry Joy, Director, Division of Support Enforcement and Recovery, #11 State House Station, 19 Union Street, Augusta, ME 04333-0011. Tel: (207) 624-6985. E-mail: Jerry.Joy@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:**

**ELIGIBILITY:**

**CHAPTER 301** (Food Supplement Program Certification Manual):

**CHAPTER 323** (Maine General Assistance Policy Manual)

**CHAPTER 331** (Public Assistance Payments Manual):

**Rule #99E**: Ch. V, Post TANF Benefits (pages 1-7), Transitional Services Benefits
EFFECTIVE DATE: October 1, 2013

**CHAPTER 332** (MaineCare Manual):

**Rule #273E**: Implementation of MAGI Eligibility Methodology:
Parts 1 (General Information),
PART 2 (Basic Eligibility Criteria),
PART 3 (Categorically Needy Families with Children-related Coverage),
PART 3.5 (Eligibility Group Requirements),
PART 4 (Family-Related Budgeting),
PART 4.5 (Budgeting for Eligibility Groups for which MAGI-Based Methodology Applies),
PART 5 (Children's Health Insurance Program (CHIP) - Cub Care),
PART 5.5 (Children's Health Insurance Program (CHIP) - Cub Care),
PART, 16 (Assets),
PART 16.5 (Assets),
PART 17 (Income),
PART 17.5 (Income),
CHART 6.5 (Federal Poverty Level/MAGI 5% Reduction Calculation/Effective January 1, 2013)
CHART 8.5; (Cub Care)
ADOPTED RULE NUMBER: **2013-337** *(Emergency)*
EFFECTIVE DATE: December 31, 2013

**CHAPTER 607 (ASPIRE):** None

**CHAPTER 608** (ASPIRE/JOBS Program - Purchase of Service Contracts): None

**CHAPTER 609** (ASPIRE/JET PROGRAM RULES): None

**SUPPORT ENFORCEMENT AND RECOVERY:** None

**CHAPTER 351** Child Support Enforcement Manual:

**EXPECTED RULEMAKING ACTIVITY- October 1, 2014 - September 30, 2015:**

**ELIGIBILITY:**

**CHAPTER 301**: Food Supplement Program Certification Manual

STATUTORY AUTHORITY: 22 M.R.S.A. §3104

PURPOSE: These rules establish requirements for eligibility for the Food Supplement Program. The rules will be amended to reflect policy and law changes as well as to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals who receive or apply for Food Supplement Program benefits.

**CHAPTER 323**: Maine General Assistance Policy Manual

STATUTORY AUTHORITY: 22 M.R.S.A. §§ 4300 to 4323

PURPOSE: These rules establish overall requirements for eligibility for the General Assistance program. Rules are further delineated by municipal ordinances. These rules will be amended to reflect policy and law changes as well as to clarify rules already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals who apply for or receive General Assistance benefits.

**CHAPTER 331**: Public Assistance Payments Manual

STATUTORY AUTHORITY: 22 M.R.S.A. §§ 3761 - 3790

PURPOSE: These rules establish overall requirements for eligibility for the Temporary Assistance for Needy Families and other cash assistance programs. The rules will be amended to reflect policy, law changes, and federal program instructions as well as to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Families who apply for or receive Temporary Assistance for Needy Families and other cash assistance.

**CHAPTER 332**: MaineCare Eligibility Manual

STATUTORY AUTHORITY: 22 M.R.S.A. §3173

PURPOSE: These rules establish requirements for eligibility for Maine's MaineCare and State Supplement to Supplemental Security Income programs. The rules will be amended to reflect changes in law, including health care reform, and to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals and families applying for or receiving MaineCare or State Supplement benefits.

**CHAPTER 351:** Maine Child Support Enforcement Manual

STATUTORY AUTHORITY: Title 19-A, Chapters 63 and 65

PURPOSE: These rules establish requirements and procedures for enforcement and recovery of child support pursuant to court and administrative orders. The rules will be amended to reflect changes in law, and to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals and families for whom the Division of Support Enforcement and Recovery collects child and spousal support.

**EMPLOYMENT AND TRAINING:**

**CHAPTER 607**: ASPIRE/TANF Program Rules

STATUTORY AUTHORITY: 22 M.R.S.A. §3781-A

PURPOSE: These rules establish requirements for participants in the ASPIRE program who are receiving Temporary Assistance for Needy Families benefits. They will be amended to reflect changes in law and policy and to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals participating in the ASPIRE/TANF program.

**CHAPTER 608**: ASPIRE/TANF Program - Purchase of Service Contracts

STATUTORY AUTHORITY: 22 M.R.S.A. §3781-A

PURPOSE: These rules establish the guidelines for contracts purchasing services for ASPIRE participants.

ANTICIPATED SCHEDULE: Year round.

AFFECTED PARTIES: Agencies who contract with the Department of Health and Human Services to provide services to ASPIRE participants.

**CHAPTER 609**: ASPIRE/JET Program Rules

STATUTORY AUTHORITY: 22 M.R.S.A. §3104

PURPOSE: These rules establish requirements for participants in the ASPIRE program who are receiving Food Supplement Program benefits. The rules will be amended to reflect changes in law and policy and to clarify requirements already in effect.

ANTICIPATED SCHEDULE: Year round

AFFECTED PARTIES: Individuals participating in the ASPIRE program who are receiving Food Supplement Program benefits.

Support Enforcement and Recovery

**CHAPTER 351**: Maine Child Support Enforcement Manual

STATUTORY AUTHORITY: 19-A M.R.S.A. §101 *et seq*.

PURPOSE: These rules implement Federal statutes, regulations and action transmittals of the U.S. Department of Health and Human Services and State statutes and establish rules of practice governing the conduct of adjudicative proceedings of the Division of Support Enforcement and Recovery. The rules will be amended to reflect policy and law changes with clarifications as necessary.

ANTICIPATED SCHEDULE: Year round.

AFFECTED PARTIES: Persons who pay or receive support.

## AGENCY UMBRELLA-UNIT NUMBER: 10-144

##### AGENCY NAME: Maine Center for Disease Control & Prevention

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:** None

**DIVISION OF ENVIRONMENTAL HEALTH**

**CONTACT PERSON:** Nancy Beardsley, Director, Division of Environmental Health, 11 State House Station, Augusta, ME 04333-0011 Telephone: (207) 287-5686.

**EXPECTED 2013-2014 RULE-MAKING ACTIVITY:**

**CHAPTER 233:** Rules Relating to Testing of Private Water Systems for Potentially Hazardous Contaminants *(Amendment)*

STATUTORY AUTHORITY: 22 M.R.S. §2602-A

PURPOSE OF THE RULE: To amend rules for the protection of public health and/or for compliance with current standards of practice and current hazards.

LISTING OF AFFECTED PARTIES:

Regulated parties—Health and Environmental Testing Lab, and Maine Citizens

Benefited parties—Maine citizens.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration

SCHEDULE FOR ADOPTION: None planned. These rules from 1984 include vastly outdated materials in the appendices including a HETL fee schedule, a list of private certified laboratories, and a list of Maximum Exposure Guidelines. These lists are no longer current and would need to be replaced with current information if these rules were to be used.

**HEALTH INSPECTION PROGRAM**

**Contact Person:** Tera Pare, J.D., Rule-making Coordinator, Division of Environmental Health, 11 State House Station, Augusta ME 04333-0011; 287-5680. E-mail: Tera.Pare@Maine.gov.

**CHAPTER 200**: State of Maine Food Code

STATUTORY AUTHORITY: 22 M.R.S. §§ 24916(1)& 7 M.R.S. §12

PURPOSE OF THE RULE: To address controls for risk factors and further establishes 5 key public health interventions to protect consumer health. Specifically, these interventions are: demonstration of knowledge, employee health controls, controlling hands as a vehicle of contamination, time and temperature parameters for controlling pathogens, and the consumer advisory.

AFFECTED PARTIES: Eating establishments in the State of Maine.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None Planned

SCHEDULE FOR ADOPTION: Summer 2015.

**CHAPTER 201**: Rules Relating to the Administration and Enforcement of Establishments Regulated by the Health Inspection Program

STATUTORY AUTHORITY: 22 M.R.S. §§ 2491- 2501.

PURPOSE OF THE RULE: To provide specific compliance and enforcement requirements for the eating and lodging establishments, campgrounds, sporting/ recreational camps and youth camps licensed by the Health Inspection Program.

AFFECTED PARTIES: Eating, lodging and other Health Inspection Program licensees in the State of Maine

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 202:** Rules Relating to Public Swimming Pools and Spas

STATUTORY AUTHORITY: 22 M.R.S. §§ 1631-1635, 2661-2669

PURPOSE OF THE RULE: These rules are established to protect public health, by providing specific compliance and enforcement requirements for the eating and lodging establishments, campgrounds, sporting/recreational camps and youth camps licensed or regulated by the Health Inspection Program in the Division of Environmental Health, Department of Health and Human Services.

AFFECTED PARTIES: Owners/operators of public swimming pools and spas.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned

**CHAPTER 203:** Rules for the Retail Sale of Tobacco

STATUTORY AUTHORITY: Chapter 262-A; §42 sub-1.

PURPOSE OF THE RULE: To regulate the licensing of retail tobacco sales.

AFFECTED PARTIES: Licensed tobacco retailers.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 205:** Rules Relating to Campgrounds

STATUTORY AUTHORITY: 22 M.R.S. §§ 2491-2502 (Chapter 562)

PURPOSE OF THE RULE: To clarify definitions of recreational vehicle classification, and the definitions of temporary campground, and agricultural fair campground.

AFFECTED PARTIES: Public, fairs, event promoters, and owners/operators of campgrounds.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

SCHEDULE FOR ADOPTION: Spring 2015.

**CHAPTER 206**: Rules Relating to Lodging Establishments

STATUTORY AUTHORITY: 22 M.R.S. §§ 2491- 2501.

PURPOSE OF THE RULE: To protect public health by regulating and licensing Lodging Places.

AFFECTED PARTIES: Lodging establishments in the State of Maine.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Fall 2015.

**CHAPTER 208:** Boys, Girls, Boys and Girls, Day Camps and Primitive and Trip Camping

STATUTORY AUTHORITY: 22 MRS Chapter 562 (§§ 2491-2501).

PURPOSE OF THE RULE: To clarify specific definitions for similar camps, and bring the rules up to date with staff credentialing and certification requirements.

AFFECTED PARTIES: Summer youth camps and their staff, children who attend summer youth camps.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

SCHEDULE FOR ADOPTION: Summer 2015.

**CHAPTER 209:** Body Piercing Rules

STATUTORY AUTHORITY: 32 M.R.S. §§ 4321-4329.

PURPOSE OF THE RULE: To provide health and safety standards for persons engaged in the practice of body piercing and license body piercers.

AFFECTED PARTIES: People who practice body piercing and the public who undergo body piercing.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: FY 2014-2015

**CHAPTER 210:** Rules Relating to Tattooing

STATUTORY AUTHORITY: 32 M.R.S. §4251

PURPOSE OF THE RULE: These rules require people who practice the art of tattooing to obtain licenses and to show proof of the proper facilities, equipment, and procedures for the protection of the public’s health and safety.

AFFECTED PARTIES: Public, tattooists and body piercers

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Plan to engage stakeholders in FY 2014

SCHEDULE FOR ADOPTION: FY 2014-2015

**CHAPTER 211:** Rules Relating to Micropigmentation Practitioners

STATUTORY AUTHORITY: 32 M.R.S. §§ 4311-4317.

PURPOSE OF THE RULE: To clarify the educational requirements for licensing.

AFFECTED PARTIES: Micropigmentation practitioners and the public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Winter 2014-2015.

**CHAPTER 212:** Rules for the Practice of Electrology

STATUTORY AUTHORITY: 32 M.R.S. §§ 1221-1243.

PURPOSE OF THE RULE: To regulate and license the practice of electrology.

AFFECTED PARTIES: People who practice micropigmentation and the public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Winter 2014-2015.

**CHAPTER 214:** Mass Gathering Rules

STATUTORY AUTHORITY: 22 M.R.S. §§ 1601-1602

PURPOSE OF THE RULE: To amend the application process for permits, and clarify the method for determining event populations.

AFFECTED PARTIES: Public, municipalities, and event promoters.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 225:** Rules Relating to the Licensing of Suppliers of Compressed Air Used In Self-Contained Breathing Apparatus

STATUTORY AUTHORITY: 22 M.R.S. §1581 *et seq*.

PURPOSE OF THE RULE: To provide standards for the accurate testing of air and provide for third party testing.

AFFECTED PARTIES: Dive shops, fire departments, other suppliers of compressed air.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None Planned.

SCHEDULE FOR ADOPTION: None Planned.

**CHAPTER 250:** Rules Relating to Smoking in the Workplace

STATUTORY AUTHORITY: 22 M.R.S. §1579-A

PURPOSE OF THE RULE: To upgrade and clarify rules as related to non-smoking areas in restaurants, and to increase the fee to $50 annually.

AFFECTED PARTIES: Public, employees, owners/operators of restaurants.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 227:** Rules Relating to Licensing and Inspection of Crematoria

STATUTORY AUTHORITY: 32 M.R.S. §1405

PURPOSE OF THE RULE: To license crematoria to insure the proper cremation of bodies and disposal of ashes.

AFFECTED PARTIES: Owners/operators of crematoria.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 240** Rules for Appointment and Administration of Local Plumbing Inspectors

STATUTORY AUTHORITY: 22 M.R.S. §§ 42(3), 42(3-A), 42(3-B), 205 & 210; 30-A §§ 4211(5), 4212(1), 4215(4), 4221, and 4451.

PURPOSE OF THE RULE: To refine and clarify established procedures for the eligibility requirements, appointment, and duties of local plumbing inspectors.

AFFECTED PARTIES: Persons certified as Local Plumbing Inspectors, and those seeking such certification.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 241** Maine Subsurface Wastewater Disposal System Rules**:**

STATUTORY AUTHORITY: 22 M.R.S. §§ 42(3), 42(3-B); 30-A M.R.S. §§ 4211(5), 4215(4), 4211 & 4452; 22-A M.R.S. §205(2).

PURPOSE OF THE RULE: To regulate the design, permitting, and installation of subsurface wastewater disposal systems as necessary, and to correct mistakes from the last rule-making.

AFFECTED PARTIES: Any person, establishment, and/or institution using an on-site subsurface wastewater disposal system for sanitary wastewater.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Fall 2014.

**CHAPTER 242** Rules for Conversion of Seasonal Dwelling Units into Year-Round Residences in the Shoreland Zone

STATUTORY AUTHORITY: 22 M.R.S. §42; 30-A M.R.S. §§ 4211-4212 & 4215.

PURPOSE OF THE RULE: To update established State requirements for the conversion of seasonal residences using onsite subsurface wastewater disposal to year-round use. These Rules are intended to complement municipal planning, zoning, and land use control.

AFFECTED PARTIES: Anyone wishing to convert a seasonal residence to year-round use.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Winter 2014-2015.

**CHAPTER 243** Minimum Lot Size Law Variance Rules

STATUTORY AUTHORITY: 12 M.R.S. §4807

PURPOSE OF THE RULE: To update and clarify established provisions for approval of subsurface waste water disposal systems on lots with less than 20,000 square feet and 100 feet of frontage if the lot abuts a water body.

AFFECTED PARTIES: Anyone wishing to develop a lot meeting the exemption requirements of 12 MRS §4807.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 245** Maine Rules for Site Evaluators of Subsurface Wastewater Disposal Systems

STATUTORY AUTHORITY: 22 M.R.S. §42

PURPOSE OF THE RULE: To update established standards of professional conduct and practice related to the examination and licensing of Site Evaluators.

AFFECTED PARTIES: Approximately 330 individuals are licensed to determine soil suitability and prepare designs for subsurface wastewater disposal systems handling less than 2,000 gallons per day of wastewater.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Summer 2015.

**DRINKING WATER PROGRAM**

**Contact Person:** Tera Pare, J.D., Rule-making Coordinator, Division of Environmental Health, 11State House Station, Augusta, ME 04333-0011; 287-5680. E-mail: Tera.Pare@Maine.gov .

**CHAPTER 226:** Rules Relating to Cross Connections

STATUTORY AUTHORITY: 22 MRSA §2612(5)

PURPOSE OF THE RULE: To regulate, control, and prevent the contamination of drinking water by the backflow of water or other liquids, mixtures or substances into the distribution pipes of a public water system from a source or sources other than its intended source.

AFFECTED PARTIES: All public drinking water systems serving greater than 1,000 people or have an industrial account.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Summer 2015.

**CHAPTER 228:** Rules Relating to Fluoridation of Public Water Systems

Repealed 02/10/2012

**CHAPTER 230:** Rules Relating to Drinking Water State Revolving Loan Fund

STATUTORY AUTHORITY: 22 M.R.S. §§ 5959 and 6006-B

PURPOSE OF THE RULE: To implement federal rules for administering the Drinking Water State Revolving Loan Fund to public water systems, establish a prioritization system for distributing funds, outline the process for certifying project eligibility, and administer the environmental review process.

AFFECTED PARTIES: All community public drinking water systems and non-community non-profit public drinking water systems.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 231:** Rules Relating to Drinking Water

STATUTORY AUTHORITY: 22 M.R.S. §§ 2605, 2611-2613; and 2618.

PURPOSE OF THE RULE: To administer the Safe Drinking Water Act and the Maine Water for Human Consumption Act for all public water systems in Maine.

AFFECTED PARTIES: All public drinking water systems in Maine.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Winter 2014.

**CHAPTER 232:** Well Drillers and Pump Installers Rules

STATUTORY AUTHORITY: 5 M.R.S. §379; 22 M.R.S. §§ 1689-A & 2612; 32 M.R.S. §4200H

PURPOSE OF THE RULE: To administer examination and license requirements for well drilling, pump installation and hydro-fracturing, as well as prescribe a code of conduct for well drillers and pump installers

AFFECTED PARTIES: Well drillers and pump installers registered in the State of Maine, as well as public water systems with groundwater sources.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 235:** Rules Relating to Bottled Water, Bulk Water, and Water Vending Machines

STATUTORY AUTHORITY: 22 M.R.S. §§ 2605 and 2660-A

PURPOSE OF THE RULE: To regulate the water quality standards associated with bottled water, transport of bulk water, and water vending machines.

AFFECTED PARTIES: Bottled water suppliers, water haulers and vendors.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Stakeholders were consulted in spring 2013 prior to starting formal rule‑making.

SCHEDULE FOR ADOPTION: Fall 2014.

**CHAPTER 263**: Maine Comprehensive and Limited Environmental Laboratory Certification Rules

STATUTORY AUTHORITY: 22 M.R.S. §§ 567 &157-A .

PURPOSE OF THE RULE: To establish quality guidelines for laboratory data received by the Department of Health & Human Services and the Department of Environmental Protection and establish procedures for certifying labs by setting minimum criteria for lab operations, performance and administration.

AFFECTED PARTIES: Drinking water labs not approved by the Division of Environmental Health for limited analyses; Wastewater labs not excepted by 38 M.R.S. §413, and other labs not permitted for exception by memo between DEP and DHHS.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None are planned because the proposed rule changes are mainly to incorporate and authorize more EPA-approved laboratory methods.

SCHEDULE FOR ADOPTION: Summer 2015.

UMBRELLA – UNIT NUMBER**: 90-429**

AGENCY NAME: **Board of Licensure of Water Treatment Plant Operators**

**CONTACT PERSON:** Tera Pare, J.D., Rule-making Coordinator, Division of Environmental Health, 11 State House Station, Augusta, ME 04333-0011; 287-5680. E-mail: Tera.Pare@Maine.gov .

**CHAPTER 1:** Rules Relating to Licensure of Water Treatment and Distribution Operators of Public Water Systems

STATUTORY AUTHORITY: 22 M.R.S. §§ 2612(2), 2622-2631

PURPOSE OF THE RULE: To administer licensing requirements for water treatment operators, establish classifications, set license fees and outline complaint procedures.

AFFECTED PARTIES: All community and non-transient public water systems, which are required by federal law to designate licensed operators; any transient public water systems specifically required by the Drinking Water Program to obtain a licensed water operator; and all water treatment operators doing business in the State of Maine.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

UMBRELLA – UNIT NUMBER: **10-144**

PROGRAM NAME: **RADIATION CONTROL PROGRAM**

**CONTACT PERSON:** Tera Pare, J.D., Rule-making Coordinator, Division of Environmental Health, 11 State House Station, Augusta, ME 04333-0011; 287-5680. E-mail: Tera.Pare@Maine.gov .

**CHAPTER 220:** Rules Relating to Radiation Protection

STATUTORY AUTHORITY: 22 M.R.S. §674

PURPOSE OF THE RULE: To protect public health and administer both state and federal rules required under agreement with the U.S. Nuclear Regulatory Commission to regulate radioactive materials.

AFFECTED PARTIES: will be outlined under each separate part.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**Part A, General Provisions**

PURPOSE OF THE RULE: To protect public health by establishing provisions to control hazards associated with use of radiation.

AFFECTED PARTIES: All users of ionizing radiation.

SCHEDULE FOR ADOPTION: None planned.

**Part B, Enforcement Actions, Procedures and Civil Penalties**

PURPOSE OF THE RULE: To establish administrative and civil remedies to address violations of these Rules.

AFFECTED PARTIES: All users of radioactive material.

SCHEDULE FOR ADOPTION: None planned.

**Part C, Licensing of Radioactive Material**

PURPOSE OF THE RULE: To establish protocols, fees and procedures for the licensing of use of radioactive material.

AFFECTED PARTIES: All users of radioactive material.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part D, Standards for Protection Against Radiation**

PURPOSE OF THE RULE: To administer specific state and federal standards and protect public health from radiation.

AFFECTED PARTIES: All users of radioactive material.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part E, Radiation Safety Requirements for Industrial Radiographic Operations.**

PURPOSE of the rule: To protect public health by administering standards for the licensing of industrial radiographic operations.

AFFECTED PARTIES: All Industrial radiography licensees.

SCHEDULE FOR ADOPTION: None planned.

**Part F, X-Rays in the Healing Arts**

PURPOSE OF THE RULE: To protect public health by administering standards for licensure of anyone administering x-rays.

AFFECTED PARTIES: All users of x-ray machines.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part G, Use of Radionuclides in the Healing Arts**

PURPOSE OF THE RULE: To protect public health by administering standards for use of radionuclides in the healing arts.

AFFECTED PARTIES: All medical users of radioactive material.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part H, Radiation Safety Requirements for Analytical and Other Industrial Radiation Machines**

PURPOSE OF THE RULE: To protect public health by administering standards for analytical and other industrial radiation machines.

AFFECTED PARTIES: All industrial users of x-ray machines.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part J, Notices, Instructions and Reports to Workers; Inspections**

PURPOSE OF THE RULE: To protect public health by administering standards over any employers using radiation.

AFFECTED PARTIES: All employers using radiation.

SCHEDULE FOR ADOPTION: None planned.

**Part L, Transportation of Radioactive Material**

PURPOSE OF THE RULE: To protect public health by administering standards over the transportation of radioactive material.

AFFECTED PARTIES: All shippers of radioactive materials.

SCHEDULE FOR ADOPTION: Spring 2015.

**Part N, Regulation and Licensing of Technologically Enhanced Naturally Occurring Radioactive Materials**

PURPOSE OF THE RULE: To protect public health through regulating and licensing the use of naturally occurring radioactive materials.

AFFECTED PARTIES: All users of naturally occurring radioactive elements.

SCHEDULE FOR ADOPTION: None planned.

**Part X, Therapeutic X-Ray Machines**

PURPOSE OF THE RULE: To protect public health by administering standards for medical users of therapeutic x-ray machines.

AFFECTED PARTIES: All medical users of therapeutic x-ray machines.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 223:** Rules Relating to Tanning Facilities

STATUTORY AUTHORITY: 22 M.R.S. §674

PURPOSE OF THE RULE: To protect public health by administering standards to regulate tanning and other changes in the industry.

AFFECTED PARTIES: Tanning facility owners.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT:

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 224:** Air and Water Radon Service Provider Registration Rules

STATUTORY AUTHORITY: 22 M.R.S. §781

PURPOSE OF THE RULE: To protect public health by administering standards for individuals/companies providing radon testing/mitigation services in Maine.

AFFECTED PARTIES: Radon Service Providers and the general public that contract such services.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Spring 2015.

**New Chapter: Residential Rental Property Radon Testing Rules**

STATUTORY BASIS: 14 M.R.S. §6030-D

PURPOSE OF THE RULE: To protect public health by administering standards to residential landlords to test the air for radon and mitigate if the level is exceeded.

AFFECTED PARTIES: Landlords in Maine and rental property residents.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Spring/Summer 2015.

UMBRELLA – UNIT NUMBER**: 10-144**

PROGRAM NAME: **Environmental & Occupational Health Surveillance Program**

**CHAPTER 254:** Occupational Disease Reporting Rules and Regulations

STATUTORY AUTHORITY: 22 M.R.S. §1491

PURPOSE OF THE RULE: To set forth criteria for submission of patient information by hospitals, and medical personnel, and establish the objectives, responsibilities, and duties pertinent to the operation of Maine's Occupational Disease Reporting Program.

AFFECTED PARTIES: Health care providers, health care facilities, medical laboratories.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned.

**CHAPTER 292:** Rules for Environmental Lead Investigations

STATUTORY AUTHORITY: 22 M.R.S. §1323

PURPOSE OF THE RULE: Identifies properties that are subject to environmental lead investigations; states the responsibilities of licensed lead inspectors and risk assessors when conducting environmental lead investigations; and describe the information, including abatement orders, that shall be provided to owners and occupants as a result of these investigations. Establishes the requirements for substitute dwellings used to relocate families living in rental units at the time an environmental lead hazard is identified. Establishes the requirements around blood lead screening by health care providers and health care programs, including the requirements for approving health care providers, WIC and Head Start facilities to use in office blood lead testing devices and to report those results electronically to the department.

AFFECTED PARTIES: Landlords, tenants, health care facilities, health care providers, medical laboratories, and health care programs.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: Spring 2015.

**CHAPTER 293:** Lead Poisoning Prevention Fund Fee Rules

STATUTORY AUTHORITY: 22 M.R.S. §1322-F

PURPOSE OF THE RULE: This rule will identify the manufacturers subject to the fee, provide methods of fee calculation, establish a low quantity exemption, and describe reporting and payment requirements.

AFFECTED PARTIES: Paint manufacturers.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Public hearing occurred on September 6, 2013. No public comments were received during the comment period.

SCHEDULE FOR ADOPTION: Spring 2015

**CHAPTER 255**: Cancer Incidence Registry Regulations

STATUTORY BASIS: 22 M.R.S. §1402

PURPOSE OF THE RULE: To protect public health by establishing standards for reporting on all persons diagnosed with cancer living in Maine and to tabulate and summarize patient data to determine the frequency and incidence rates.

AFFECTED PARTIES: Hospitals, hospices, and other related facilities and associated administrative personnel.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

SCHEDULE FOR ADOPTION: None planned

**OFFICE OF HEALTH EQUITY:**

**CONTACT PERSON:**: Lisa Sockabasin, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287- 3266; lisa.sockabasin@maine.gov

**CHAPTER 286**: Maine WIC Program Rules

STATUTORY AUTHORITY: 22 M.R.S.A. §§ 42 and 1951

PURPOSE OF THE RULE: describe the procedures and standards for WIC participants, local grantee agencies and WIC authorized vendors.

AFFECTED PARTIES: WIC participants, local grantee agencies and WIC authorized retailers.

SCHEDULE FOR ADOPTION: SFY 2013

**CHAPTER 504**: Rules for Implementing the 1985 Amendments to the Maine Medical Compact Act and Maine Osteopathic Student Loan Program (Primary Care)

STATUTORY AUTHORITY: 20-A M.R.S.A Sec. 11804

PURPOSE OF THE RULE: The rule describes the procedure that the Commissioner of Health and Human Services will follow in determining areas that are underserved by primary care physicians.

AFFECTED PARTIES: Primary care physicians and health care facilities

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

SCHEDULE FOR ADOPTION: None planned

**CHAPTER 506**: Rules for Implementing the 1985 Amendments to the Maine Medical Compact Act (Dental Care)

STATUTORY AUTHORITY: 20-A §11804-A, sub §3.

PURPOSE OF THE RULE: The rule describes the procedure that the Commissioner of Health and Human Services will follow in determining areas as underserved by dental care practitioners.

AFFECTED PARTIES: Dental care practitioners and dental facilities

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned at this time

SCHEDULE FOR ADOPTION: None planned

**CHAPTER 509**: Rules for Designating Areas, Populations or Hospitals as Underserved by Specialty Physicians

STATUTORY AUTHORITY: 20-A, M.R.S.A. Chapters 421 and 423

PURPOSE OF THE RULE: Loan forgiveness through FAME for medical students pursuing qualifying medical specialties in medically underserved regions in Maine.

AFFECTED PARTIES: Physicians and health care facilities

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned at this time

SCHEDULE FOR ADOPTION: SFY 2013

**CHAPTER 510**: Regulations Governing the Rural Medical Access Program

STATUTORY AUTHORITY: Section 5 of L.D. 2513. 24-A M.R.S.A. Ch. 75

PURPOSE OF THE RULE: Disbursement of financial incentives to promote the availability of physicians to deliver babies in underserved areas of the State

AFFECTED PARTIES: Physicians and health care facilities

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned at this time

SCHEDULE FOR ADOPTION: None planned

**DIVISION OF** **INFECTIOUS DISEASE:**

**CONTACT PERSON:**: Lori Wolanski, Director, Division of Infectious Disease, MCDC, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287- 6448. E-mail: Lori.Wolanski@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA**: None

**CHAPTER: XXX**: EPT Rules Expedited Partner Therapy

STATUORY AUTHORITHY: Title 22 MRSA c. 251 §1242

PURPOSE: Rules to implement Expedited Partner Therapy (EPT). Expedited Partner Therapy facilitates the treatment and prevention of sexually transmitted infections by prescribing, dispensing, furnishing, or otherwise providing prescription antibiotic drugs to the sexual partner(s) of persons clinically diagnosed with sexually transmitted infections without physical examination of the partner(s).

AFFECTED PARTIES: Individuals, organizations providing screening and treatment of individuals with sexually transmitted infections.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Rules pending approval.

**CHAPTER 248:** List of Vaccines to be provided by the Universal Childhood Immunization Program.

STATUTORY BASIS: 22 M. R. S. A §1066

PURPOSE: The principal objective of the rulemaking is to allow the Board, after it conducts a public hearing to consider which vaccines should be covered by the Program, to vote to either maintain the current list of vaccines, or amend the list. The governing statute, 22 M.R.S.A. §1066, requires the Board to review the vaccines covered by the Program on an annual basis.

Listing of AFFECTED PARTIES: Physicians and other healthcare practitioners

CONSENSUS-BASED RULE DEVELOPMENT None planned

**CHAPTER 258:** Rules for the Control of Notifiable Conditions

STATUTORY AUTHORITY**:** 22M.R.S.A. 802

PURPOSE: To update and clarify Rules for the Control of Notifiable Conditions

AFFECTED PARTIES: Physicians, Physician’s Assistants, and Nurse Practitioners; Medical Laboratories; Healthcare Facilities; Healthcare Administrators; Health Officers; Veterinarians and Veterinary Medical Laboratories

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Rules reviewed. Revision in progress.

**CHAPTER 294:** Rules Governing Qualifications of Local Health Officers

STATUTORY AUTHORITY: Sec 12, 2 M.R.S.A. §451

PURPOSE: To develop rules to institute qualifications for local health officers

LISTING OF AFFECTED PARTIES: Municipalities, local health officers

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 501:** Rules for the operation of the Maine AIDS Drug Assistance Program

STATUTORY AUTHORITY: 22 M.R.S.A. 19205

PURPOSE:To adopt rules to govern the operation of the Maine AIDS Drug Assistance Program

AFFECTED PARTIES:People living with HIV, Physicians, Physician’s Assistants, Nurse Practitioners

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Rules likely in SY 2015

**CHAPTER 251:** Rules Governing the Implementation of Hypodermic Apparatus

Exchange Programs

STATUTORY AUTHORITY: 22 M.R.S.A. §1341

PURPOSE: To amend rules to include changes in the law during the 123rd Legislature (LD1786)

AFFECTED PARTIES: People who share needles, people who administer certified needle exchange programs

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

**CHAPTER 251:** Rules Governing Influenza Immunizing Agent Distribution Report

STATUTORY AUTHORITY: 22M.R.S.A. 1065

PURPOSE: To adopt rules to govern the implementation of the Influenza Immunizing Agent Distribution Reports required by a law change in the 122nd Legislature (LD 2106), to monitor supply and demand for influenza immunizing agents

AFFECTED PARTIES: Influenza Immunizing Agent Manufacturers and Distributors

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 264:** Immunization Requirements for Healthcare Workers

STATUTORY AUTHORITY: 22 M.R.S.A. §802 as amended by PL 2001, Ch. 185

PURPOSE: This rule outlines the immunization requirements of employees of designated health care facilities. It prescribes the dosage for required immunizations and defines responsibilities, exclusion periods, record keeping and reporting requirements for officials of designated health care facilities.

AFFECTED PARTIES: Hospitals and health care facilities and their employees who provide direct care to residents or patients of the facilities.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Revision considered for SFY 2013

**CHAPTER 709:** HIV/AIDS Case Management Program Standards

STATUTORY AUTHORITY: 5 M.R.S.A. §19205, 22 M.R.S.A. §42

PURPOSE: This rule sets forth HIV/AIDS Case Management Program Standards that must be adopted by agencies under contract with and/or designated by the Maine Center for Disease Control and Prevention (Maine CDC) as MaineCare providers of case management services to persons with HIV disease. Knowledge and use of these standards by administrators and case managers will result in consistent organization and delivery of case management services.

AFFECTED PARTIES: Organizations under contract with and/or designated by the Maine CDC as MaineCare providers of case management services to persons with HIV disease.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Rules to be repealed (because issues are addressed in policy and contract) in SY15.

**POPULATION HEALTH DIVISION:**

**CONTACT PERSON:** Debra Wigand, Director, Division of Population Health, 11 State House Station, 286 Water Street, 4th floor, Augusta, ME 04333-0011; (207) 287-4624; debra.a.wigand@maine.gov

**EXPECTED 2014 – 2015 RULEMAKING ACTIVITY:**

**CHAPTER \_\_\_:** Body Mass Index Data Collection and Reporting in School Administrative Units

STATUTORY AUTHORITY: PL 2009, Ch. 407

PURPOSE OF THE RULE: To establish a schedule and protocol for school nurses and other trained school personnel to collect BMI data from students and to provide a method for uniform reporting of the collected data to the Maine CDC.

AFFECTED PARTIES: School administrators, school nurses and other trained personnel assigned to collect the data in the school setting.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Need to understand school implementation of BMI data collection before move to rule making.

SCHEDULE FOR ADOPTION: SFY 2015

**CHAPTER 297:** Dental Care Access Credit

STATUTORY AUTHORITY: 36 MRSA Sections 1,2 and 3, §5219-DD. Sub-§2, Sub-§3 and Sub-§6, as amended by PL 2011, Ch. 434

PURPOSE OF THE RULE: to amend 10-144C297 to extend the established program through 2020 allowing up to 6 eligible dentists to be certified in each year from 2012 through 2015 and to revise definitions as needed.

SCHEDULE FOR ADOPTION: SFY 2014

AFFECTED PARTIES: Dentists licensed in Maine on or after January 1, 2009.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None Planned

CONTACT PERSON for this chapter: Judith Feinstein, Maine CDC, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287-3267; Judith.a.feinstein@maine.gov

**CHAPTER 255**: Maine Cancer Registry Rules and Regulations

STATUTORY AUTHORITY: 22 M.R.S.A. Section 1402 P.L. 1995, Ch. 292

PURPOSE OF THE RULE: To update the Maine Cancer Registry Rules and Regulations reflect current cancer surveillance standards and revised definitions. These include, but are not limited to, required reporting procedures.

AFFECTED PARTIES: Reporting sources (hospital registrars and others) and Registry Staff.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Modifications to rules and regulations are under consideration for FY2015. Stakeholder meeting for hospital registrars planned for FY2015.

**CHAPTER 707**: Rules Relating to the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) In Maine

STATUTORY AUTHORITY: PL 1993, c.707, Part A, §A-2

PURPOSE OF THE RULE: Add the group of women, age 40-49, who are not high risk or symptomatic, as fourth priority and move women, age 35-59, who are symptomatic, as fifth priority under Priority for Program Expenditures (Section 6.0). If Komen grant is not reissued, will need to change Sections 2.1.1.1 and 6.0 eliminating the 35-39 year old age group.

AFFECTED PARTIES: Maine Equal Justice, women in the 35-39 year old age group, physicians and other health practitioners

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 708**: Rules Relating to the Breast and Cervical Cancer Prevention and Treatment Act (BCCPTA) in Maine

STATUTORY AUTHORITY: PL 106-354, LD 0243, §1-2

PURPOSE OF THE RULE: These rules are created to implement the requirements of the Breast and Cervical Cancer Prevention and Treatment Act, which expand MaineCare full benefits to certain eligible women who are diagnosed with breast or cervical cancer or a pre-cancerous condition. These rules are necessary to process enrollment applications received by the MBCHP and to establish protocol in determining eligibility to the treatment act program.

AFFECTED PARTIES: Participants in the Program and physicians and other health care providers.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 250**: Rules Relating to Smoking in the Workplace

STATUTORY AUTHORITY: 22 MRSA §1580

PURPOSE OF THE RULE: These rules would define where smoking in the workplace is allowed, addresses outdoor smoking areas and operation of child care/day care related to smoking.

AFFECTED PARTIES: General public, businesses

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

**CHAPTER 249:** Rules Relating to Smoking in Public Places

STATUTORY AUTHORITY: PL 2009, Ch. 140/22 M.R.S.A. Title 22 §1550

PURPOSE OF THE RULE: These rules delineate the requirements for smoking in public places.

AFFECTED PARTIES: General public, businesses

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

**CHAPTER 295**: Dental Services Development and Subsidy Programs

STATUTORY AUTHORITY: 22 MRSA §2127

PURPOSE OF THE RULE: To amend 10-144C295 as needed to update references to the Maine CDC and the Department and to define the terms and conditions for the participation in, and receipt of funding for the Dental Services Development and Subsidy Programs as authorized and funded by 22 M.R.S.A. §2127, and to address as needed statutory changes in use of funding. These rules address the requirements and conditions to which applicants for funds provided through this Section must respond in order to receive the funds.

SCHEDULE FOR ADOPTION: SFY 2015

AFFECTED PARTIES: Eligible non-profit dental clinics

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

CONTACT PERSON: for this chapter: Judith Feinstein, Maine CDC, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287-3267; Judith.A.Feinstein@Maine.gov .

**CHAPTER 296:** Fillings: the Choices You Have - Mercury Amalgam and Other Filling Materials

STATUTORY AUTHORITY: 32 MRSA §1094-C

PURPOSE OF THE RULE: To amend 10-144 c. 296 to update references to the Maine CDC and the Department in the required patient education brochure (the rule) and poster, and to update the content of the required brochure to reflect current scientific and public health information.

SCHEDULE FOR ADOPTION: SFY 2015

AFFECTED PARTIES: Providers of clinical dental services offering restorative services

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

CONTACT PERSON: for this chapter: Judith Feinstein, Maine CDC, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287-3267; Judith.A.Feinstein@Maine.gov .

**Title 22, CHAPTER** **280** – Birth Defects Program

STATUTORY AUTHORITY–22 MRSA, ch.1687§8941 PL 1999

PURPOSE OF THE RULE:Define reporting requirements, program functions and responsibilities regarding the Birth Defects Program

SCHEUDLE FOR ADOPTION: None planned

AFFECTED PARTIES:Providers of health care licensed under Title 22 (Hospitals) and Title 32 (Health Professionals).

EMERGENCY RULES ADOPTED SINCE LAST AGENDA: none

CONSENSUS-BASED RULE DEVELOPMENT: None planned

**Title 22, CHAPTER 272** – Children With Special Health Needs Program

STATUTORY AUTHORITY: 22 M.R.S.A. 42 (1) and 2000ff

PURPOSE:to enhance the provision of and access to comprehensive health services for children with special health care needs.

SCHEDULE FOR ADOPTION: Winter/Spring 2013

AFFECTED PARTIES: Licensed health care providers and families.

EMERGENCY RULES ADOPTED SINCE LAST AGENDA: None

CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 700**: Maternal, Fetal and Infant Mortality Review Panel

STATUTORY AUTHORITY: 22 M.R.S.A. §261

PURPOSE: To identify the factors associated with maternal and infant deaths and make recommendations for system changes to improve services for women **and** infants in the State.

SCHEUDLE FOR ADOPTION: Rules recently updated

AFFECTED PARTIES: Hospitals, healthcare providers, Women and infants

EMERGENCY RULES ADOPTED SINCE LAST AGENDA: None

CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 279** – Newborn Hearing Screening Rules

STATUTORY AUTHORITY: 22 M.R.S.A. §1686

PURPOSE:To define reporting requirements, program functions and responsibilities regarding newborn hearing screening, diagnosis and intervention.

SCHEUDLE FOR ADOPTION: To be completed by June 30, 2015

AFFECTED PARTIES:Hospitals, health care providers and citizens of Maine.

EMERGENCY RULES ADOPTED SINCE LAST AGENDA: None

CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 283** – Newborn Bloodspot Screening Rules

STATUTORY AUTHORITY:22 M.R.S.A. 1532 and 1533

PURPOSE:To assure that all infants born in Maine are screened for causes of mental retardation and selected genetic conditions.

SCHEUDLE FOR ADOPTION: To be completed by June 30, 2015

AFFECTED PARTIES: Hospitals, health care providers and citizens of Maine.

EMERGENCY RULES ADOPTED SINCE LAST AGENDA: None

CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 709,** Critical Congenital Heart Disease Screening

STATUTORY BASIS: 22 M.R.S.A. Chapter 1532; as amended by Public Law 387

PURPOSE : To define screening and reporting requirements, program functions and responsibilities regarding screening for critical congenital heart disease.

SCHEDULE FOR ADOPTION: To be completed by June 30, 2015.

AFFECTED PARTIES: Hospitals, healthcare providers, and parents of newborns.

CONSENSUS-BASED RULE DEVELOPMENT: Not yet determined.

**DIVISION OF PUBLIC HEALTH SYSTEMS:**

**CONTACT PERSON:** James Markiewicz, Director, Division of Public Health Systems, 11 State House Station, 286 Water St., Augusta, ME 04333-0011; 287-8104; James.Markiewicz@Maine.gov .

**CHAPTER XXX:** (New Rulemaking)

STATUTORY AUTHORITY: Not yet determined

PURPOSE OF THE RULE: To allow appropriate, secure, standardized electronic data sharing between State public health data systems and private practitioners; to clean up the ranging diversity of data use and release requirements across public health programs

LISTING OF AFFECTED PARTIES: MCDC programs using public health data systems seeking to share information or system use with the private sector; OIT; ID epi; OPHI; Maine HealthInfoNet; Private medical providers

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None Planned.

**CHAPTER 265**: Maine Drug Testing Laboratory Rules

STATUTORY AUTHORITY: 26 M.R.S.A. §§ 681-690 and 22 M.R.S.A., §565 Pursuant to 1990 PL 832

PURPOSE OF THE RULE: To adopt procedural requirements for collection of second specimens in cases of tampering with first specimens, and application of other changes mandated by law, or dictated by current good practice. These rules would pertain to programs and laboratories testing employees and applicants for substances of abuse. The rules are intended to assure that employees and applicants receive reliable and accurate testing, and that privacy rights are protected.

LISTING OF AFFECTED PARTIES: Regulated parties—workplace substance of abuse testing programs. Benefited parties—workers affected by such programs.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None Planned

**CHAPTER XXX:** Rules Concerning Certification of Environmental and Drinking Water Testing Laboratories

STATUTORY AUTHORITY: Pursuant to 1991 PL 499

PURPOSE OF THE RULE: To set standards and requirements for certification of Environmental and Drinking Water laboratories, in order to assure that state agencies utilizing data produced by such laboratories are receiving accurate and reliable results, and to protect Maine people by assuring proper performance of such laboratories.

LISTING OF AFFECTED PARTIES: Regulated parties—Environmental and Drinking water labs, and other laboratories.

Benefited parties—State agencies and other users of lab data (i.e. the Drinking Water Program and the Department of Environmental Protection) which benefit from accurate analyses of environmental samples, and laboratories (certified and currently not certified) which do environmental testing for compliance purposes.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration

SCHEDULE FOR ADOPTION: None planned. We believe this rule may have been replaced by Chapter 263: Maine Comprehensive and Limited Environmental Laboratory Certification Rules – we have no knowledge of it.

**CHAPTER 257:** Schedule of Charges for Diagnostic Laboratory of the Department of Human Services – Amendment

STATUTORY AUTHORITY: Pursuant to 22 M.R.S.A. §565-568

PURPOSE OF THE RULE: To amend and revise charges as required by budgetary needs and by law.

LISTING OF AFFECTED PARTIES:

Regulated parties—DHS labs.

Benefited parties—Programs and citizens served.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration

**CHAPTER 270**: Rules for Sample Collection and Drug Testing in Suspected O.U.I. Cases

STATUTORY AUTHORITY: 29 M.R.S.A. §1312 and 1990 PL Chapter 784

PURPOSE OF THE RULE: The rules are intended to assure that subjects are afforded accurate and reliable testing, and that results of such testing will be in compliance with legal requirements for forensic purposes.

LISTING OF AFFECTED PARTIES: The Department of Human Services has prescribed these rules and regulations for Law Enforcement Agencies and laboratories involved in testing of persons suspected of operating under the influence of intoxicating liquor or drugs.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

**CHAPTER 269**: Rules Governing Self-contained Breath Alcohol Testing Equipment

STATUTORY AUTHORITY: 29-A M.R.S.A. §2524(6); and 22 M.R.S.A. §42(1)

PURPOSE OF THE RULE: All self-contained breath alcohol testing equipment must be approved by the U.S. Department of Transportation as stated in the Federal Register and the State of Maine, Department of Health and Human Services. Each instrument must be tested and approved by the Public Health Laboratory and retested and re-approved semi-annually. Certain procedures are specified for calibration checks and use of self-contained breath alcohol testing equipment.

LISTING OF AFFECTED PARTIES: Law enforcement

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 267:** Certification Standards for Persons Conducting Blood / Breath Test to Determine Alcohol Level

STATUTORY AUTHORITY: 29 M.R.S.A. §1312 (6) and 22 M.R.S.A. §42 (1)

PURPOSE OF THE RULE: These rules set forth the qualifications necessary for an individual to be certified by the Department of Human Services to analyze blood and breath samples for alcohol level. Included in the rules are criteria pertaining to proficiency testing, sample procedures, accuracy of analyses, reporting data and continuing certification.

LISTING OF AFFECTED PARTIES: Law enforcement, general public

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 268:** Certification Standards for Persons Drawing Blood to Determine Blood / Alcohol Level

STATUTORY AUTHORITY: 29 M.R.S.A. §1312 (6)

PURPOSE OF THE RULE: These rules set forth the technical qualifications and recommendations necessary for an individual to be certified by the Department of Human Services to draw blood for the purpose of determining the blood alcohol concentration.

LISTING OF AFFECTED PARTIES: Law enforcement, general public

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Repealed

**CHAPTER 266:** Certification Standards for Persons Conducting Chemical Analysis for Detection / Identification of Drugs

STATUTORY AUTHORITY: 17-A M.R.S.A. §1112 (1) and 22 M.R.S.A. §42(1); Pursuant to 17-A M.R.S.A. section 1112

PURPOSE OF THE RULE: To amend as needed in response to change in practice or change in law.

LISTING OF AFFECTED PARTIES:

Regulated parties—Chemists analyzing drugs.

Benefited parties—Suspects in cases of alleged possession of drugs and/or Maine citizens, especially those involved either as suspects or victims in OUI situations.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

SUMMARY: These rules set forth the technical qualifications necessary for an individual to be certified by the Department of Human Services to detect and identify drugs. Included in the rules are criteria pertaining to necessary laboratory facilities and equipment, reference standards, record keeping, security and proficiency testing

**10-146**

**DATA, RESEARCH, AND VITAL STATISTICS**

**CHAPTER 710-B**: Revised Uniform Anatomical Gift Act

STATUTORY AUTHORITY: 22 M.R.S.A. §2941-§2965

PURPOSE OF THE RULE: Regulations governing the registration of recovery agencies for tissue and organ donation.

LISTING OF AFFECTED PARTIES: Hospitals, Office of Chief Medical Examiner, Bureau of Motor Vehicles, Maine Organ Donor Registry, Organ Donation Advisory Council, New England Organ Bank, and other interested parties including those in the funeral profession.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration

**CHAPTER 1**: Transportation and Final Disposition of Dead Bodies

STATUTORY AUTHORITY: 22 M.R.S.A., §2843, §2846

PURPOSE: Regulations governing the responsibilities of municipal clerks, funeral directors and authorized persons for transportation and final disposition of dead bodies in Maine.

LISTING OF AFFECTED PARTIES: General public, municipal clerks, funeral directors, crematories and cemeterians.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015

**CHAPTER 2**: Amendment of Vital Records

STATUTORY AUTHORITY: 22 M.R.S.A. §2701-2706, §2761, and §2765 -67

PURPOSE: Regulations governing the responsibilities for correcting or completing data on vital records.

LISTING OF AFFECTED PARTIES: Municipal clerks and the general public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015

**CHAPTER 3:** Evidence of Legitimation

STATUTORY AUTHORITY: M.R.S.A. 22, §2761 - 2769

PURPOSE: Regulations governing the requirements for new birth certificate after legitimation.

LISTING OF AFFECTED PARTIES: Municipal clerks, DHHS, and the general public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration.

**CHAPTER 4:** Public Access to Vital Records

STATUTORY AUTHORITY: 22 M.R.S.A. 2701-2710

PURPOSE: Regulations governing the responsibilities of public access to Vital Records.

LISTING OF AFFECTED PARTIES: General public

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration to possibly combine rules with Chapter 8 Release of Restricted Vital Statistics Data. Planned for FY 2015.

**CHAPTER 5:** Medical Certification of Cause of Death

STATUTORY AUTHORITY: 22 M.R.S.A. §2841-2847

PURPOSE: This rule clarifies procedures for completing medical certification and registration of death records and fetal death records.

LISTING OF AFFECTED PARTIES: Physicians, general public, municipal clerks and medical certifiers

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2014.

**CHAPTER 6:** Marriage License and Registration

STATUTORY AUTHORITY: 19-A M.R.S.A. §650 - §753

PURPOSE: Regulations governing the responsibilities for issuance of a marriage license. It provides procedures for applying for marriage intentions, issuing a marriage license, filing cautions, who may officiate as well as the methods marriages can be solemnized.

LISTING OF AFFECTED PARTIES: Municipal clerks and the general public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 7:** Vital Records Fees

STATUTORY AUTHORITY: 22-A M.R.S.A. §210

PURPOSE: Regulations governing the cost applied to search, issue, or apply processes to vital records.

LISTING OF AFFECTED PARTIES: DHHS and the general public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 8**: Release of Restricted Vital Statistics Data

STATUTORY AUTHORITY: 22 M.R.S.A. §2701 -2769

PURPOSE: Regulations governing responsibilities of releasing restricted vital statistics data.

LISTING OF AFFECTED PARTIES: General public, municipal clerks, researchers

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 9**: Delayed Birth Registration

STATUTORY AUTHORITY: 22 M.R.S.A. §2764

PURPOSE: Regulations governing responsibilities for filing a delayed record of birth.

LISTING OF AFFECTED PARTIES: Hospitals, physicians, municipal clerks

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 10**: Birth Registration

STATUTORY AUTHORITY: 22 M.R.S.A. §2706, §2761- §2763,

PURPOSE: Regulations governing the registration of live births in Maine.

LISTING OF AFFECTED PARTIES: Hospitals, physicians, municipal clerks

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 11**: Vital Statistics Administration

STATUTORY AUTHORITY: 22 M.R.S.A. §2701- §2710

PURPOSE: Regulations governing the responsibilities for registration, collection, preservation, amendment, and certification of vital records; the collection of other reports required by this title; and activities related thereto including the tabulation, analysis, publication, and dissemination of vital statistics.

LISTING OF AFFECTED PARTIES: DHHS, municipal clerks, and general public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER 12**: Adult Adoptees Access to Original Birth Record

STATUTORY AUTHORITY: 22 M.R.S.A. §2768

PURPOSE: Regulations governing the responsibilities for issuing copies of original sealed birth records to adult adoptee’s as well as contact preference and medical history forms.

LISTING OF AFFECTED PARTIES: General public.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 13**: Municipal Service Fee

STATUTORY AUTHORITY: M.R.S.A. Title 22 §263

PURPOSE: Allocates funds from increased municipal fees as revenue for program operating expenses for the Office of Data, Research and Vital Statistics

LISTING OF AFFECTED PARTIES: Maine Municipalities

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned

**CHAPTER 14**: Registration and Termination of Domestic Partners

STATUTORY AUTHORITY: M.R.S.A. Title 22 §2710

PURPOSE: To register and/or terminate domestic partners

LISTING OF AFFECTED PARTIES: General public

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Under consideration

**CHAPTER XXX**: Electronic Death Registration System (EDRS) (New rule)

STATUTORY AUTHORITY: 22 M.R.S.A. §2847

PURPOSE: Establishes procedures and policies for the utilization of the Electronic Death Registration System (EDRS).

LISTING OF AFFECTED PARTIES: Funeral practitioners, health care providers, DHHS, and municipal clerks.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2014.

**CHAPTER XXX**: Electronic Birth Registration System (EBRS) (New rule)

STATUTORY AUTHORITY: 22 M.R.S.A. §2706, §2761- §2763,

PURPOSE: Regulations governing the electronic registration of live births in Maine.

LISTING OF AFFECTED PARTIES: Hospitals, health care providers, and municipal clerks.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: Planned for FY 2015.

**CHAPTER XXX**: Electronic Amendment of Vital Records (New rule)

STATUTORY AUTHORITY: 22 M.R.S.A. §2701-2706, §2761, and §2765 -67

PURPOSE: Regulations governing the responsibilities for correcting or completing data on electronic vital records.

LISTING OF AFFECTED PARTIES: Municipal clerks, funeral practitioners, health care providers, medical examiners, and hospitals.

INFORMATION ON ANY PLANNED USE OF CONSENSUS-BASED RULE DEVELOPMENT: None planned.

AGENCY UMBRELLA-UNIT NUMBER: **10-148**

AGENCY NAME: Department of Health and Human Services, Division of Child Welfare, **Office of Child and Family Services**

CONTACT PERSON: Angie Bellefleur, Associate Director for Policy and Prevention, Office of Child and Family Services, #11 State House Station, 2 Anthony Avenue, Augusta, ME 04333-0011; 624-7973; Angie.M.Bellefleur@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:**

**CHAPTER 13**: Adoption Assistance

STATUTORY AUTHORITY: Title 18-A

PURPOSE: This chapter establishes the eligibility requirements and amount and duration of adoption assistance available to adoptive families in the adoption assistance program. The rules describe the terms of the agreement between the family and the State and the procedures for applying to the program. Updates to the rules will support compliance with federal law changes in Adoption Assistance requirements.

SCHEDULE FOR ADOPTION: Previously scheduled – but held due to changes in Federal legislation, continued on hold for further Program Instruction (PI) from federal Administration For Children and Families,– will complete in Spring 2015

LISTING OF AFFECTED PARTIES: Current and potential Adoption Assistance recipient families

CONSENSUS-BASED RULE DEVELOPMENT: Workgroup of adoptive families will participate in development as well as shared information on the Adoptive and Foster Families of Maine shared list serve.

**CHAPTER 12:** Rules for Permanency Guardianship

STATUTORY AUTHORITY: Title 22 MRSA §4038-D.

PURPOSE: Establishes the eligibility requirements and amount and duration of permanency guardianship assistance available to eligible families in the Permanency Guardianship subsidy program. The rules describe the terms of the agreement between the family and the State and the procedures for applying.

SCHEDULE FOR ADOPTION: Previously scheduled – but held due to changes in Federal legislation, continued on hold for further Program Instruction (PI) from federal Administration For Children and Families, Still confirming federal approval of State Plan – will complete in Spring 2015

LISTING OF AFFECTED PARTIES: Current and potential Permanency Guardianship families

Changes will reflect new federal guidelines from October 2008 and federal changes effective Jan. 6, 2012.

CONSENSUS-BASED RULE DEVELOPMENT: Workgroup of stakeholders will participate in development.

**CHAPTER 201:** Procedures for the Abuse and Neglect Substantiation and Indication Process and for Persons Substantiated or Indicated as Perpetrators of Abuse or Neglect of Children

STATUTORY AUTHORITY: Title 22 MRSA §4004.

PURPOSE: Outline procedures to govern the substantiation/indicated process and to notify and provide an appeal to persons who have been substantiated or indicated by the Department of Health and Human Services as having abused or neglected a child or children.

SCHEDULE FOR ADOPTION: SFY 2015

LISTING OF AFFECTED PARTIES: Individuals found to be substantiated or indicated for abuse of children, families and children affected by abuse.

CONSENSUS-BASED RULE DEVELOPMENT: Stakeholder workgroup began process in Spring 2010, decisions to make more significant changes has required more in-depth considerations and multiple revisions.

**CHAPTER 14:** Rules for Levels of Care for Foster Homes

STATUTORY AUTHORITY: Title 22 MRSA §4062

PURPOSE: These rules describe the procedures, requirements, and rates for the Office of Child and Family Services Levels of Care system.

SCHEDULE FOR ADOPTION Previously scheduled. This is pending budget decisions related to Levels of Care and Treatment Foster Care. Will complete 2015

LISTING OF AFFECTED PARTIES: Individuals who care for children in foster care.

Treatment foster care agencies

CONSENSUS-BASED RULE DEVELOPMENT: Rule changes are presented to a variety of groups that are in involved in rate setting.

**CHAPTERS 15** *and* **16:** Rules for the Licensing of Family \*Foster Homes for Children and Rules Providing for the Licensing of Specialized Children’s \*Foster Homes (\*Planned name change to Resource Homes)

STATUTORY AUTHORITY: Title 22 MRSA §4062

PURPOSE: These rules describe the procedures and requirements for licensing of Resource Families providing for care of children in state custody.

SCHEDULE FOR ADOPTION: SFY14

LISTING OF AFFECTED PARTIES: Individuals who care for children in foster care, Treatment foster care agencies, Kinship Families

CONSENSUS-BASED RULE DEVELOPMENT: Rule changes are presented to a variety of groups that are in involved.

**CHAPTER 6:** Child Care Subsidy Policy Manual

STATUTORY AUTHORITY: Title 22 MRSA Chapter 1052-A §3740

PURPOSE: Defines, clarifies and sets the primary responsibilities for the planning and administration of child care subsidies funded with the Child Care Development Fund.

The Child Care and Development Fund (“CCDF”) Block Grant Act of 1990, as amended, 42 USC §9858b (b)(1)(A), (the “Act”) requires the Lead Agency to “administer, directly, or through other governmental or non-governmental agencies” the funds received. The regulations at 45 CFR 98.11 provide that, in addition to retaining “overall responsibilities” for the administration of the program, the Lead Agency must also (among other things) promulgate all rules and regulations governing the overall administration of the CCDF program.

SCHEDULE FOR ADOPTION: SFY 15

LISTING OF AFFECTED PARTIES: Parents in need of child care services and assistance with obtaining and payment of those services, individuals who provide child care services, children who receive child care services.

CONSENSUS-BASED RULE DEVELOPMENT: Rule changes are presented to a variety of groups that are in involved.

**10-144 CHAPTER 101-** Maine Care Benefits Manual, Section 2: Rules for the Provision of Room and Board Payments for Residential Programs Serving Children

STATUTORY AUTHORITY: P.L. 2011, ch. 380 Part VVV-1, 5 MRSA §8054; 22 MRSA §3173; 22 MRSA §3174-Z

PURPOSE: To standardize the payments for children’s residential programs

SCHEDULE FOR ADOPTION: SFY14

CONSENSUS BASED RULEMAKING: None

EXPECTED 2014-2015 RULE-MAKING ACTIVITY: List of all rules agency expects to propose between now and October, 2015.

LISTING OF AFFECTED PARTIES: Agencies and businesses that provide residential care for children.

*Chapter 577 was added to the Agenda by an amendment dated October 23, 2014.*

**CHAPTER 577:** Rules for An Act To Improve Career Attainment for Former Foster Children

STATUTORY AUTHORITY: Sec. 1. 22 MRS §4010-C

PURPOSE: To provide transition grant funds to former foster youth

SCHEDULE FOR ADOPTION: SFY15

LISTING OF AFFECTED PARTIES: Youth formerly in Maine’s foster care system who were on a Voluntary Extended Care Agreement at age 21 and who were enrolled in post-secondary education.

CONSENSUS-BASED RULE DEVELOPMENT: Stakeholder workgroup began Summer 2014

AGENCY UMBRELLA-UNIT NUMBER:**14-118**

AGENCY NAME: **Substance Abuse and Mental Health Services**

**CONTACT PERSON:** Guy Cousins, Director of Substance Abuse and Mental Health Services, 41 Anthony Avenue, #11 State House Station, Augusta, Maine, 04333-0011 Telephone (207) 287-6484. E-mail: Guy.Cousins@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:** None

**EXPECTED 2014-2015 RULE-MAKING ACTIVITY:**

**CHAPTER 11**: Rules Governing the Controlled Substances Prescription Monitoring Program

Section 5, Paragraph 2, Part D: Requirements for Dispensers

PURPOSE: Change current rule from within seven (7) days of the controlled substance being dispensed to within twenty-four (24) hours of the controlled substance being dispensed.

AFFECTED PARTIES**:** All Maine licensed pharmacists who dispense controlled substances in Maine and/or to an address located in Maine, all data uploaders who submit required data into the PMP database and any healthcare providers who use the PMP for patient care/treatment. SAMHS will inform dispensers/uploaders and providers regarding this change through the PMP list serve. Notice will be posted on the PMP website and requests will be made to Maine licensing boards to notify their licensees as well as to post on their websites. Various associations, Substance Abuse Services Commission and the PMP Advisory Committee will be notified.

*Chapter 446 was added to the Agenda by an amendment dated August 29, 2014.*

**CHAPTER 446**: An Act Regarding Involuntary Treatment of Mental Health Patients

Section 1. 34-B, MRSA Section 3003: An Act Authorizing and Directing the Bureau of Mental Health to Enhance and Protect the Rights of Recipients of Mental Health Services.

AFFECTED PARTIES: All providers and recipients of mental health services.

AGENCY UMBRELLA-UNIT NUMBER: **14-118**

AGENCY NAME: Department of Health and Human Services Substance Abuse and Mental Health Services, **Driver Education and Evaluation Programs**

**CONTACT PERSON:** Guy Cousins, Director of Substance Abuse and Mental Health Services, 41 Anthony Avenue, #11 State House Station, Augusta, Maine, 04333-0011 Telephone (207) 287-6484. E-mail: Guy.Cousins@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:** None

**EXPECTED 2011-2012 RULE-MAKING ACTIVITY:**

**CHAPTER 2**: Driver Education and Evaluation Program Procedure Manual

5 M.R.S.A. Part 25, §20005

5 M.R.S.A. Part 25, c. 521 Sub-ch. 5

**Section A:** Definitions

Purpose: Revise/establish definitions to comply with current practices and make the appropriate changes to the terms, agency name change and definitions throughout the document.

**Section B:** Procedure for Approval of a Driver Education and Evaluation Programs Evaluator and/or Treatment Services Provider

PURPOSE: 1) Revise qualifications for those individuals requesting certification as a Community-Based Services Provider-Private Provider; 2) Require that all individuals applying to become providers first sign a “Letter of Agreement” to ensure compliance with all applicable DEEP regulations; 3) Require that all documentation submitted for review prior to and during an on-site visit shall be written legibly or typed; 4) Require Community Based Service Providers-Programs to maintain documentation of each clinician’s DEEP training completion in personnel files; 5) Require “a minimum of” as opposed to “at least” 6 hours of DEEP specific training; 6) Require the Community-Based Providers to notify DEEP when they discontinue DEEP services; 7) Require that all individuals providing clinical supervision be credentialed as Certified Clinical Supervisors by the Maine State Board of Alcohol and Drug Abuse Counselors 8) Revised the corrective action process for DEEP providers that are not in compliance with the DEEP Regulations and an appeal process for those providers that have their certification to provide services denied, suspended or revoked; 9) Require that all individuals applying to be private providers who want their practice to be listed by a specific name must provide documentation that their practice is a Limited Liability Company; 10) Revise what changes providers must notify the DEEP Office about: 11) Allow representatives from the DEEP Office to inspect client charts as well as any other requested paperwork from all Community-based Service Providers to ensure compliance with regulations; 12) Require a water test if the provider’s water source is supplied by a well.

**Section C:** Procedure for a progressive improvement plan for providers not in compliance with regulations

PURPOSE: 1) To ensure clients receive the highest quality of services that meet DEEP requirements of statues, policies and procedures. To ensure the providers of DEEP services remain in compliance with DEEP regulations and requirements; 2) To establish Technical Assistance and Corrective Action procedures that are an established uniform system administered in a consistent manner.

**Section D:** The Driver Education and Evaluation Program for Clients Under 21 Years of Age at the Time of the Offense (The Under 21 Program) (Replaces Section C from the current regulations.)

PURPOSE: 1) Require that all DEEP services must be in- person; 2) Require that all clients that have completed an evaluation or treatment six (6) months prior to registering for a program or completing a program be required to have a status update evaluation; 3) Recommend that clients receiving services for DEEP be drug tested by provider.

**Section E:** The Driver Education and Evaluation Program for First Offender Adults, First Offenders over 21 Years of Age and Multiple offenders (The Risk Reduction Program) (Replaces Section D. from the current regulations).

PURPOSE: 1) Require that all services for the purpose of meeting DEEP requirements be in person; 2) Recommend that clients receiving services for DEEP be drug tested by provider.

**Section F:** The Clinical Substance Abuse Evaluation, Level of Care Assessment, Second Opinion Evaluation and Status Update Evaluation (Replaces Section E. from the current regulations.)

PURPOSE: 1) Require that the Community Based Service Provider conducting the clinical substance abuse evaluation, level of care assessment, second opinion evaluation or status update evaluation to interview a concerned person. If the client refuses to bring a concerned person to interview, the refusal shall result in an incomplete evaluation; 2) Require that all DEEP services be in person: 3) Require that all documentation submitted to the DEEP Office be written legibly or typed. Legibility will be determined by the DEEP Case Managers; 4) Recommend that clients receiving services for DEEP be drug tested by provider; 5) Require that the client record include a statement signed by the client declaring his/her knowledge of the fee schedule, program rules, expectations, confidentiality and client rights.

**Section G:** Treatment (Replaces Section F. from the current regulations.)

PURPOSE: 1) Require that all services for the purpose of meeting DEEP requirements be in person; 2) Require that Community-Based Service Provider will notify the DEEP Office in writing when a client’s paperwork is being held for any reason; 3) Require that all documentation submitted to the DEEP Office be written legibly or typed. Legibility will be determined by the DEEP Case Managers; 4) Require that all supervision provided to Community-based and private providers be done by a Certified Clinical Supervisor; 5) Require a written plan describing procedures used to ensure confidentiality while transporting client case records**;** 6) Require that individuals providing clinical supervision be in compliance with Section B.4**;** 7) Require that the client record include a statement signed by the client declaring his/her knowledge of the fee schedule, program rules, expectations, confidentiality and client rights; 8) Recommend that clients receiving services for DEEP be drug tested by provider.

**Section H:** Completion of Treatment Other Than Driver Education and Evaluation Programs (Replaces Section G. of the current regulations.)

PURPOSE: 1); Revise the rule for clients directly entering into treatment that are later deemed not appropriate for treatment by the service provider. The client shall be required to complete the appropriate DEEP Education Program as required by the regulations; 2) Recommend that clients receiving services for DEEP be drug tested by provider.

**Section I:** Client Second Opinion (Replaces Section H. of the current regulations.)

PURPOSE: 1). Require that all providers performing second opinion evaluations obtain the documentation from the provider that performed the first clinical substance abuse evaluation/level of care assessment; 2) Require that the Community Based Service Provider interview a concerned person: 3) Require that all DEEP services be in person: 4) Require that the Community Based Service Provider conducting the second opinion obtain the results of the first evaluation/assessment; 5) Document correspondence of communication with initial provider.

**Section J:** Client Appeals (Replaces Section I. of the current regulations.)

**Section K:** Out of State (Replaces Section J. of the current regulations.)

PURPOSE: 1) Defined evaluation/assessment requirements to include interview with a concerned person; 2) Defined treatment requirements.

**Section L:** Military(Replaces Section K. of the current regulations)

**Section M:** Completion of Treatment Guidelines (Replaces Section L. of the current regulations.

**SCHEDULE FOR ADOPTION**: October, 2014-October, 2015

**AFFECTED PARTIES:** Community Based Service Providers and OUI Offenders

AGENCY UMBRELLA-UNIT NUMBER: **10-149** *and* **14-197**

AGENCY NAME: **Office of Aging and Disability Services** (formerly two separate offices: the Office Elder Services; and the Office of Adults with Cognitive and Physical Disability Services

**CONTACT PERSON**: Lynne Caswell, Legal Services Consultant; Office of Aging and Disability Services; #11 State House Station, Augusta, ME 04333-0011; 207-287-9213; Lynne.Caswell@Maine.gov .

**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA**: None

**EXPECTED 2014-2015 RULE-MAKING ACTIVITY:**

**10-149, CHAPTER 5**, **Sections 1-75**:Office of Aging and Disability Services Policy Manual,

STATUTORY BASIS: 22-A M.R.S.A. §205; 22 M.R.S.A. §§ 342, 3493, 5106, 6108,

6203, 7303, 7312, 7853, 8602, and 9002; and 24 M.R.S.A. §6214

PURPOSE (of the rule): These rules govern the operation of programs administered by the Office of Aging and Disability Services and its Adult Protective Services unit. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, elders and adults with disabilities.

**14-197,** [**CHAPTER 3**](http://www.maine.gov/sos/cec/rules/14/197/197c003.doc): Definition of [Intellectual Disability] and Autism; Appeal Procedure

STATUTORY BASIS: 22-A M.R.S.A. §205; 34-B M.R.S.A. §§ 5432, 5465, and 6003

PURPOSE (of the rule): These rules set out definitions, policies and appeal procedures for persons with intellectual disabilities or autistic disorder. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.

**14-197,** [**CHAPTER 5**](http://www.maine.gov/sos/cec/rules/14/197/197c005.doc): Regulations Governing Emergency Interventions and Behavioral Treatment for People with Intellectual Disabilities and/or Autism

STATUTORY BASIS: 22-A M.R.S.A. §205; and 34-B M.R.S.A. §§ 5601 *et seq*.

PURPOSE (of the rule): These rules govern the use of emergency interventions and behavioral treatment in a manner consistent with maximizing the safety, well-being, independence and inclusion of Maine citizens with intellectual disabilities or autistic disorder. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.

**14-197,** [**CHAPTER 8**](http://www.maine.gov/sos/cec/rules/14/197/197c008.doc): Rule Describing Grievance and Appeals Procedures for Persons with Intellectual Disabilities

STATUTORY BASIS: 22-A MR.S.A. §205; and 34-B M.R.S.A. §§ 5201, 5465, and 5604

PURPOSE (of the rule): This rule sets forth the grievance and appeal process for persons with intellectual disabilities or autistic disorder receiving services from the Department. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.

**14-197,** [**CHAPTER 10**](http://www.maine.gov/sos/cec/rules/14/197/197c010.doc): Certification Requirements for Agencies Seeking to Provide Community Based Targeted Case Management for Adults with Intellectual Disabilities and Autism

STATUTORY BASIS: 22-A MR.S.A. §205; and 34-B M.R.S.A. §§ 5201, 5432 and 5465

PURPOSE (of the rule): These rules set out the requirements for certification for agencies seeking to provide community based targeted case management for adults with intellectual disorders or autistic disorder. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.

**14-197,** [**CHAPTER 11**](http://www.maine.gov/sos/cec/rules/14/197/197c011.doc), Consumer Directed Personal Assistance Services

STATUTORY BASIS: 22-A M.R.S.A. §205; and 34-B M.R.S.A. §§ 5201, 5432, and 5465

PURPOSE (of the rule): These rules govern the Consumer-Directed Personal Assistance Services program that provides services, subject to the availability of funds, for adults with severe disabilities. This program allows them to remain in their homes and communities and out of institutional settings. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.

**14-197,** [**CHAPTER 12**](http://www.maine.gov/sos/cec/rules/14/197/197c012.doc), Regulations Regarding Reportable Events, Adult Protective Investigations and Substantiation Hearings Regarding Persons with Intellectual Disabilities or Autism

STATUTORY BASIS: 22-A M.R.S.A. §205; 18-A M.R.S.A. §§ 5-312, 5-601, 5-606, and 5-607; and 34-B M.R.S.A. §§ 3803, 3832, 5203, 5480, and 5601 *et seq.*

PURPOSE (of the rule): This rule sets out the Department’s policy on reportable events and the investigation of allegations of abuse, neglect and exploitation of adults with intellectual disorders and autistic disorder and the process for individuals appealing a substantiation of abuse, neglect and exploitation. These rules will be amended to comply with state and federal changes, to update policy, and to implement changed services and regulations, as necessary.

SCHEDULE FOR ADOPTION: It is not possible to predict when all of the changes will be made to these regulations because of the nature of this work. Federal regulation changes, state legislation, and state-initiated changes because of identified problems and budget considerations require the timely amendment or adoption of new rules over the course of the year.

LISTING OF AFFECTED PARTIES: other state agencies, providers, and persons with intellectual disabilities or autistic disorder receiving services funded in whole or in part by, licensed by, or provided pursuant to a contract or agreement with the Department.