

# MAINE STATE LEGISLATURE

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Senate Legislative Record  
One Hundred and Twenty-Fourth Legislature

State of Maine

Daily Edition

First Regular Session  
December 3, 2008 to June 12, 2009

Pages 1 - 1159

**PAPERS FROM THE HOUSE**

**Non-Concurrent Matter**

Resolve, To Reduce Funding to Maine Clean Election Act Candidates

S.P. 345 L.D. 923  
(C "A" S-287)

In Senate, June 2, 2009, **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-287)**.

Comes from the House, **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-287) AS AMENDED BY HOUSE AMENDMENT "A" (H-533)** thereto, in **NON-CONCURRENCE**.

On motion by Senator **GOODALL** of Sagadahoc, the Senate **RECEDED** and **CONCURRED**.

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Out of order and under suspension of the Rules, the Senate considered the following:

**SECOND READERS**

The Committee on **Bills in the Second Reading** reported the following:

**House**

Resolve, To Establish a Transition Adjustment for Fiscal Year 2009-10

H.P. 1041 L.D. 1486

**READ A SECOND TIME** and **PASSED TO BE ENGROSSED**, in concurrence.

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Off Record Remarks

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Out of order and under suspension of the Rules, the Senate considered the following:

**PAPERS FROM THE HOUSE**

**Non-Concurrent Matter**

Bill "An Act To Conform State Mortgage Laws with Federal Laws" (EMERGENCY)

S.P. 523 L.D. 1439  
(S "D" S-289 to C "A" S-221)

In Senate, June 2, 2009, **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-221) AS AMENDED BY SENATE AMENDMENT "D" (S-289)** thereto.

Comes from the House, **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-221) AS AMENDED BY HOUSE AMENDMENT "A" (H-532)** thereto, in **NON-CONCURRENCE**.

On motion by Senator **BOWMAN** of York, the Senate **RECEDED** and **CONCURRED**.

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Out of order and under suspension of the Rules, the Senate considered the following:

**REPORTS OF COMMITTEES**

**Senate**

**Ought to Pass As Amended**

Senator **ALFOND** for the Committee on **EDUCATION AND CULTURAL AFFAIRS** on Bill "An Act To Improve the Ability of the Department of Education To Conduct Longitudinal Data Studies"

S.P. 491 L.D. 1356

Reported that the same **Ought to Pass as Amended by Committee Amendment "A" (S-301)**.

Report **READ** and **ACCEPTED**.

**READ ONCE**.

Committee Amendment "A" (S-301) **READ** and **ADOPTED**.

Under suspension of the Rules, **READ A SECOND TIME** and **PASSED TO BE ENGROSSED AS AMENDED**.

Ordered sent down forthwith for concurrence.

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**ORDERS OF THE DAY**

The Chair laid before the Senate the following Tabled and Later (6/3/09) Assigned matter:

HOUSE REPORTS - from the Committee on **INSURANCE AND FINANCIAL SERVICES** on Bill "An Act To Stabilize Funding and Enable DirigoChoice To Reach More Uninsured"

H.P. 883 L.D. 1264

Majority - **Ought to Pass as Amended by Committee Amendment "A" (H-490)** (9 members)

Minority - **Ought to Pass as Amended by Committee Amendment "B" (H-491)** (4 members)

Tabled - June 3, 2009, by Senator **BOWMAN** of York

Pending - motion by same Senator to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report, in concurrence

(In House, June 2, 2009, the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490).**)

(In Senate, June 3, 2009, Reports **READ.**)

**THE PRESIDENT:** The Chair recognizes the Senator from York, Senator Bowman.

Senator **BOWMAN:** Thank you, Madame President. Men and women of the Senate, during my campaign for election, the predominate issue that I heard by going to several thousand doors was healthcare. This has been echoed at the national level this past election and is now a national priority. Through the years DirigoChoice has attempted to address this need, I'll call it, for better or for worse. I have received numerous electronic correspondences asking that I support the Dirigo program, and I do. L.D. 1264 responds to this need in the short term. L.D. 1264 plainly and simply allows individuals, small businesses, and non-profits who currently rely on the DirigoChoice insurance product, or who want to sign up for this insurance option, to continue to have that choice. It is, in fact, a bridge between the past and the near-term future. The bill specifically protects current members and MaineCare parents. It provides for a consistent funding source that won't cost hospitals and the insured more than they are currently being charged under the current system, affectionately called savings offset payment. It gets rid of an accounting nightmare, the 27 month collection schedule that most of you have heard about, reduces administrative waste and lawyer's fees, and requires redesign of the Dirigo insurance product to promote affordability and higher quality. It eliminates the cap on enrollment starting in fiscal year 2011, continues to offer a quality product to small businesses, non-profits, and individuals based on an ability to pay. It positions Maine to partner with the federal government and accept federal funds as national healthcare reform moves forward, which it most certainly will. Many of the problems that we've experienced with the Dirigo program can be laid at the door of the funding mechanism and the payment schedule that we would never use in the business world, and which have pretty much guaranteed that the program would be contentious, inconsistently funded, and difficult to administer. Yet despite these handicaps facing the program from the start, DirigoChoice insurance product has benefited many people and more would like to purchase it. We need to remember that this is no give-away healthcare program. This is a program of cost sharing where people pay according to their means. Some enrollees and employers pay the whole freight while others get subsidized according to their income. It is a program that provides options to employers who want to do the right thing and offer health insurance to their employees. Since its inception it has saved the healthcare system millions of dollars in avoided costs, as its beneficiaries receive preventive care and see primary care doctors instead of going to hospitals or emergency care when their illness becomes a crisis. The bill converts the savings offset program, or payment program SOP, to a fixed monthly fee that will be paid by the same people who pay the SOP today. They will pay the same amount that the savings offset payment would have required them to do. The SOP has been contentious from the beginning and subject to court

challenges and on-going disagreements. This bill allows us to stabilize the program and protect those now on it and move forward, hopefully securing federal funds in the process. L.D. 1264 saves money by cutting administrative waste and by getting rid of the current expensive and burdensome funding mechanism which requires million dollar administrative hearings and expenditures every year, and encourages litigation and uncertainty. L.D. 1264 provides consistency of funding so that the funds available to run the program won't fluctuate from year to year, and so the insurance company administrator of DirigoChoice can plan ahead and make rational choices. L.D. 1264 gets rid of the nonsensical 27 month payment schedule that I alluded to earlier that has created a cash flow and other problems. While there have been valid reasons for adopting this schedule at the time, as was driven home during budget hearings this year and work sessions, this is no way to run a business. L.D. 1264 will collect funds over a logical 12 month period. The bill also charges the Dirigo board of trustees to redesign the program and to make it more affordable and able to reach more uninsured. The controversy surrounding the financing of this program has regrettably taken away from the considerable success that the program has achieved. While Dirigo began in 2003, the United HealthCare state ranking showed Maine nineteenth in covering the uninsured. In the most recent report Maine now ranks fifth. Since the beginning of the program's operation over 29,000 people have been served. About 5,800 of them are the result of the MaineCare expansion funded through the Dirigo program. The remaining are individuals and families whose incomes are below three times the poverty rate. The program's financing has been so challenged that most enrollment has been on hold for almost two years. Even so, 9,700 people are now enrolled in the DirigoChoice product offered by the non-profit Harvard Pilgrim HealthCare plan. Passage of L.D. 1264 would mean that by January 2011, which is a mere 18 months from now, the program will be able to be re-opened to enrollment with a new more affordable product which we hope will be congruent with and receiving federal funds in support. It will help build for the future and make the program, or the federal program, depending on what it looks like, more sustainable. Unless we pass this legislation, DirigoChoice product will remain capped in 2009 as it has been since September 2007 due to uncertainty in funding. According to the budget testimony earlier this year before the IFS Committee and Appropriations, currently the agency has a waiting list of 2,000 people who have expressed a desire to enroll. In the past few months the agency's call volume has increased significantly from citizens who have recently lost their employment and who are seeking options to maintain their health insurance coverage. DirigoChoice certainly is not the end all-be all in health insurance reform. It may well prove to be a bridge program as we move to a more comprehensive State and/or federal health care system. Nonetheless, it remains an important program that provides one more option in the insurance marketplace in this state which is relied upon by thousands of Mainers and their employers who want to purchase health insurance. I ask you to vote for L.D. 1264 so that this important piece of health care strategy can continue in a more rational cost-effective and sustainable manner, and provide health insurance to those thousands who depend upon it. Thank you.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator McCormick.

Senator **McCORMICK**: Thank you, Madame President. Men and women of the Senate, I speak in opposition to the current motion. For those of you who have been around here for awhile in either Body or have simply followed the progress of the Dirigo program since 2003, I hope you can appreciate that both reports coming out of the committee begin with Ought to Pass as Amended. Much of what the good Senate Chair from York, Senator Bowman said is true and is contained in both versions of the committee reports. Our differences just simply surround the use of any undesignated federal funds that may come here as a result of stimulus money or health care reform, and that money that would be received by the Dirigo program, how that might be used. There are some requirements for what would be expected in the report-back that is due in January of 2010 under both reports. We simply specify more requirements on that report-back. The last thing we differ on is the source of the continued funding for the Dirigo program itself. These are not really significant in my mind, but important for us. I hope you've had a chance to review both committee reports. I hope you oppose the current motion and we move on to the Minority Report and we'll speak more about that later. Thank you, Madame President.

On motion by Senator **COURTNEY** of York, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

On motion by Senator **BARTLETT** of Cumberland, **TABLED** until Later in Today's Session, pending the motion by Senator **BOWMAN** of York to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report, in concurrence. (Roll Call Ordered)

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Senate at Ease.

Senate called to order by the President.

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The Chair laid before the Senate the following Tabled and Later Today Assigned matter:

HOUSE REPORTS - from the Committee on **INSURANCE AND FINANCIAL SERVICES** on Bill "An Act To Stabilize Funding and Enable DirigoChoice To Reach More Uninsured"  
H.P. 883 L.D. 1264

Majority - **Ought to Pass as Amended by Committee Amendment "A" (H-490)** (9 members)

Minority - **Ought to Pass as Amended by Committee Amendment "B" (H-491)** (4 members)

Tabled - June 4, 2009, by Senator **BARTLETT** of Cumberland

Pending - motion by Senator **BOWMAN** of York to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report, in concurrence (Roll Call Ordered)

(In House, June 2, 2009, the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)**.)

(In Senate, June 3, 2009, Reports **READ**.)

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

**ROLL CALL (#169)**

YEAS: Senators: ALFOND, BARTLETT, BLISS, BOWMAN, BRANNIGAN, BRYANT, CRAVEN, DAMON, DIAMOND, GERZOFISKY, GOODALL, HOBBS, JACKSON, MARRACHE, NUTTING, PERRY, SCHNEIDER, SIMPSON, THE PRESIDENT - ELIZABETH H. MITCHELL

NAYS: Senators: COURTNEY, DAVIS, GOOLEY, HASTINGS, MCCORMICK, MILLS, NASS, PLOWMAN, RAYE, RECTOR, ROSEN, SHERMAN, SMITH, TRAHAN, WESTON

ABSENT: Senator: SULLIVAN

19 Senators having voted in the affirmative and 15 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **BOWMAN** of York to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED BY COMMITTEE AMENDMENT "A" (H-490)** Report, in concurrence, **PREVAILED**.

**READ ONCE.**

Committee Amendment "A" (H-490) **READ**.

On motion by Senator **MILLS** of Somerset, Senate Amendment "B" (S-293) to Committee Amendment "A" (H-490) **READ**.

**THE PRESIDENT:** The Chair recognizes the Senator from Somerset, Senator Mills.

Senator **MILLS**: Thank you, Madame President. Men and women of the Senate, several years ago I voted for the Dirigo program in its entirety. The bill was worked through on a special committee basis. I wasn't on the committee but I followed its work closely. I thought it was good work. I still think that many of the elements of the Dirigo initiative have been a hallmark of success of this Administration, in the sense that he brought people together. The bill and its administrators have brought together people around the table in the hospital commission. They've brought together a public purchases steering committee. They have a quality initiative through the Quality Forum, which I think is very fruitful. We have a cost driver committee that I have the pleasure of serving on. The insurance element of that large bill is the one that has generated the most controversy and is perhaps the one we should consider has offered us the greatest challenges. It was based originally on pre-assumptions that did not prove true. One of the assumptions was that we could sell a

product that would be subsidized by the public and that employers, small employers, would be prepared to step up and pay 60% of the premium, not only for their employees, but also for their dependants. It was quickly determined that such a product would not sell. The product, when it hit the streets, contained a very heavy public subsidy. It requires only a 60% contribution on the employee's premium and the public subsidy picks up on a sliding scale basis, whatever is required to cover the rest of the premium for the employee and the entire family. So it became an extraordinarily expensive product, much more so than we had anticipated. We naively thought that the private sector would be better prepared to step up and match a public subsidy to help low income people acquire coverage. That's one of the assumptions that failed. The second one was that we thought that the product would draw in Medicaid match dollars from Washington. We have not been able to do that, so all of the public subsidy, essentially all of the money that has been used to subsidize Dirigo has come from State taxation resources, notably about \$50 million that was given to us by the federal government way back to start, and now the savings offset payment. The third assumption that many of us made when the bill was passed was that there would be substantial savings in the medical market for bad debt and charity care. Avoided costs of bad debt and charity care. Those costs have been analyzed by actuaries, at great expense I must say, over the years and we have found that the savings in bad debt and charity care amounts at best to a few million dollars a year. Hardly enough to sustain the \$40 or \$50 million in public subsidies that are apparently necessary to cover even eight or ten thousand or 12,000 people. The board has been asked to consider re-framing the product. Indeed the Majority Report that lies before you invites them to reconsider the shape and delineation of the product once again. I think it's time to do something a little bit more aggressive. If this Legislature is going to vote for a permanent tax of 2.14% on all paid claims throughout the medical industry in this state, if we're going to put a 2% sales tax on and burden the premiums of people who are struggling to pay their own health insurance, if we're going to ask that sacrifice from Maine people, it seems to me we have an obligation to direct the board to spread those subsidies as far and as wide as they can to make the few dollars that we have available go as far as they can in affording coverage to needy Maine families.

The amendment that lies before you directs the board to do several simple things that I think are long overdue for the Dirigo health program. Number one, it says by next year please write, or make available to people, a voucher system for health insurance so that more than one insurance carrier can have products that might qualify and fulfill the need for needy families, and give them a voucher that allows them to go out and get different products, perhaps different product lines from different companies. Be more flexible, more creative, in allowing people the economic wherewithal to enter the market. We do this, for goodness sakes, and have done for years with daycare assistance, for example. We issue vouchers for daycare and we don't direct what sort of product people have. We ask them to go to a decent daycare home. We look at families' incomes. We make a judgment about what the subsidy is that's necessary. It's a sliding scale system. The families go out and purchase their own daycare services. We do the same thing with Section 8 housing. We make certain judgments about the need of the family and then they go out and they use the money that is provided to go out and essentially voucher housing for

themselves. Indeed, why can't we do that with healthcare? There's a huge market out there for coverage. Why not simply put the State in the business of making judgments about the amount of the subsidy that is necessary for a given family to go out and acquire coverage, provide that subsidy to that family, and back away from the issue of the purchase. I think it's also a shame that we have been giving subsidized coverage, in many cases, to families without checking the assets that they have. I don't know how many people because we don't collect the information, how many people have been able to get a public subsidy for health insurance living in a home that's worth hundreds of thousands of dollars? I've had complaints from insurance brokers who say, 'People will walk into my agency wanting to buy the Dirigo product and I know that they can buy and sell my agency.' What is right about that? Why shouldn't there be an asset test? I know that it's a little bit involved, but shouldn't there be one? I suggest in this amendment that we simply not give a subsidy if you have net assets greater than \$50,000. I wouldn't be complicated to administer it. Somebody would just have to sign a form or affidavit saying, 'Yes I do not have a net worth greater than \$50,000.' The third element of this amendment suggests that we make the subsidized product available only to those who have not had the benefit of insurance during the proceeding six months. If we're going to open up enrollment again, as the Majority Report suggests we do next year, then for goodness sakes let's take, as a first priority, those folks who have been without insurance, outside of the insurance system, impose a restriction that says that you have to have been without insurance for six months before you are eligible for this subsidized product. Then if later on we find that it's successful and we want to open it up further, then we can change these rules. For the time being, why should we be letting people drop their existing coverage and come into Dirigo health? The fourth element asks that we permit the insurance carriers who are participating to do a modest amount of medical underwriting only in this way. If you have a pre-existing condition, that there be a six month waiting period before that condition is covered by your new insurance. It simply avoids this notion, or idea, that somebody can wait until they need the insurance, until they have the adverse diagnosis, before they go and sign up for the insurance. The fifth element of this proposal says to the board to please look at the limit amount of revenue that we have available to subsidize these folks, and develop policies to offer more affordable products to these people to reduce the subsidies in order to cover more households at lesser cost. Let's focus the coverage that we are making available on preventive care and disease management instead of asset protection for those who are signing up for the program, and do what we can to use this program to reduce health care costs throughout the state. That's the gist, the thrust of this. I think it is the least that we can ask of the Dirigo program given the scarcity of resources that we have available as a poor state, look at the challenging experience that Massachusetts has been living through over the past several years. The idea that Dirigo health coverage is someday going to be the universal resource to cover all of the uninsured in Maine, the 130,000 to 140,000 of them that exist, is way, way beyond. Now we've proven through the Dirigo experience, perhaps we have proven to ourselves that it's an unaffordable goal. Massachusetts has proven it to us in spades. They're so much wealthier than we are and they're having such a struggle in doing it. I'm just suggesting that if we're going to have a permanent tax on health care, for goodness sakes, let's spread the money far

and wide and do as much good as we can with it in the form that's suggested by this motion. Thank you.

Senator **BOWMAN** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "B" (S-293) to Committee Amendment "A" (H-490).

On motion by Senator **COURTNEY** of York, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

**THE PRESIDENT:** The Chair recognizes the Senator from Hancock, Senator Rosen.

Senator **ROSEN:** Thank you, Madame President. Men and women of the Senate, I guess I would simply pose the question, why? Why reject this proposal? Why reject the elements in this amendment? I think they reflect a great deal of thought and I think they really do hit the target. As the Senator from Somerset, Senator Mills indicated, I was also a member of the Legislature and I voted for the Dirigo legislation. I agree with many of his comments, that there are elements that have survived from that reform effort that have been very valuable, the quality forums and the development of the State health plan, and many other initiatives. We have learned a lot from the insurance component. The idea of selecting just one plan and requiring those citizens that participate in the subsidy to only be able to purchase that one plan. Now that we have made the philosophical break from the funding model of the original initiative, which was based on savings, and have moved to just a straightforward assessment to fund a subsidy, it is a fair question. It is a major philosophical change and I think it would strengthen the program if we could move to some of the steps that the good Senator from Somerset has included in this amendment and I think it ought to be allowed to go forward.

**THE PRESIDENT:** The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you, Madame President. Men and women of the Senate, I can respond to a couple of the concerns I have with this amendment for the record. First, item number two in the list of requirements would require an asset test, indicating that the board may not provide subsidies to any household with a net worth exceeding \$50,000. This would seem to be regardless of the size of the family. It doesn't indicate any exclusion for the home itself. Imagine a family of four living in a home. They've been slowly trying to pay their mortgage. They have net equity on an appraised value of \$50,000. Now we all know that they cannot simply sell their home and move into another one of a comparable size for any less price. So that wealth is locked within the home and they have no access to it. In addition, when you start talking about families of four or six, \$50,000 in combined assets is not much money, particularly when you factor in things like their cars and their home. You're leaving people extraordinarily vulnerable and I think that would render Dirigo meaningless. You'd essentially be cutting so many people out of eligibility that you're not helping the people you want to, and that's the working people struggling to pay for insurance. The second issue I have with the bill is the six month requirement that you go uninsured before your coverage. We're in a time of tremendous economic turmoil. People are being terminated from their jobs

every single day. To say that even if you've been terminated from your job, you have to wait six months. If you're six months struggling, trying to feed your family with no income, and you're going to have to wait those six months on health insurance, too. The fact that it's a blind straight requirement without exceptions, I think, poses extraordinary challenges, and again would prevent you from helping the very people that Dirigo is designed to assist.

**THE PRESIDENT:** The Chair recognizes the Senator from York, Senator Bowman.

Senator **BOWMAN:** Thank you, Madame President. Men and women of the Senate, in response to the esteemed colleague from Hancock, the amendment addresses several facets, some of which I find acceptable, some of which I do not. In your own words, which I really take to heart because they are absolutely true, they deserve more thought than the few moments that we have here to assess their impact.

**THE PRESIDENT:** The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you, Madame President. Ladies and gentlemen of the Senate, I'd just like to piggyback on the Senator from Cumberland's comments. That was the one thing that when I was listening to the Senator from Somerset's comments that concerned me. My area obviously has a lot of logging contractors. Despite a flyer you might have seen today, most of those contractors are independent contractors that don't have health insurance. Recently, for reasons that maybe many people know of, I've been in contact with many of them. One of the things that they continue to bring up was the Dirigo fund. It's striking to me anyway that many of them have Dirigo health insurance if they have any health insurance at all. That type of equipment, some of it \$300,000 piece of equipment that's a necessity to the job, after you've paid a year or two on a five or six year note, you have \$50,000 equity into it. You're still paying six, seven, eight, ten thousand dollar a month payments and you really don't have much of anything to show for it. The Dirigo program has been somewhat good for many of my constituents in the logging industry. That particular piece of that amendment would certainly wreak havoc with many of my constituents, so I'll be supporting Indefinite Postponement.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator McCormick.

Senator **McCORMICK:** Thank you, Madame President. Men and women of the Senate, the Committee amendment that this amendment seeks to modify or amend actually requires a report-back from the board of trustees of Dirigo health. Some of the requirements on the report-back are to develop more affordable products that can reach uninsured and underinsured residents. It requires them to determine the impact of an asset test on determining eligibility. It requires them to report-back on a voucher-based program to provide health insurance benefits, redesigning the DirigoChoice product or products. All of these are items to be reported-back to the committee in January of 2010. This amendment simply brings those ideas and changes forward for us at this time rather than waiting until next year for them to come forward. I am in support of the amendment as offered. Thank you, Madame President.

**THE PRESIDENT:** The pending question before the Senate is the motion by the Senator from York, Senator Bowman to Indefinitely Postpone Senate Amendment "B" (S-293) to Committee Amendment "A" (H-490). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

**ROLL CALL (#170)**

**YEAS:** Senators: ALFOND, BARTLETT, BLISS, BOWMAN, BRANNIGAN, BRYANT, CRAVEN, DAMON, DIAMOND, GERZOFKY, GOODALL, HOBBS, JACKSON, MARRACHE, NUTTING, PERRY, SCHNEIDER, SIMPSON, THE PRESIDENT - ELIZABETH H. MITCHELL

**NAYS:** Senators: COURTNEY, DAVIS, GOOLEY, HASTINGS, MCCORMICK, MILLS, NASS, PLOWMAN, RAYE, RECTOR, ROSEN, SHERMAN, SMITH, TRAHAN, WESTON

**ABSENT:** Senator: SULLIVAN

19 Senators having voted in the affirmative and 15 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **BOWMAN** of York to **INDEFINITELY POSTPONE** Senate Amendment "B" (S-293) to Committee Amendment "A" (H-490), **PREVAILED**.

Committee Amendment "A" (H-490) **ADOPTED**, in concurrence.

Under suspension of the Rules, **READ A SECOND TIME** and **PASSED TO BE ENGROSSED AS AMENDED**, in concurrence.

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Senate at Ease.

Senate called to order by the President.

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The Chair laid before the Senate the following Tabled and Later (5/29/09) Assigned matter:

**SENATE REPORTS** - from the Committee on **INLAND FISHERIES AND WILDLIFE** on Bill "An Act To Allow Youth To Fish for Smelt on Worthley Pond" (EMERGENCY)  
S.P. 347 L.D. 925  
(C "A" S-157; S "A" S-250)

Majority - **Ought Not to Pass** (8 members)

Minority - **Ought to Pass as Amended by Committee Amendment "A" (S-157)** (4 members)

Tabled - May 29, 2009, by Senator **BRYANT** of Oxford

Pending - motion by Senator **TRAHAN** of Lincoln to **RECEDE** and **CONCUR**

(In Senate, May 28, 2009, the Minority **OUGHT TO PASS AS AMENDED** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-157) AND SENATE AMENDMENT "A" (S-250)**.)

(In House, May 29, 2009, the Majority **OUGHT NOT TO PASS** Report **READ** and **ACCEPTED**, in **NON-CONCURRENCE**.)

On motion by Senator **TRAHAN** of Lincoln, the Senate **RECEDED** from whereby the Bill was **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-157) AND SENATE AMENDMENT "A" (S-250)**.

On further motion by same Senator, the Senate **RECEDED** from whereby it **ADOPTED COMMITTEE AMENDMENT "A" (S-157)**.

On further motion by same Senator, Senate Amendment "A" (S-299) to Committee Amendment "A" (S-157) **READ**.

**THE PRESIDENT:** The Chair recognizes the Senator from Lincoln, Senator Trahan.

Senator **TRAHAN:** Thank you, Madame President. Ladies and gentlemen of the Senate, for those folks who don't have the bill in front of them, there was an error in the bill that was inconsistent with State law around the age of kids that could smelt on this body of water. This amendment changes it from 17, to be more consistent, down to 16 and under on this body of water. I hope the Senate will adopt this amendment.

On motion by same Senator, Senate Amendment "A" (S-299) to Committee Amendment "A" (S-157) **ADOPTED**.

Committee Amendment "A" (S-157) as Amended by Senate Amendment "A" (S-299) thereto, **ADOPTED**.

**PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-157) AS AMENDED BY SENATE AMENDMENT "A" (S-299)** thereto, **AND SENATE AMENDMENT "A" (S-250)**, in **NON-CONCURRENCE**.

Ordered sent down forthwith for concurrence.

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The Chair laid before the Senate the following Tabled and Later (6/1/09) Assigned matter:

Bill "An Act To Allow Smelt Fishing in Metallak Brook, Upper Richardson Lake" (EMERGENCY)  
S.P. 348 L.D. 926  
(C "A" S-158)

Tabled - June 1, 2009, by Senator **BRYANT** of Oxford

Pending - **PASSAGE TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (S-158)**(Roll Call Ordered)