

MHA

Maine Hospital Association
Representing community hospitals and the patients they serve.

Opioid Bills (through LD 1329)

(2017)

DHHS Administration

[LD 105](#) - *An Act To Create a Centralized Authority To Combat Opiate Addiction in Maine*

This bill establishes an office within the Department of Health and Human Services to coordinate efforts in the State to combat addiction to opiates.

[LD 447](#) - *An Act To Coordinate Services and Support Workforce Development for Substance Use Disorder Prevention and Peer Recovery Services*

Part A of this bill requires the Department of Health and Human Services to spend \$200,000 to fund two external positions; (i) one position to coordinate substance use disorder prevention, advocacy, education and community outreach statewide and (ii) a second position to coordinate peer recovery support services efforts for substance use disorder recovery statewide. The funding is to be taken from proceeds from the sales tax on legal marijuana.

[LD 504](#) - *An Act To Support Evaluation of Opioid Diversion Efforts*

This bill is a **concept draft** that proposes to authorize the Department of Health and Human Services to contract with a research firm to perform an evaluation of the outcomes associated with various heroin and opioid prevention efforts across the State. The evaluation must address the outcomes associated with initiatives under which a person goes to a police station, asks for help with heroin or opioid addiction and is placed in a treatment center, in a detoxification facility or with a support service program. The bill proposes to provide state and federal funding related to substance use to fund the evaluation.

[LD 1186](#) - *Resolve, Directing the Department of Health and Human Services To Develop a Resource Guide for Assistance in Substance Abuse Matters*

This resolve requires the Department of Health and Human Services to create a resource guide for state-funded and other alcohol and drug abuse treatment, prevention and recovery programs. The resource guide must be made available on a publicly accessible website and searchable by location and by services provided.

Treatment

[LD 107](#) - *An Act To Increase the Effectiveness of Opioid Addiction Therapy*

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

[LD 185](#) – *An Act To Establish a Pilot Project for Medicaid Reimbursement for Acupuncture Treatment of Substance Abuse Disorders*

This bill requires the Department of Health and Human Services and the department's office of substance abuse and mental health services to apply by January 1, 2018 for authorization from the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to develop a pilot project to treat alcohol abuse disorders, substance abuse disorders and co-occurring disorders using the National Acupuncture Detoxification Association auricular acupuncture protocol. The bill requires the department to consult with a statewide association representing licensed acupuncturists in the establishment of treatment standards. The bill requires that the treatment be provided by staff who are licensed to practice acupuncture in the State and whose licenses are in good standing. The project may last no longer than 2 years and must be reimbursable as allowed under the United States Social Security Act and be cost-neutral or result in savings to the MaineCare program. The department and the office must report their findings to the joint standing committee of the Legislature having jurisdiction over health and human services matters at the end of the project.

[LD 307](#) - *An Act To Facilitate the Implementation of Mobile Narcotic Treatment Programs in Rural Counties in the State*

This bill is a **concept draft** that proposes to facilitate the implementation of mobile narcotic treatment programs in rural counties in the State in order to ensure access to treatment for patients who reside remotely from, or lack transportation to, other narcotic treatment programs.

[LD 411](#) - *An Act To Add Addiction to or Dependency on Opiates or Prescription Drugs to the List of Qualifying Conditions for Medical Marijuana*

This bill adds addiction to or dependency on opiates or prescription drugs to the list of qualifying conditions for medical marijuana.

[LD 453](#) - *Resolve, Regarding Insurance Coverage for Alternative Therapies for Addiction and Recovery*

This resolve requires the Superintendent of Insurance to convene interested parties to evaluate commercial insurance coverage for addiction treatment and recovery alternative therapies and report findings and recommendations to the Joint Standing Committee on Insurance and Financial Services.

[LD 605](#) – *An Act To Support Evidence-based Treatment for Opioid Use Disorder*

This bill provides funding for primary care patient-centered medical homes and behavioral health providers that provide evidence-based, integrated medication-assisted treatment to uninsured

patients with opioid use disorder to cover costs of intensive, intermediate and long-term treatment.

[LD 651](#) - *An Act To Expand Substance Abuse Prevention Projects*

This bill provides an ongoing General Fund appropriation of \$1,200,000 beginning in fiscal year 2017-18 to the Department of Public Safety for the Substance Abuse Assistance Program.

[LD 952](#) – *An Act To Ensure Access to Opiate Addiction Treatment in Maine*

This bill directs the Department of Health and Human Services to amend its rules to increase the MaineCare reimbursement rate for outpatient opioid treatment to \$80 per week and to permit outpatient opioid treatment providers to be open 6 days per week as provided under federal law. It directs the department to contract with a 3rd-party consultant to conduct a rate study regarding reimbursement to outpatient opioid treatment providers. It authorizes opioid treatment programs under the Maine Pharmacy Act to operate without maintaining a pharmacist in charge but requires opioid treatment programs to enter into a written agreement with a licensed pharmacist to serve as a consultant to the opioid treatment program. It authorizes registered professional nurses, certified nurse practitioners and licensed practical nurses to dispense opioid medication for substance abuse treatment purposes to patients in an opioid treatment program.

[LD 1197](#) - *An Act to Support Substance Use Disorder Prevention, Treatment and Recovery*

This bill establishes the Fund for Substance Use Disorder Prevention, Treatment and Recovery and funds it by requiring 10% of the tax revenue from the retail sale of marijuana and marijuana products to be deposited in the fund. The fund is used for substance use disorder prevention, recovery and treatment programs administered by the Department of Health and Human Services and the Maine Center for Disease Control and Prevention. This bill specifies that the additional funding for existing programs for substance use disorder, treatment and recovery is intended to supplement, not supplant, funding appropriated for those purposes.

Chapter 488 – Exemptions

[LD 232](#) - *An Act To Establish an Exemption to the 30-day Supply Limitation on Certain Pain Medication*

Current law prohibits an individual licensed to prescribe opioid medication from prescribing more than a 30-day supply of an opioid medication to a patient under treatment for chronic pain. This bill allows an individual licensed to prescribe opioid medication to prescribe no more than a 6-month supply of an opioid medication to a patient under treatment for chronic pain who will be out of the country at the end of the 30-day period.

[LD 273](#) - *An Act To Add an Exception to Prescription Monitoring Program Requirements*

Current law provides an exception to the requirement to check prescription monitoring information when a health care professional orders or administers the medication to a person in an emergency room, an inpatient hospital, a long-term care facility or a residential care facility.

This bill expands the exception to include when a health care professional orders, prescribes or administers medication to a person suffering from pain associated with cancer treatment or end-of-life, palliative or hospice care.

[LD 1031](#) - *An Act To Establish Reasonable and Clinically Appropriate Exceptions to Opioid Medication Prescribing Limits*

Public Law 2015, chapter 488 requires that, beginning July 1, 2017, the aggregate amount of opioid medication prescribed to a patient may not be in excess of 100 morphine milligram equivalents per day and directs the Department of Health and Human Services to adopt rules establishing reasonable exceptions to those prescriber limits. This bill codifies in statute the exceptions adopted in the department's rules and adds an exception to prescribing limits for medical necessity.

[LD 1325](#) - *An Act Regarding Opioids and Palliative Care*

This bill allows an exemption from the limits on opioid medication prescribing for a patient receiving palliative care under a management plan that is submitted by a licensed medical professional caring for the patient and approved by the Department of Health and Human Services and that documents the need for ongoing treatment of the patient that exceeds the limits on opioid medication prescribing

Prescription Monitoring Program

[LD 184](#) - *An Act To Allow Hospitals To More Efficiently Monitor the Prescribing of Controlled Substances by Amending the Laws Governing Access to Prescription Monitoring Information* [MHA Bill]

The purpose of this bill is to allow a hospital to more efficiently monitor the prescribing of controlled substances by its employed prescribers by authorizing a hospital's chief medical officer, medical director or other similar individual employed by the hospital to access prescription monitoring information.

Enforcement

[LD 249](#) - *An Act To Fund and Enhance the Maine Diversion Alert Program*

This bill provides \$95,000 in General Fund funds to continue and enhance the functionality of the Maine Diversion Alert Program.

[LD 1326](#) - *An Act To Reduce Morbidity and Mortality Related to Opioid Misuse*

This bill:

1. Repeals the provision making possession of a hypodermic apparatus a crime;
2. Creates a medical assistance exemption from criminal liability, including arrest, prosecution or incarceration, for a person who seeks medical assistance for that person's self or another who

experiences a drug overdose if the grounds for the arrest, prosecution or incarceration were obtained as a result of the person's seeking medical assistance;

3. Removes Department of Health and Human Services rule-making authority over establishing community-based drug overdose prevention programs and adds statutory criteria for the establishment of the programs; and

4. Appropriates to the Department of Health and Human Services \$75,000 for syringe exchange programs and \$50,000 for naloxone hydrochloride distribution through com

Education

[LD 475](#) - *An Act To Require That a Person Who Has Been Treated by a Law Enforcement Officer with Naloxone Be Informed about Drug Addiction Treatment*

This bill is a **concept draft** that proposes to require a law enforcement officer who has administered naloxone hydrochloride to a person to provide the name and contact information for that person to the nearest publicly funded mental health treatment provider. It requires a treatment provider receiving that information to contact the person and inform the person of available options regarding drug addiction treatment.

[LD 479](#) - *An Act To Inform Patients of the Dangers of Addicting Opioids*

This bill requires that a health care provider who is a prescriber of opioid medication must, before prescribing an opioid medication, inform the patient of the risks of using the opioid medication, including but not limited to the risk of forming an addiction to the opioid medication, and receive from the patient a written certification that the patient has been provided that information.

Other – Vague Concept Drafts

[LD 565](#) - *An Act To Address Maine's Opiate Addiction Crisis*

This bill is a **concept draft** that proposes to address issues related to the opiate addiction crisis in the State.

[LD 634](#) – *An Act Regarding the Drug Epidemic in Maine*

This bill is a **concept draft** that proposes to provide solutions to combat addiction to heroin, opioids and other illegal drugs through enforcement, prevention and treatment.

Other – Targeted Regional Proposals

[LD 144](#) - *An Act To Create a Pilot Project To Reduce Substance Use Disorders among Youth in Piscataquis County To Be Used as a Model for All Maine Communities*

This concept draft bill proposes to establish a comprehensive, evidence-based pilot project in selected Piscataquis County communities and schools with the goal of reducing the harmful effects of substance use disorder and addiction. The pilot project will use best practices for screening high-risk children, early intervention and community and family support to prevent

addiction and promote public health and safety. The pilot project must be administered by a local nonprofit entity with expertise in management and in the subject matter of the project. The bill provides funding for the planning and implementation of the pilot project, including, but not limited to, funding to:

1. Employ one full-time person to lead and manage the implementation of the project;
2. Engage outside consultants with expertise in planning, evaluation, training and technical assistance;
3. Convene community partners to leverage local, state and federal resources;
4. Train school staff and others working with priority populations;
5. Screen and provide early intervention to children and families most at risk for substance use disorder and its related implications;
6. Build school and community capacity to mitigate trauma and improve resilience; and
7. Promote understanding of and decrease stigma surrounding substance use disorder.

The bill also provides funding for a professional evaluation of the pilot project and requires a report to the Legislature on the pilot project's effectiveness and ease of replication in other communities that are being affected by the opiate epidemic.

[LD 307](#) - *An Act To Facilitate the Implementation of Mobile Narcotic Treatment Programs in Rural Counties in the State*

This bill is a concept draft that proposes to facilitate the implementation of mobile narcotic treatment programs in rural counties in the State in order to ensure access to treatment for patients who reside remotely from, or lack transportation to, other narcotic treatment programs.

[LD 812](#) – *Resolve, To Establish a Pilot Project To Save Lives and Support People with Substance Use Disorder in Washington County*

This resolve establishes a pilot project in Washington County to provide treatment and recovery services for substance use disorders. It provides \$1,600,000 in funding over the 2018-2019 fiscal biennium. The Department of Health and Human Services is required to report on the planning and implementation of the pilot project to the Joint Standing Committee on Health and Human Services no later than November 30, 2018, and the joint standing committee of the Legislature having jurisdiction over health and human services matters may report out legislation to the First Regular Session of the 129th Legislature.

[LD 932](#) - *Resolve, To Establish the Commission To Study the Siting and Building of a Drug Treatment Facility in Northern Maine*

This resolve establishes the Commission To Study the Siting and Building of a Drug Treatment Facility in Northern Maine.