

# First Regular Session--128th Maine Legislature

## Maine Hospital Association Legislative Report

### 6/30/2017

#### **LD 6 An Act To Prohibit Insurance Carriers from Retroactively Reducing Payment on Clean Claims Submitted by Pharmacies**

**Sponsor:** *Sen. Gratwick* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062407>

**Insurance & Financial Services** **Committee Status:** OTPA  
**Public Hearing:** 1/24/2017 1:00 PM **Final Status:** PL 2017, CH 44

As enacted, the law prohibits a carrier or pharmacy benefits manager from imposing on an enrollee in a health plan a copayment or other charge that exceeds the cost of the medication. The amendment also prohibits a carrier or pharmacy benefits manager from penalizing a pharmacy provider for disclosing relevant information about the cost or clinical efficacy of a medication to an enrollee.

#### **LD 12 An Act To Incorporate Protections for Living Donors into Maine Law**

**Sponsor:** *Rep. Nadeau* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062423>

**Insurance & Financial Services** **Committee Status:** OTPA  
**Public Hearing:** 2/2/2017 10:00 AM **Final Status:** PL 2017, CH 20

TAs enacted, this law "clarifies" that insurers may not discriminate in the offering, issuance, cancellation, amount of coverage, price or other condition of a life insurance, disability insurance or long-term care insurance policy based solely and without any additional actuarial justification upon the status of an individual as a living organ donor.

#### **LD 13 An Act To Require Certain Licensing Boards To Report Cases of Sexual Abuse of a Patient or Client by a Licensee to a Law Enforcement Agency or the Department of Health and Human Services**

**Sponsor:** *Rep. Espling* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062424>

**Labor, Commerce, Research and Economic Development** **Committee Status:** ONTP  
**Public Hearing:** 1/31/2017 1:00 PM **Final Status:** DEAD

This bill requires the Board of Osteopathic Licensure, the Board of Licensure in Medicine, the State Board of Social Worker Licensure, the Board of Counseling Professionals Licensure and the Board of Dental Practice to report to a law enforcement agency or the Department of Health and Human Services known or suspected incidents of sexual abuse of a client or patient by a professional regulated by the board or by an assistant to a professional regulated by the board.

#### **LD 19 An Act To Assist Residents of Nursing Homes To Return to Their Communities**

**Sponsor:** *Rep. Sanderson* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062453>

**Health & Human Services** **Committee Status:** ONPT  
**Public Hearing:** 2/7/2017 1:00 PM **Final Status:** DEAD

This bill provides ongoing funding for the continuation of the Homeward Bound program to provide outreach for those eligible for a nursing home level of care to transition to services in the community. The annual cost to the state is \$300K per year.



**LD 20 An Act To Reimburse Nursing Homes for the Loss of Coinsurance and Deductibles for Skilled Nursing Beds under Rules Adopted by the Department of Health and Human Services**

**Sponsor:** *Rep. Malaby* <http://legislature.maine.gov/LawMakerWeb/summary.asp?paper=HP0021&SessionID=12>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 2/7/2017 1:00 PM

**Final Status:**

This bill reverses the decision to cut "crossover" payments associated with coinsurance and deductibles for skilled nursing beds under rules adopted by the Department of Health and Human Services as required in Public Law 2013, chapter 368. The annual cost to the state is \$500K per year.

**LD 21 An Act To Amend the Law Regarding the Execution of Temporary Powers of Attorney**

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062455>

**Judiciary**

**Committee Status:** OTPA

**Public Hearing:** 1/26/2017 1:00 PM

**Final Status:** PL 2017, CH 42

Under current law, nonprofit legal services providers whose primary purpose is to provide free legal services are exempt from the requirement that organizations that assist parents or guardians with the process of executing a power of attorney for the temporary care of a minor ensure that a background check is completed for the agent and any adult members of the agent's household. This bill extends that exemption to nonprofit hospitals.

**LD 31 RESOLUTION, Proposing an Amendment to the Constitution of Maine To Require That Signatures on a Direct Initiative of Legislation Come from Each Congressional District**

**Sponsor:** *Rep. Espling* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062465>

**Veterans & Legal Affairs**

**Committee Status:** APP TBL

**Public Hearing:** 2/13/2017 10:00 AM

**Final Status:** PTBE

This resolution proposes to amend the Constitution of Maine to require that the signatures on a petition to directly initiate legislation be of voters from each of the State's 2 congressional districts and that the number of signatures from each congressional district be not less than 10% of the total vote for Governor cast in that congressional district in the previous gubernatorial election. This resolution provides that, if the required votes are cast in favor of the proposed amendment to the Constitution, the proposed amendment becomes part of the Constitution on March 1, 2018 instead of on the date of the Governor's proclamation.

**LD 46 An Act To Provide Consistency among Medical Professionals with Regard to Jury Duty Exemption**

**Sponsor:** *Sen. Libby* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062514>

**Judiciary**

**Committee Status:** APP TBL

**Public Hearing:** 3/21/2016 1:30 PM

**Final Status:** PL 2017, CH 275

This law removes the exemption from jury duty for physicians, dentists, judges, sheriffs, lawyers and veterinarians.

**LD 87 An Act To Require Screening for Cytomegalovirus in Newborn Infants**

**Sponsor:** *Sen. Breen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062548>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 2/7/2017 1:00 PM

**Final Status:** DEAD

This bill requires the testing of all newborn infants for cytomegalovirus by a saliva or urine sample no later than 21 days after birth. The Department of Health and Human Services is required to develop public educational materials regarding cytomegalovirus for pregnant women and women who may become pregnant.



## **LD 88 An Act To Delay the Implementation of Certain Portions of the Marijuana Legalization Act**

**Sponsor:** *Rep Luchini* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062791>

**Veteran's & Legal Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2017, CH 1

As enacted, the bill makes several changes to the citizen initiative to legalize recreational marijuana. Among the changes are delaying the date for which retail sales may take place to 2/1/2018; clarifying that possession by minors (under age 21) is still prohibited;

## **LD 105 An Act To Create a Centralized Authority To Combat Opiate Addiction in Maine**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062598>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

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 107 An Act To Increase the Effectiveness of Opioid Addiction Therapy**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062600>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:** DEAD

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

## **LD 114 An Act To Increase the Number of Suboxone Prescribers**

**Sponsor:** *Rep. Madigan* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062606>

**Labor, Commerce, Research & Economic Development** **Committee Status:** ONTP

**Public Hearing:** 2/16/2017 2:00 PM

**Final Status:** DEAD

This bill requires osteopathic and allopathic physicians whose scope of practice includes prescribing opioid medication to obtain a physician waiver from the federal Drug Enforcement Administration to treat opioid dependency using buprenorphine products. It also requires physician assistants whose scope of practice includes prescribing opioid medication to apply for a waiver as long as they are authorized under federal law. The bill also requires the Department of Health and Human Services to increase reimbursement rates under the MaineCare program for buprenorphine-medication-assisted treatment including prescriptions and accompanying services by 30% no later than January 1, 2018.

## **LD 125 An Act To Allow an Order Not To Resuscitate To Be Presented in the Form of an Indelible Mark**

**Sponsor:** *Rep. Turner* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062627>

**Judiciary**

**Committee Status:** ONTP

**Public Hearing:** 3/2/2017 2:00 PM

**Final Status:** DEAD

This bill prohibits emergency medical treatment providers from starting resuscitation on a person when an order not to resuscitate is presented in the form of an indelible mark on the person's chest.



## LD 130 An Act To Provide Funding for Costs Associated with Requiring the Licensing of Midwives

**Sponsor:** *Sen. Volk* <http://legislature.maine.gov/LawMakerWeb/summary.asp?paper=SP0049&SessionID=12>

**Labor, Commerce, Research & Economic Development Committee Status:** APP TABLE

**Public Hearing:** 1/31/2017 1:00 PM **Final Status:** PTBE

This bill includes Other Special Revenue Funds allocations totaling \$76,365 in fiscal year 2017-18 and \$26,985 in fiscal year 2018-19 to the Department of Professional and Financial Regulation for the costs associated with requiring individuals practicing midwifery in the State to be licensed by January 1, 2020.

This bill also includes corresponding transfers of funds from the General Fund unappropriated surplus to the Licensing and Enforcement, Other Special Revenue Funds account within the Department of Professional and Financial Regulation in fiscal years 2017-18, 2018-19 and 2019-20 to support these costs.

## LD 132 An Act To Authorize Podiatrists To Perform Certain Routine Procedures

**Sponsor:** *Sen. Volk* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062628>

**Labor, Commerce, Research and Economic Development Committee Status:** OTP

**Public Hearing:** 1/31/2017 1:00 PM **Final Status:** PL 2017 CH 14

This bill amends the definition of "practice of podiatric medicine" to include the performance of a history and physical on a podiatrist's preoperative patient and upon the patient's admission into a hospital or ambulatory surgical center.

## LD 142 An Act To Establish a Statewide Sexual Assault Forensic Examination Kit Tracking System

**Sponsor:** *Rep. Picchiotti* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062643>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:** **Final Status:** DEAD

This bill establishes within the State Police the responsibility to establish, operate and maintain a sexual assault forensic examination kit tracking system. The bill sets forth the requirements for the tracking system and requires the State Police to adopt routine technical rules, including rules regarding participation in the tracking system, confidentiality and the operation of the tracking system. The bill provides civil immunity for participants in the tracking system for actions required by law or rule.

## LD 153 An Act Regarding Transportation of Methadone Patients

**Sponsor:** *Rep. Lyford* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062656>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/24/2017 9:00 AM **Final Status:** DEAD

This bill prohibits the operating of a motor vehicle by a person who is receiving methadone for treatment of opioid dependency or for use as a pain medication. The Secretary of State shall amend its Chapter 3 rules, "Physical, Emotional and Mental Competence to Operate a Motor Vehicle," to require a health care practitioner or facility that is treating an individual with methadone to report to the Department of the Secretary of State, Bureau of Motor Vehicles. These rules are routine technical rules.

## LD 162 An Act To Improve Care Provided to Forensic Patients

**Sponsor:** *Rep. Gattine* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062686>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 5/2/2017 1:00 PM **Final Status:**

This bill is a concept draft that would require the Department of Health and Human Services to implement a plan to improve the care of forensic patients at Riverview Psychiatric Center and Dorothea Dix Psychiatric Center by developing additional resources to ensure patients are receiving appropriate care in an appropriate treatment setting.



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## LD 183 An Act Requiring the Use of the Electronic Death Registration System

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062739>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:**

**Final Status:** PL 2017, CH 37

This bill requires that, except for certificates filed by family members and domestic partners of the deceased, a certificate of death be filed using the electronic death registration system maintained by the State Registrar of Vital Statistics

## 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

**Sponsor:** *Rep. Malaby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062740>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/20/2017 1:00 PM

**Final Status:** PL 2017, CH 87

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.

## LD 212 RESOLUTION, Proposing an Amendment to the Constitution of Maine To Require That Signatures on a Direct Initiative of Legislation Come from Each State Senatorial District

**Sponsor:** *Rep. Lance Harv* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062767>

**Veterans & Legal Affairs**

**Committee Status:** ONTP

**Public Hearing:** 2/13/2017 10:00 AM

**Final Status:** DEAD

This resolution proposes to amend the Constitution of Maine to require that the signatures on a petition to directly initiate legislation be of voters from each of the State's senate districts and that the number of signatures from each senate district be not less than 10% of the total votes for Governor cast in that senate district in the previous gubernatorial election..

## LD 226 An Act To Protect and Improve the Health of Maine Citizens and the Economy of Maine

**Sponsor:** *Sen. Saviello* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062720>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill expands Medicaid coverage to adults with incomes equal to or below 133% plus 5% of the nonfarm income official federal poverty line for the applicable family size. Persons with incomes equal to or below 100% of the nonfarm income official poverty line receive coverage through the MaineCare program. The Commissioner of Health and Human Services is authorized to seek approval to provide that persons with income levels over 100% of the federal poverty line and up to 133% of the federal poverty line may receive coverage from a private health insurance plan or other mechanisms. In the event that the commissioner uses this authority, any funds made available from unexpended state matching funds must be used to help ensure that those persons with income levels between 100% and 133% of the federal poverty line receive affordable and comprehensive health coverage.

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

**Sponsor:** *Sen. Davis* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062726>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/20/2017 1:00 PM

**Final Status:** DEAD

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

## **LD 238 An Act To Amend the Maine Medical Use of Marijuana Act**

**Sponsor:** *Sen. Brakey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062797>

**MARIJUANA LEGALIZATION IMPLEMENTATION**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This concept draft bill proposes to amend the Maine Medical Use of Marijuana Act.

## **LD 249 An Act To Fund and Enhance the Maine Diversion Alert Program**

**Sponsor:** *Rep. Sherman* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062847>

**Appropriations & Financial Affairs**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

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

## **LD 265 An Act Concerning Screening of Newborns for Lysosomal Storage Disorders**

**Sponsor:** *Rep. Johansen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062869>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/22/2017 9:00 AM

**Final Status:** DEAD

This bill requires the Department of Health and Human Services to amend its rules in Chapter 283 relating to the newborn screening program by January 1, 2018 to add to the program the lysosomal storage disorders known as Krabbe, Pompe, Gaucher, Fabry and Niemann-Pick diseases. It directs the department to explore options to enter into contracts with other states to test samples collected for lysosomal storage disorders.

## **LD 273 An Act To Add an Exception to Prescription Monitoring Program Requirements**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062849>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/20/2017 1:00 PM

**Final Status:** PL 2017, CH 122

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. As enacted, this law expands the exception to include when a health care professional orders, prescribes or administers medication to a person suffering from pain associated with end-of-life, or hospice care.



## LD 284 An Act Concerning Notification after a Security Breach

**Sponsor:** *Rep. Stearns* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062882>

**Labor, Commerce, Research and Economic Development Committee Status:** DIV RPT  
**Public Hearing:** **Final Status:** DEAD

This bill shortens the time allowed for a delay in notification to residents of the State of a breach of the security of a system that contains computerized personal information from 7 business days to 3 business days after both the entity has completed its investigation and law enforcement agencies have decided that disclosure will not compromise any law enforcement investigation.

## LD 291 An Act To Maintain the Income Tax Rate on Persons with Taxable Income above \$200,000

**Sponsor:** *Rep. Campbell* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062893>

**Taxation Committee Status:** ONTP  
**Public Hearing:** 3/20/2017 1:00 PM **Final Status:** DEAD

This bill decreases the rate of tax imposed on the income of resident individuals on income in excess of \$200,000 from 7.15% to 4.15% in an attempt to undo the impact of the Question 2 citizen initiative.

## LD 302 An Act To Make Supplemental Appropriations and Allocations for the Expenditures of State Government and To Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Year Ending June 30, 2017

**Sponsor:** *Sen. Hamper* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062820>

**Appropriations & Fiscal Affairs Committee Status:**  
**Public Hearing:** **Final Status:** PL 2017 CH 2

Supplemental budget.

## LD 307 An Act To Facilitate the Implementation of Mobile Narcotic Treatment Programs in Rural Counties in the State

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062825>

**Health & Human Services Committee Status:** WDWL  
**Public Hearing:** 4/11/2017 2:30 PM **Final Status:** DEAD

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 310 An Act To Responsibly Implement an Adult Use Cannabis Program

**Sponsor:** *Sen. Brakey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062832>

**MARIJUANA LEGALIZATION IMPLEMENTATION Committee Status:** CO REQ  
**Public Hearing:** **Final Status:**

This bill is a concept draft that proposes to amend the provisions of the Marijuana Legalization Act, as enacted in Initiated Bill 2015, chapter 5.



## **LD 311 An Act To Eliminate Corporate Welfare and Provide Tax Relief**

**Sponsor:** *Sen. Brakey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062833>

**Taxation**

**Committee Status:** ONTP

**Public Hearing:** 2/27/2017 1:00 PM

**Final Status:** DEAD

This bill is a concept draft that bill proposes to eliminate certain corporate tax expenditures and use the savings to reduce the individual income tax rates.

## **LD 320 An Act To Provide MaineCare Coverage for Chiropractic Treatment**

**Sponsor:** *Sen. Libby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062900>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/21/2017 1:00 PM

**Final Status:** PTBE

This bill requires all chiropractic services that are approved by the Board of Chiropractic Licensure and performed by a chiropractic doctor to be reimbursed under the MaineCare program. The Department of Health and Human Services may adopt routine technical rules to implement this requirement.

## **LD 323 An Act To Fully Fund the Waiting List for the Home and Community Benefits for Members with Intellectual Disabilities or Autistic Disorder Waiver**

**Sponsor:** *Rep. Malaby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062904>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 4/3/2017 9:00 AM

**Final Status:** PTBE

This bill provides to the Department of Health and Human Services with \$36M in SFY 18 and \$48M in SFY 19 to fully fund the waiting list for community-based services provided under the MaineCare Benefits Manual, Chapters II and III, Section 21 relating to home and community benefits for members with intellectual disabilities or autistic disorder.

## **LD 337 An Act To Protect Jobs and the Maine Economy by Eliminating the 3% Income Tax Surcharge Imposed on Certain Mainers and the Fund To Advance Public Kindergarten to Grade 12 Education**

**Sponsor:** *Rep. Stetkis* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062969>

**Taxation**

**Committee Status:** DIV RPT

**Public Hearing:** 3/20/2017 1:00 PM

**Final Status:**

This bill repeals the provisions establishing the Fund to Advance Public Kindergarten to Grade 12 Education and the income tax surcharge of 3% imposed on taxable income of \$200,000 or more, which is the source of revenue for the fund.

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## LD 347 An Act To Support Death with Dignity

**Sponsor:** *Sen. Katz* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062961>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 4/5/2017 9:30 AM

**Final Status:** DEAD

This bill enacts a process for patient-directed care at the end of life for Maine residents who are adults who are terminally ill and who have been determined to have a limited life expectancy. The bill provides that such a patient has a right to information and includes requirements for patient and physician action and documentation in the patient's medical records of the steps taken. The bill authorizes a physician to prescribe a medication that the patient may self-administer for the purpose of hastening the patient's death. The bill provides protections for the physician, the patient's health care facility and health care providers. The bill protects the patient's life insurance and the health care providers' medical professional liability insurance. The bill protects the patient's right to palliative care. The bill requires rulemaking by the Department of Health and Human Services to provide for safe disposal of medications that are prescribed for end-of-life care and that are not used by the patient. The bill specifically states that nothing in the provisions of the bill may be construed to authorize a physician or other person to end a patient's life by lethal injection, mercy killing or active euthanasia. The bill specifically states that the provisions of the bill may not be construed to conflict with Section 1553 of the federal Patient Protection and Affordable Care Act, as amended by the federal Health Care and Education Reconciliation Act of 2010.

## LD 384 An Act To Strengthen Maine Children's Mental Health

**Sponsor:** *Sen. Millett* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280062996>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/7/2017 1:00 PM

**Final Status:**

This concept draft bill proposes to require MaineCare to cover mental health treatment for a child that uses evidence-based practices, to include meetings with the parent of the child without the child present as long as the meetings are focused on the goals of the treatment.

## LD 386 An Act To Establish Universal Health Care for Maine

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063002>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This concept draft bill proposes to establish a single-payor, universal health care system in the State. Portions of the system will be based on the single-payor system in place in Vermont and the single-payor proposals submitted previously in Maine and Colorado. The single-payor system proposed in this bill will also be responsive to any changes made on the federal level to the federal Affordable Care Act.

## LD 390 An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2018 and June 30, 2019

**Sponsor:** *Rep. Gattine* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063058>

**Appropriations & Financial Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:**

Biennial Budget



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**LD 401 An Act To Require Reimbursement to Hospitals for Patients Awaiting Placement in Nursing Facilities (MHA Bill)**

**Sponsor:** *Rep. Sirocki* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063083>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 3/29/2017 1:00 PM

**Final Status:** PTBE

This bill directs the Department of Health and Human Services to provide reimbursement to hospitals other than critical access hospitals for each day after the 10th day that a MaineCare-eligible individual is in the care of a hospital while awaiting placement in a nursing facility. The reimbursement is to be paid prospectively at the statewide average rate per MaineCare member day for nursing facility services. The department is directed to implement this reimbursement for days awaiting placement for a period limited to 5 years. Reimbursement is limited to a maximum of \$500,000 of combined General Fund funds and federal funds for each year of the 5-year period.

**LD 411 An Act To Add Addiction to or Dependency on Opiates or Prescription Drugs to the List of Qualifying Conditions for Medical Marijuana**

**Sponsor:** *Sen. Brakey* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063065>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

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

**LD 443 An Act To Allow Municipally Funded Hospitals To Prohibit the Presence of Firearms on Their Property**

**Sponsor:** *Sen. Davis* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063102>

**Criminal Justice & Public Safety**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill allows a municipally funded hospital to restrict the possession or use of firearms and firearms-related items on property used by the municipally funded hospital.



## LD 445 An Act To Encourage Maine Consumers To Comparison-shop for Certain Health Care Procedures and To Lower Health Care Costs

**Sponsor:** *Sen. Whittemore* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063105>

**Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 4/13/2017 1:00 PM

**Final Status:** PL 2017, CH 232

This is the so-called "right to shop" legislation.

This law requires carriers offering health plans in the State, beginning January 1, 2019, to establish a small group health plan design, for all small group health plans compatible with health savings accounts authorized under federal law, in which enrollees are directly incentivized to shop for comparable health care services from low-cost, high-quality providers. The law leaves it to carriers to craft the incentive.

The law defines "comparable health care service" as a nonemergency, outpatient health care service in the following 4 categories:

- physical and occupational therapy services;
- radiology and imaging services;
- laboratory services; and
- infusion therapy services.

The law requires the Superintendent of Insurance to study and evaluate the incentive programs used by carriers and report annually to the Legislature beginning March 1, 2020. These provisions are repealed on January 1, 2024. Beginning January 1, 2018, the law requires carriers to develop and make available a website and toll-free telephone number to allow enrollees to obtain information about estimated costs for obtaining comparable health care services from network providers. The amendment permits a carrier to direct enrollees to the publicly accessible health care costs website of the Maine Health Data Organization.

Beginning January 1, 2019, the law requires carriers upon request by an enrollee to apply the amount paid for a comparable health care service provided by an out-of-network provider toward the enrollee's member cost sharing as specified in the enrollee's health plan as if the health care services were provided by a network provider, as long as the cost of the out-of-network service is the same or less than the statewide average payment for the same service based on data reported on the publicly accessible health care costs website of the Maine Health Data Organization.

A carrier may use the average network price paid by the carrier in lieu of the statewide average payment for the same service based on data reported on the publicly accessible health care costs website of the Maine Health Data Organization. The law defines an out-of-network provider as a provider located in Maine, Massachusetts or New Hampshire that is enrolled in the MaineCare program as a provider and that participates in Medicare. This provision is repealed January 1, 2024.

The law also requires providers to notify patients of their right to obtain comparable health care services from a different provider at the time a provider makes a referral or recommendation for a comparable health care service during an in-person visit.

## LD 447 An Act To Coordinate Services and Support Workforce Development for Substance Use Disorder Prevention and Peer Recovery Services

**Sponsor:** *Sen. Maker* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063107>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:** DEAD

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.



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## **LD 453 Resolve, Regarding Insurance Coverage for Alternative Therapies for Addiction and Recovery**

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063113>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:** 3/2/2017 1:00 PM

**Final Status:**

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 before January 15, 2018.

## **LD 456 An Act To Increase Access to Vaccinations**

**Sponsor:** *Rep. Chace* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063149>

**Labor, Commerce, Research and Economic Development Committee Status:** APP TBL

**Public Hearing:** 3/7/2017 1:00 PM

**Final Status:**

This bill allows the administration of certain vaccines by a pharmacist to a person 11 years of age and older, instead of 18 years of age and older as in current law.

## **LD 470 An Act To Strengthen Maine's Hospitals and Increase Access to Health Care**

**Sponsor:** *Rep. Michael De* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063178>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill, a concept draft, is unclear in purpose. It says it would be contingent upon approval by the voters of the State at referendum. It would appear to be related to Medicaid expansion.

## **LD 479 An Act To Inform Patients of the Dangers of Addicting Opioids**

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063198>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 4/11/2017 2:30 PM

**Final Status:** PL 2017, CH 186

As enacted, the law requires health care entities that include prescribers of opioid medications to develop an opioid medication prescribing policy that includes risk assessment, informed consent and counseling on the risk of opioid use. The policy must be developed by January 1, 2018.

## **LD 482 An Act To Repeal the Maine Certificate of Need Act of 2002**

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063201>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/23/2017 1:30 PM

**Final Status:** DEAD

Under current law, before introducing additional health care services and procedures in a market area, a person must apply for and receive a certificate of need from the Department of Health and Human Services. This bill eliminates that requirement.



## LD 487 An Act To Promote Keeping Workers in Maine

**Sponsor:** *Rep. Schneck* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063206>

**Labor, Commerce, Research and Economic Development Committee Status:** DIV RPT

**Public Hearing:** **Final Status:** DEAD

This bill is a concept that proposes to regulate the use of so-called noncompete agreements, which are contracts entered into by an employee prohibiting the employee from working in the same or a similar profession within a time certain after leaving employment with the employer and within a specified geographical area. This bill would restrict the use of noncompete agreements by public and private employers.

## LD 502 An Act Regarding Hospital Charges and Statements

**Sponsor:** *Sen. Whittemore* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063185>

**Insurance & Financial Services Committee Status:** ONTP

**Public Hearing:** 4/13/2017 1:00 PM **Final Status:** DEAD

This bill prohibits a hospital from billing an uninsured patient or a patient not covered under a health plan operating under a network agreement between the hospital and the patient's health plan for any inpatient or outpatient service or procedure at a level that exceeds 120% of the average allowable reimbursement rate under Medicare for that service or procedure.

The bill requires a carrier to disclose to a prospective enrollee prior to enrollment if a health plan has a provider network that operates under a provider agreement between the participating provider and carrier that subjects an enrollee to the terms of the agreement upon enrollment and that requires reimbursement for any hospital inpatient and outpatient services and procedures at a level that exceeds 150% of the average allowable reimbursement rate under Medicare for that service or procedure.

For an enrollee enrolled in that type of health plan, a carrier may not deny the enrollee covered by a health plan the right to audit any hospital bill or explanation of benefits form.

## LD 503 An Act To Continue the Doctors for Maine's Future Scholarship Program

**Sponsor:** *Sen. Katz* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063187>

**Labor, Commerce, Research and Economic Development Committee Status:** APP TBL

**Public Hearing:** 3/21/2017 1:00 PM **Final Status:** PTBE

This bill is a concept draft that proposes to make a one-time General Fund appropriation of \$16 Million in fiscal year 2018-19 to the Finance Authority of Maine for the establishment of an endowment to continue the Doctors for Maine's Future Scholarship Program which provides 32 scholarships of \$25,000 each.

## LD 517 An Act To Amend Principles of Reimbursement for Nursing Facilities and for Residential Care Facilities

**Sponsor:** *Sen. Maker* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063230>

**Health & Human Services Committee Status:** APP TABLE

**Public Hearing:** 3/29/2017 1:00 PM **Final Status:** PTBE

This bill requires the Department of Health and Human Services to permit capital expenditures by residential care facilities for new construction, acquisitions and renovations that are less than \$2,000,000 and to provide reimbursement without prior approval. It requires the department to provide an extraordinary circumstance allowance in permitted reimbursement to residential care facilities. It provides that costs incurred by a residential care facility to comply with federal or state laws, regulations and rules are considered reasonable and necessary costs. It removes from current law on reimbursement for services provided by a nursing facility the \$10,000 cap for the cost of a medical director and instead requires the department to provide in its calculation of reimbursement for services the cost incurred by the nursing facility for the cost of a medical director.



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## LD 530 An Act To Ensure Medical Assessments for Youth in Foster Care"

**Sponsor:** *Rep. Hamann* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063253>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/22/2017 1:00 PM

**Final Status:** DEAD

This bill requires that, when a child is ordered into the custody of the Department of Health and Human Services, the department must provide to the foster home in which the child is placed an overview of the child's medical condition and the name and contact information of the child's health care provider at the time of placement. The bill also requires the department to ensure that a child receives an appointment for a medical examination within 3 working days of when the department's custody commences, instead of within 10 days as in current law, and requires that the department inform the foster parents of the appointment.

## LD 531 An Act Regarding the Drug Crisis and Ensuring Access to HIV Testing

**Sponsor:** *Rep. Fecteau* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063254>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/27/2017 1:00 PM

**Final Status:** DEAD

This bill requires a person 13 years of age or older who is receiving medical services in a hospital or from a primary care provider to be offered an HIV test unless that person is being treated for a life-threatening emergency, has previously been offered or been the subject of an HIV test or lacks the capacity to provide informed consent to an HIV test. This requirement is repealed January 1, 2030.

## LD 534 An Act To Amend the Laws Governing the Circumstances of Death That Must Be Reported to the Office of Chief Medical Examiner

**Sponsor:** *Rep. Moonen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063257>

**Judiciary**

**Committee Status:** OTP

**Public Hearing:** 3/16/2017 1:00 PM

**Final Status:** DEAD

This bill amends the law governing the Department of the Attorney General, Office of Chief Medical Examiner as follows.

1. It clarifies that, absent certain other circumstances, the fact that a patient dies within 24 hours of admission to a hospital or other health care facility need not be reported to the Office of Chief Medical Examiner.
2. It removes the requirement that deaths due to the consequences of long-term alcohol use be reported to the Office of Chief Medical Examiner.

## LD 538 An Act To Allow Advanced Practice Registered Nurses Who Have Attained Certain Degrees To Use the Title of Doctor

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063261>

**Labor, Commerce, Research and Economic Development Committee Status:** DIV RPT

**Public Hearing:** 3/21/2017 1:00 PM

**Final Status:** DEAD

Under this bill, an advanced practice registered nurse who has attained a doctor of nursing practice degree may use the prefix "Doctor" or "Dr." as long as the suffix "DNP" follows the person's name and an advanced practice registered nurse who has attained a doctor of philosophy in nursing degree may use the prefix "Doctor" or "Dr." as long as the suffix "Ph.D." follows the person's name.

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## **LD 550 An Act Requiring Communication of Mammographic Breast Density Information to Patients**

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063280>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/22/2017 9:00 AM

**Final Status:** DEAD

This bill requires mammography reports and other information provided to patients describing the results of a mammography to include information regarding breast density.

## **LD 551 An Act To Expand the Authority of Naturopathic Doctors To Prescribe Certain Medications**

**Sponsor:** *Rep. Casas* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063281>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/31/2017 9:30 AM

**Final Status:** DEAD

This bill is a concept draft. Under current law, a naturopathic doctor may prescribe nonprescription medications, homeopathic remedies, vitamins and minerals, hormones, local anesthesia and immunizations that are designated by rule by a subcommittee of the Board of Complementary Health Care Providers. This bill proposes to expand the authority of naturopathic doctors to prescribe certain naturally occurring medications.

## **LD 560 An Act To Amend the Laws Governing the Department of Health and Human Services**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063300>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill is a concept that proposes to amend the laws governing the Department of Health and Human Services.

## **LD 562 An Act Concerning the Department of Health and Human Services**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063302>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill is a concept draft that proposes to enact or amend laws or provide for the adoption or amendment of rules concerning the Department of Health and Human Services.

## **LD 565 An Act To Address Maine's Opiate Addiction Crisis**

**Sponsor:** *Sen. Chipman* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063295>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:**

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

## **LD 567 An Act To Ensure Timely Expenditure of Federal Funds in the Department of Health and Human Services**

**Sponsor:** *Rep. Parker* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063320>

**Health & Human Services**

**Committee Status:** ONPT

**Public Hearing:** 3/20/2017 9:30 AM

**Final Status:** DEAD

This bill requires the Department of Health and Human Services to spend federal funds within one year of receiving those funds except when the time frame for expenditure is specified otherwise by the Federal Government.



**LD 571 An Act To Eliminate the 3 Percent Surcharge on Certain Income and Provide an Alternative Funding Source for the Fund To Advance Public Kindergarten to Grade 12 Education**

**Sponsor:** *Sen. Dow* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063330>

**Taxation**

**Committee Status:** CO REQ

**Public Hearing:** 3/20/2017 1:00 PM

**Final Status:**

This bill is a concept draft that proposes to eliminate the 3% surcharge imposed on individual income over \$200,000, which is imposed to fund the Fund to Advance Public Kindergarten to Grade 12 Education. Instead, this bill would supplant the revenue from the surcharge with 2 alternate sources:

1. All of the revenue from the tax imposed on the sale of recreational marijuana products, except for the amount retained for training law enforcement personnel on marijuana-related laws and rules; and
2. All surplus revenue generated by growth in the Maine economy up to the amount needed by the State to meet its obligation of funding 55% of public education from kindergarten to grade 12.

**LD 572 An Act To Amend the Laws Governing the Practice of Pharmacy**

**Sponsor:** *Sen. Volk* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063331>

**Labor, Commerce, Research and Economic Development Committee Status:** DIV RPT

**Public Hearing:** 3/7/2017 1:00 PM

**Final Status:** DEAD

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

**LD 593 An Act To Update the Licensure Renewal Provision of the Board of Licensure in Medicine**

**Sponsor:** *Sen. Bellows* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063355>

**Labor, Commerce, Research and Economic Development Committee Status:** OTP

**Public Hearing:** 3/21/2017 1:00 PM

**Final Status:** PL 2017, CH 63

This law removes certain explicit notification requirements of the Board of Licensure in Medicine to a physician whose license is about to expire or has expired. This law allows the board to reinstate the license of a physician whose license has expired if, within 90 days following the expiration of the license, the physician pays a renewal fee and a late fee.

**LD 599 An Act To Prevent Violence against Emergency Responders**

**Sponsor:** *Rep. Ward* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063362>

**Criminal Justice & Public Safety**

**Committee Status:** ONTP

**Public Hearing:**

**Final Status:** DEAD

This bill increases the classification of the crimes of assault on an officer, assault on an emergency medical care provider and assault on a firefighter from Class C to Class B crimes. It also extends the application of the hate crime sentencing laws to a defendant who selects the person against whom a crime is committed because of that person's status as a law enforcement officer, emergency medical care provider or firefighter or who selects property to damage because of such status of the owner or occupant of that property.

**LD 605 An Act To Support Evidence-based Treatment for Opioid Use Disorder**

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063382>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:**

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 606 An Act To Ensure Access to All Prescription Drugs Containing Cannabidiol Approved by the Federal Food and Drug Administration**

**Sponsor:** *Rep. Austin* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063385>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/21/2017 1:00 PM

**Final Status:** DEAD

This bill states that a prescription medication containing cannabidiol that is approved by federal law or rule must be available in this State within 30 days of approval or publication in the Federal Register.

**LD 607 An Act To Enhance Maine's Coordinated Response to Mental Health Crises**

**Sponsor:** *Rep. Talbot Ros* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063389>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/2/2017 1:00 PM

**Final Status:** DEAD

This bill requires the Department of Health and Human Services to provide assistance to crisis intervention teams and agencies that provide mental health crisis services and to law enforcement agencies to enable them to coordinate mental health crisis services. The bill sets July 1, 2018 as the date by which a crisis intervention team or agency must enter into and sign a memorandum of understanding with each law enforcement agency that provides law enforcement services in the area of the State served by the crisis intervention team or agency.

**LD 610 An Act To Prohibit Prescriptive Property Rights Claims of Property Owned by Nonprofit Organizations**

**Sponsor:** *Rep. Hanley* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063395>

**Judiciary**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

This bill prohibits the acquisition of title to real estate or any interest in real estate against any nonprofit organization organized in this State by adverse possession, however exclusive or long continued.

**LD 615 Resolve, To Establish a Work Group To Update the Maine Pharmacy Act**

**Sponsor:** *Rep. Chace* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063365>

**Labor, Commerce, Research and Economic Development Committee Status:** ONTP

**Public Hearing:** 3/21/2017 1:00 PM

**Final Status:** DEAD

NOTE: DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION IS GOING TO UNDERTAKE THIS EFFORT WITHOUT LEGISLATION. This bill requires the Department of Professional and Financial Regulation, Maine Board of Pharmacy to convene a work group to propose updates to the Maine Pharmacy Act and submit a report to the Joint Standing Committee on Labor, Commerce, Research and Economic Development. The joint standing committee may report out a bill concerning the report to the Second Regular Session of the 128th Legislature.



## **LD 621 An Act To Retain Professionals and Attract Professionals to Maine by Amending Maine's Income Tax Code**

**Sponsor:** *Rep. Tipping* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063372>

**Taxation** **Committee Status:** ONTP  
**Public Hearing:** **Final Status:** DEAD

This bill is a concept draft that proposes to recruit and retain professionals in Maine by:

1. Creating or enhancing certain tax credits, such as the dental care access credit and the primary care access credit, which provide a tax credit for dentists and medical professionals practicing in an underserved area of the State; and
2. Creating or enhancing loan and loan forgiveness programs, such as the Educators for Maine Program and the Health Professions Loan Program, which provide loans to students in the areas of education or health who then agree to complete a certain length of service in Maine in return for forgiveness of those loans.

## **LD 627 An Act To Establish a Data Collection Program To Monitor Effects of Marijuana Regulation**

**Sponsor:** *Rep. Handy* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063381>

**Marijuana Legalization Implementation** **Committee Status:** CO REQ  
**Public Hearing:** **Final Status:**

This bill establishes a program in the Department of Health and Human Services, CDC to collect data for the purpose of monitoring the effect on the State from the legalization and regulation of retail marijuana. Reports must be published at least annually to provide data to the Legislature, the Governor's Office and appropriate state government departments overseeing the implementation of the retail marijuana laws to be used to inform needed adjustments, law changes and rule changes to minimize the financial and social costs to the people of this State.

## **LD 629 An Act To Improve Rehabilitation Services for Persons with Mental Illness in Maine**

**Sponsor:** *Rep. Fredette* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063384>

**Health & Human Services** **Committee Status:** ONTP  
**Public Hearing:** 5/2/2017 10:00 AM **Final Status:** DEAD

This bill makes occupational therapy services for persons with mental illness eligible for reimbursement under the MaineCare program.

## **LD 634 An Act Regarding the Drug Epidemic in Maine**

**Sponsor:** *Rep. Espling* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063393>

**Health & Human Services** **Committee Status:** ONTP  
**Public Hearing:** 4/28/2017 9:30 AM **Final Status:** DEAD

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.

## **LD 643 Resolve, Directing the Department of Health and Human Services To Increase Reimbursement Rates for Home-based and Community-based Services**

**Sponsor:** *Rep. Espling* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063507>

**Health & Human Services** **Committee Status:** APP TBL  
**Public Hearing:** 3/27/2017 9:30 AM **Final Status:**

This resolve directs the Department of Health and Human Services to increase reimbursement rates for home-based care services consistent with the recommendations made by Burns & Associates, Inc. in its report "Rate Review for Personal Care and Related Services: Final Rate Models" dated February 1, 2016. The first half of this increase was ratified by the 127th Legislature through Public Law 2015, chapter 267.



## LD 651 An Act To Expand Substance Abuse Prevention Projects

**Sponsor:** *Sen. Dion* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063444>

**Committee:** *Criminal Justice and Public Safety*

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

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 652 An Act To Provide Drug Price Relief

**Sponsor:** *Sen. Carpenter* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063445>

**Committee:** *Health & Human Services*

**Committee Status:** ONTP

**Public Hearing:** 4/24/2017 9:00 AM

**Final Status:** DEAD

This bill requires that the State and state agencies pay a price for prescription drugs that is the same as or lower than the lowest price paid by the United States Department of Veterans Affairs.

## LD 655 An Act To Lower the Price MaineCare Pays for Prescription Drugs

**Sponsor:** *Sen. Carpenter* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063448>

**Committee:** *Health & Human Services*

**Committee Status:** ONTP

**Public Hearing:** 4/24/2017 9:00 AM

**Final Status:** DEAD

This bill requires, unless prohibited by federal law, the Commissioner of Health and Human Services to negotiate the lowest purchase price for all prescription drugs for programs under MaineCare.

## LD 659 An Act To Amend the Maine Guaranteed Access Reinsurance Association Act

**Sponsor:** *Sen. Whittemore* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063452>

**Committee:** *Insurance & Financial Services*

**Committee Status:** OTPA

**Public Hearing:** 4/4/2017 1:00 PM

**Final Status:** PL 2017, CH 124

As enacted, this law extends the suspension of the operations of the Maine Guaranteed Access Reinsurance Association until December 31, 2023. The law also authorizes the Superintendent of Insurance to develop a proposal for an innovation waiver under Section 1332 of the federal Patient Protection and Affordable Care Act to facilitate the resumption of operations of the association and, if approved by the Governor, to apply for and implement a Section 1332 waiver. The suspension of the operations is continued until 2023 to reflect that innovation waivers are granted for 5-year terms.

## LD 666 An Act To Improve Access to Cost-effective Health Care Services

**Sponsor:** *Sen. Volk* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063459>

**Committee:** *Labor, Commerce, Research and Economic Development*

**Committee Status:** ONTP

**Public Hearing:** 4/13/2017 1:00 PM

**Final Status:** DEAD

This bill requires health insurance carriers to apply the amount paid for a health care service provided by an out-of-network provider toward the enrollee's member cost sharing as specified in the enrollee's health plan as if the health care services were provided by a network provider if the cost of the out-of-network service is the same or less than the statewide average payment for the same service based on data reported on the publicly accessible health care costs website of the Maine Health Data Organization.



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## LD 667 An Act To Repeal the Legalization of Recreational Marijuana

**Sponsor:** *Sen. Cyrway* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063460>

**Marijuana Legalization Implementation**

**Committee Status:** CO REQ

**Public Hearing:** 3/20/2017

**Final Status:**

This bill repeals the Marijuana Legalization Act, which allows the commercial cultivation, sale, purchase, manufacture, possession and use of marijuana and marijuana products and the personal cultivation, possession and use of marijuana and marijuana products, and the tax that is imposed on the sale of marijuana and marijuana products, if approved by the voters at a referendum held in November 2018. The bill also amends related provisions of law.

## LD 676 Resolve, To Study the Development of a Behavioral Health Unit at the Cumberland County Jail

**Sponsor:** *Rep. Farnsworth* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063552>

**Criminal Justice & Public Safety**

**Committee Status:** ONTP

**Public Hearing:** 4/5/2017 1:00 PM

**Final Status:** DEAD

This resolve directs the Department of Health and Human Services, the Department of Corrections and the Cumberland County Sheriff's Office to jointly study and recommend a proposal for the development of a behavioral health unit at the Cumberland County Jail to provide support such as substance abuse and mental health services and a diversion program to allow for the rehabilitation of prisoners with behavioral issues. This resolve directs the Department of Health and Human Services, the Department of Corrections and the Cumberland County Sheriff's Office to submit the results of the study along with recommendations to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Criminal Justice and Public Safety, who may report out legislation to the Second Regular Session of the 128th Legislature.

## LD 687 An Act Regarding Reimbursement for Speech and Language Pathology Services

**Sponsor:** *Rep. Farnsworth* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063521>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 3/20/2017 9:30 AM

**Final Status:**

This bill directs the Department of Health and Human Services to provide for reimbursement for all speech and language pathology services provided by an independent speech-language practitioner at the rate that is paid to a speech and hearing agency for the same services. It also directs the department to amend its rules to increase by 10% the rates of reimbursement for all speech and language pathology services.

## LD 688 An Act To Provide MaineCare Coverage for Music Therapy

**Sponsor:** *Rep. Hamann* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063522>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/20/2017 9:30 AM

**Final Status:** DEAD

This bill requires music therapy services to be reimbursed under the MaineCare program upon approval of coverage by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services. The Department of Health and Human Services is directed to adopt routine technical rules to implement this requirement.

## LD 691 An Act To Prevent Lead Poisoning in Children

**Sponsor:** *Rep. Golden* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063524>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill provides that as part of the Department of Health and Human Services' educational and publicity program concerning lead poisoning, the home visiting program established by the department is required to provide free home lead test kits to parents of young children living in homes built before 1978.



## **LD 696 An Act Regarding Insurance and Financial Services**

**Sponsor:** *Rep. Lawrence* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063483>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill is a concept draft that this bill proposes to improve the laws regarding insurance and financial services

## **LD 708 An Act To Use Taxes on Nonmedical Marijuana and Increase the Tax on Cigarettes To Partially Offset the 3% Income Tax Surcharge**

**Sponsor:** *Rep. Denno* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063554>

**Marijuana Legalization Committee**

**Committee Status:** ONTP

**Public Hearing:** 4/27/2017

**Final Status:** DEAD

This bill increases the sales tax on nonmedical marijuana from 10% to 15% and the tax on cigarettes from \$2.00 per pack of 20 cigarettes to \$2.50 per pack. The bill provides that revenue from these increases is deposited in the newly created Surcharge Relief Fund to be used to reduce the rate of the 3% surcharge on taxable income exceeding \$200,000. The bill contains an effective date of October 1, 2017.

## **LD 718 An Act To Reinstitute the Maine Health Exchange Advisory Committee**

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063542>

**Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/16/2017 1:00 PM

**Final Status:** DEAD

This bill establishes the Maine Health Exchange Advisory Committee on a permanent basis.

## **LD 720 An Act To Provide Lung Cancer Screening for MaineCare Recipients**

**Sponsor:** *Sen. Katz* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063543>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 3/24/2017 9:00 AM

**Final Status:** PTBE

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

## **LD 762 An Act To Allow a Percentage of Funds from the Medical Use of Marijuana Fund To Fund Health Care Research**

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063698>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill proposes to dedicate a percentage of the funds derived from the Medical Use of Marijuana Fund established in the Maine Revised Statutes, Title 22, section 2430 to a medical marijuana research fund. Under the bill, hospitals and other health care facilities may apply for grants to fund research proposals to study the medical efficacy of medical marijuana.

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**LD 764 An Act To Prohibit the Exclusion of a Patient from Eligibility for an Organ Transplant Based on Medical Marijuana Use**

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063702>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 217, CH 252

This law requires medical professionals who are reviewing a patient for suitability for receiving a transplant to treat the patient's use of marijuana as they would treat the patient's use of other medications.

**LD 766 Resolve, To Require the Department of Health and Human Services To Recalculate the MaineCare Reimbursement Rates for Services for Persons with Disabilities**

**Sponsor:** *Rep. Farnsworth* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063706>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:**

**Final Status:** PTBE

This resolve directs the Department of Health and Human Services no later than June 1, 2017 to amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Sections 13, 17, 21, 28, 29, 65 and 97 to increase reimbursement rates to reflect the increase in minimum wage pursuant to Initiated Bill 2015, chapter 2.

**LD 769 An Act To Eliminate Insurance Rating Based on Age, Geographic Location or Smoking History and To Reduce Rate Variability Due to Group Size**

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063710>

**Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/28/2017 1:00 PM

**Final Status:** DEAD

This bill prohibits insurance carriers providing individual health plans or small group health plans from varying premium rates based on age, geographic location or tobacco use on or after January 1, 2018. The bill also reduces the variation based on group size to 1.5 to 1 for small group plans over time.

**LD 801 An Act To Allow a Physical Therapist To Administer Certain Coagulation Tests in a Patient's Home**

**Sponsor:** *Rep. Mastraccio* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063734>

**Labor, Commerce, Research & Economic Development** **Committee Status:** OTPA

**Public Hearing:** 3/29/2017 10:00 AM

**Final Status:** PL 2017, CH 80

This bill authorizes a licensed physical therapist to perform finger stick blood testing in a person's home in order to collect a blood sample.



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## **LD 804 An Act To Establish Long-term Memory Care Facilities and To Provide Adequate Staffing and Reimbursement**

**Sponsor:** *Sen. Libby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063644>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 3/29/2017 1:00 PM

**Final Status:** DEAD

This bill requires the Department of Health and Human Services to provide long-term care services in memory care facilities to persons who qualify under the Maine Revised Statutes, Title 22, section 3174-G and require assistance with activities of daily living because of cognitive impairments by January 1, 2018 in accordance with standards established by the department through routine technical rulemaking. The rules must provide that memory care facilities that provide assistance with activities of daily living to persons with memory impairments are staffed at the following patient-to-staff ratios: on the day shift a ratio of 6 to 1; on the evening shift a ratio of 12 to 1; and on the night shift a ratio of 18 to 1. The rules must provide for rates of reimbursement for facilities that provide assistance with activities of daily living to persons with memory impairments at a level that is 50% above the rates of reimbursement provided for the highest level of private nonmedical institutions by MaineCare.

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

**Sponsor:** *Sen. Maker* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063656>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

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 817 An Act To Promote Early Detection of Breast Cancer**

**Sponsor:** *Sen. Breen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063661>

**Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 3/28/2017 1:00 PM

**Final Status:** DEAD

This bill requires health insurance carriers to provide coverage for a magnetic resonance imaging scan after a baseline mammogram examination if the mammogram demonstrates dense breast tissue.

## **LD 859 An Act To Ensure Thorough Investigation into Allegations of Sexual Assault**

**Sponsor:** *Rep. Bates* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063799>

**Criminal Justice & Public Safety**

**Committee Status:** ONPT

**Public Hearing:**

**Final Status:** DEAD

This bill requires the State Police to process a forensic examination kit within 180 days of receipt of a kit that has been used to obtain forensic evidence from an alleged victim of sexual assault or within 180 days of receipt of consent to analysis of that kit by the alleged victim of the sexual assault, whichever occurs later. The bill requires the State Police to conduct annual audits of forensic examination kits and to report to the general public and to the Legislature by July 1, 2018, and annually thereafter, regarding the status of analyses of forensic examination kits in the possession of the State Police.

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## LD 898 An Act To Address Mandatory Overtime for Hospital Professionals

**Sponsor:** *Sen. Mason* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063830>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill prohibits a hospital from requiring employees that provide direct patient care to work more than 12 hours in any 24-hour period. This requirement does not apply to physicians or in cases of a declared emergency. An aggrieved employee may file a complaint with the division of licensing and regulatory services within the Department of Health and Human Services, which must notify the hospital involved. Hospitals must report all instances of mandatory overtime work to the division, which must adopt rules regarding the manner and schedule for this reporting.

## LD 902 Resolve, To Increase Access to Evidence-based Psychosocial Treatment for Children in the MaineCare Program

**Sponsor:** *Rep. Malaby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063835>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 3/29/2017 3:00 PM

**Final Status:**

This resolve requires the Department of Health and Human Services to increase the MaineCare reimbursement rates for evidence-based outpatient psychosocial treatments for children to a rate that covers all costs involved with providing the service, including additional training, clears waiting lists and attracts providers to all areas of the State, including underserved rural areas. The resolve also requires the department to cover 2 additional evidence-based services known as trauma-focused cognitive behavioral therapy and parent management training programs through a request for proposals, using General Fund funds for training and hiring staff. The department and the contracted providers are required to develop a reimbursement rate for providing the service that is sufficient to allow the continued financial health of the service providers providing these therapies.

## LD 910 An Act To Encourage Living Kidney Donation in Maine

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063850>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 3/27/2017 1:00 PM

**Final Status:**

This bill directs the Department of Health and Human Services to establish a grant program to encourage living kidney donation that would provide donors up to \$5,000 to cover costs including lost wages that result from being a donor.

## LD 911 An Act To Prohibit Certain Gifts to Health Care Practitioners

**Sponsor:** *Rep. Hamann* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063851>

**Labor, Commerce, Research and Economic Development Committee Status:** OTPA

**Public Hearing:** 4/11/2017 1:00 PM

**Final Status:** PL 2017, CH 267

This law generally prohibits a licensed manufacturer or wholesaler of prescription drugs, or an agent of a licensed manufacturer or wholesaler of prescription drugs, from giving or offering to give gifts to an individual who is licensed, registered or otherwise authorized to prescribe and administer drugs in the course of professional practice. There are three exceptions:

1. Noncash gifts of minimal value that will directly benefit the prescriber's patients;
2. Funding to support the participation of health care students, residents and fellows in professional and educational meetings; and
3. Reasonable honoraria and payment for reasonable expenses of a practitioner at a professional or educational conference or meeting.

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## **LD 924 An Act Making Certain Supplemental Appropriations and Allocations and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government**

**Sponsor:** *Rep. Gattine* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063886>

**Appropriations & Financial Affairs**

**Committee Status:**

**Public Hearing:**

**Final Status:**

This is a concept draft supplemental budget for FY 2017.

## **LD 945 An Act To Reduce the Burden of Tobacco-related Illness by Increasing Revenue from the Cigarette Tax for Use for Tobacco Cessation**

**Sponsor:** *Rep. McCreight* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063908>

**Taxation**

**Committee Status:** DIV RPT

**Public Hearing:** 3/27/2017 1:00 PM

**Final Status:**

This bill increases the cigarette tax from \$2.00 to \$3.50 per pack of 20 cigarettes, beginning November 1, 2017. This bill also provides increased funding in the amount of \$8,100,000 per year in ongoing funding to the Maine Centers for Disease Control and Prevention for tobacco use prevention and cessation in order to align with United States Department of Health and Human Services, Centers for Disease Control and Prevention recommendations. Finally, this bill provides \$1,000,000 in fiscal year 2017-18 and \$750,000 thereafter for MaineCare members for tobacco cessation medications and counseling.

## **LD 949 An Act Regarding Telehealth**

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063874>

**Insurance & Financial Services**

**Committee Status:** APP TABLE

**Public Hearing:** 4/4/2017 1:00 PM

**Final Status:**

This bill does the following.

1. It provides immunity from liability to health care practitioners who voluntarily provide health care services through telehealth in the same manner as immunity is provided to health care practitioners who voluntarily provide health care services in person.
2. It requires insurers to provide professional liability insurance for health care services provided through telehealth services in the same manner as the coverage is provided through face-to-face contact between a health care practitioner and a patient.
3. It requires carriers that offer health plans in this State to provide coverage for health care services provided through telehealth services in the same manner as coverage is provided for services provided in person and sets forth certain standards for coverage of telehealth services.

## **LD 952 An Act To Ensure Access to Opiate Addiction Treatment in Maine**

**Sponsor:** *Sen. Woodsome* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063877>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:** PTBE

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.



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## LD 966 An Act To Create Mental Health Liaison Positions in Each County Jail

**Sponsor:** *Sen. Malaby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063935>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 3/31/2017 9:30 AM

**Final Status:**

This bill provides for a mental health liaison in each county or regional jail to oversee inmates with serious mental illness and connect them to the services for which they qualify, to work with the court system to ensure that they receive due process and speedy trials and to assist inmates who qualify for MaineCare to apply for and receive MaineCare benefits and services. This bill directs the Department of Health and Human Services to issue a request for proposals to private providers of behavioral health services and advocacy to replace intensive case manager positions within the department to staff the 15 mental health liaison positions in the county and regional jails.

## LD 985 An Act To Promote Medical Care for Visiting Athletic Teams

**Sponsor:** *Sen. Breen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280063961>

**Labor, Commerce, Research and Economic Development Committee Status:** OTPA

**Public Hearing:** 4/11/2017 1:00 PM

**Final Status:** PL 2017, Ch 119

This bill allows a person who holds a license to practice medicine and surgery or osteopathic medicine and surgery in another state who accompanies an athletic team from that state to provide medical services to members and supporting personnel of the team without a license from this State but restricts the person from providing medical services in a health care facility in the State.

## LD 998 An Act To Adequately Pay for Emergency Medical Services

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064000>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/21/2017 1:00 PM

**Final Status:** PTBA

This bill requires the Department of Health and Human Services to work with emergency medical services providers in the State to define, and provide reimbursement under MaineCare for, community paramedicine services that do not involve transporting patients. As amended, the bill would increase ambulance rates from 65 percent of MaineCare to 70 percent of MaineCare. It removes references to community paramedics.

## LD 1030 An Act To Require Nondiscrimination Policies in Providing Health Care Services

**Sponsor:** *Sen. Chenette* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064019>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/4/2017 1:00 PM

**Final Status:**

This bill prohibits health insurance carriers, automobile insurers and workers' compensation insurers from discriminating against health care providers who are licensed, registered or certified by the State in providing covered services as long as the providers are acting within the scope of their licenses, registrations or certifications. The bill also prohibits certain practices that may limit implementation of nondiscrimination policies.



## LD 1031 An Act To Establish Reasonable and Clinically Appropriate Exceptions to Opioid Medication Prescribing Limits

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064020>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/20/2017 1:00 PM

**Final Status:** PL 2017, CH 213

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.

The law makes the following changes to the laws relating to the Controlled Substances Prescription Monitoring Program and limits on opioid prescribing.

1. In the laws governing the Palliative Care and Quality of Life Interdisciplinary Advisory Council, it changes the definition of "palliative care" to clarify that palliative care does not always include a requirement for hospice care or attention to spiritual needs and includes chronic, unremitting or intractable pain such as neuropathic pain as an example of "serious illness."
2. It changes the definition of "dispenser" to remove health care professionals.
3. It removes the requirement to submit to the Department of Health and Human Services information regarding a controlled substance that is dispensed by a hospital emergency department for use during a period of 48 hours or less.
4. It adds to the list of individuals who can access the Controlled Substances Prescription Monitoring Program information the staff members of a group practice of prescribers who are authorized by a designated group practice leader, insofar as the information relates to a patient receiving care from that group practice.
5. It removes the requirement for a dispenser to notify the Controlled Substances Prescription Monitoring Program if the dispenser has reason to believe that a prescription is fraudulent or duplicative, maintaining the requirement that the dispenser contact the prescriber.
6. It clarifies that the requirement to check the Controlled Substances Prescription Monitoring Program does not apply for surgical procedures, rather than only inpatient surgery.
7. It clarifies that dispensing in connection with surgical procedures is exempt from the 100 morphine milligram equivalents limitation on opioids.
8. It clarifies that an opioid product that is labeled by the federal Food and Drug Administration to be dispensed only in a stock bottle that exceeds a 7-day supply may be prescribed as long as the amount dispensed does not exceed a 14-day supply.
9. It makes all rules related to the Controlled Substances Prescription Monitoring Program major substantive rules except that the Department of Health and Human Services is directed to adopt routine technical rules to conform to the changes in the definition of "dispenser" and the removal of the requirement of a pharmacist to notify the program when a prescription appears fraudulent or duplicative.

## LD 1032 An Act To Ensure Protection and Health Insurance of Patients

**Sponsor:** Sen. Gratwick <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064021>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/4/2017 1:00 PM

**Final Status:**

This bill is a concept draft that proposes to enact measures designed to ensure the protection and health insurance of patients.



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## LD 1039 An Act To Enhance Access to Affordable Health Care

**Sponsor:** <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064041>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This is the initiated bill that would expand Medicaid and will likely appear on the November ballot. It requires the State to provide federally approved Medicaid services through MaineCare to qualifying persons under 65 years of age with income equal to or below 133% plus 5% of the nonfarm income official poverty line.

The initiated bill requires DHHS to prepare and submit to the Federal Government any state plan amendments to implement the provisions of the initiated bill. The initiated bill requires monthly reporting by the department to the appropriate joint standing committees of the Legislature on the status of a state plan amendment submission until such an amendment is approved and reporting on the status of implementation of the expanded coverage under MaineCare and on the status of implementation and savings generated to state-funded programs as a result of the expanded coverage. It requires the Department of Administrative and Financial Services to report on revenues generated as a result of expanded coverage. It requires any savings to be transferred to the MaineCare Stabilization Fund prior to the end of fiscal year 2018-19. It requires the Office of Fiscal and Program Review to independently review these reports and report its findings to the appropriate joint standing committees of the Legislature.

## LD 1050 An Act To Protect the Safety of Emergency Medical Services Personnel and Patients

**Sponsor:** *Rep. Sheats* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064075>

**Criminal Justice & Public Safety**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

This bill authorizes a political subdivision of the State to adopt an order, ordinance, rule or regulation that prohibits a person from having a firearm in the person's possession while inside an emergency medical services vehicle that is owned or operated by or on behalf of the political subdivision.

## LD 1054 Resolve, To Expand Research To Fight Lyme Disease

**Sponsor:** *Rep. Fredette* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064079>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/3/2017 2:00 PM

**Final Status:** DEAD

This resolve, for the purpose of reducing the effects of Lyme disease, does the following:

1. It requires the Department of Inland Fisheries and Wildlife and the University of Maine to undertake a joint study into the effects of ticks and disease-infected ticks on the deer population and the effects of winter ticks on the moose population; and
2. It provides funding to the Department of Health and Human Services, Maine Center for Disease Control and Prevention for the Lyme and Vector-Borne Disease Laboratory in the Maine Medical Center Research Institute and the University of Maine for research and development to combat Lyme disease.

## LD 1063 An Act To Protect Substance-exposed Infants

**Sponsor:** *Rep. Hamann* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064095>

**Health & Human Services**

**Committee Status:** CARRY OVER

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:** CO

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

This bill proposes to enact measures designed to enhance the protection of substance-exposed infants, which may include prevention, intervention, identification of risk and treatment of prenatal substance exposure.



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## LD 1066 An Act To Promote Life with Dignity

**Sponsor:** *Rep. Parker* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064098>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/5/2017 9:30 AM

**Final Status:** DEAD

This bill enacts a process for patient-directed care at the end of life for Maine residents who are adults who are terminally ill and who have been determined to have a limited life expectancy. The bill provides that such a patient has a right to information and includes requirements for patient and physician action and documentation in the patient's medical records of the steps taken. The bill authorizes a physician to prescribe a medication that the patient may self-administer for the purpose of hastening the patient's death. The bill provides protections for the physician and the patient's health care facility and health care providers. The bill protects the patient's life insurance and the health care providers' medical professional liability insurance. The bill protects the patient's right to palliative care. The bill requires rulemaking by the Department of Health and Human Services to provide for safe disposal of medications that are prescribed for end-of-life care and that are not used by the patient. The bill specifically states that nothing in the provisions of the bill may be construed to authorize a physician or other person to end a patient's life by lethal injection, mercy killing or active euthanasia. The bill specifically states that the provisions of the bill may not be construed to conflict with Section 1553 of the ACA.

## LD 1108 An Act To Restore Public Health Nursing Services

**Sponsor:** *Sen. Carson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064160>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/13/2017 1:00 PM

**Final Status:**

This bill is emergency legislation that enumerates the types of nursing services that must be provided by the Public Health Nursing Program within the Department of Health and Human Services. It specifies required staffing in the program. It sets deadlines for staffing and requires the Public Health Nursing Program by September 1, 2017 and October 15, 2017 to report on progress in achieving full staffing. The bill requires the Health and Human Services Committee to conduct a review of public health nursing services including types of public health needs of persons who have recently moved to the State, services being provided to meet those needs and any unmet needs. The bill requires the committee to provide to the Legislature a written report of its findings and recommendations for any future action by January 1, 2018.

## LD 1112 An Act Regarding the Maternal and Infant Death Review Panel

**Sponsor:** *Sen. Keim* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064164>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 5/9/2017 1:00 PM

**Final Status:** PL 2017, CH 203

This law changes the maternal and infant death review panel to the maternal, fetal and infant mortality review panel. It provides that "director" in the laws governing the review panel refers to the medical director of the Maine Center for Disease Control and Prevention because of the recent reorganization of personnel within the center. It allows the panel coordinator of the review panel to obtain, without the individual's or family's consent, the health information of a woman who died during pregnancy or within 42 days of giving birth, a child who died within one year of birth or a mother of a child who died within one year of birth, including fetal deaths after 28 weeks of gestation. It provides that the review panel is required to meet at least twice per year.

## LD 1121 An Act Regarding the Exclusive Use of Tax Exempt Property

**Sponsor:** *Rep. Kinney* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064193>

**Taxation**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

This bill amends the exemption from property tax provided to benevolent and charitable incorporated institutions and to scientific and literary institutions to specify that the exemption does not apply to property that is used incidentally in the provision of goods, services or materials in exchange for any type of consideration.



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## **LD 1133 An Act Regarding Access to Appropriate Residential Services for Individuals Being Discharged from Psychiatric Hospitalization**

**Sponsor:** *Rep. McCreight* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064224>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 5/2/2017 1:00 PM

**Final Status:**

This bill provides that, if a patient in a hospital who received treatment for a psychiatric condition and who the hospital has determined is clinically ready for discharge requests admission or readmission from the hospital to a facility operated by a residential service provider and that request is denied, the residential service provider must provide the patient the reasons for the denial in writing no later than 3 business days after the request is denied.

The bill directs the Department of Health and Human Services to develop a standardized form for use by residential service providers to state the specific reasons for denial. A residential service provider must provide the standardized form to the patient or the patient's parent or guardian or designated representative. A residential service provider must annually send to the department's division of licensing and regulatory services a report of all patients who are denied admission or readmission and the reasons given the patients that were contained in the standardized forms.

The bill allows a patient or a patient's parent or guardian or designated representative to recover \$500 from a residential service provider that violates these provisions. It also provides for the revocation of the license of a residential service provider that violates these provisions 3 times or more in a calendar year.

## **LD 1134 An Act To Amend the Laws Governing Nursing Facilities To Permit Nurse Practitioners, Clinical Nurse Specialists and Physician Assistants To Perform Certain Physician Tasks**

**Sponsor:** *Rep. Stewart* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064225>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/21/2017 9:00 AM

**Final Status:** PL 2017, CH 145

As enacted, this law provides that, in accordance with federal regulations:

1. For nursing home residents receiving skilled nursing facility level services, a physician assistant, nurse practitioner or clinical nurse specialist may provide medically necessary visits, certifications and recertifications and required visits that alternate with those performed by a physician if delegated by a physician; and,
2. For nursing home residents receiving nursing facility level services, a physician assistant, nurse practitioner or clinical nurse specialist may perform any physician task.

## **LD 1159 An Act To Support Healthy Workplaces and Healthy Families by Providing Paid Sick Leave to Certain Employees**

**Sponsor:** *Sen. Millett* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064259>

**Labor, Research, Commerce and Economic Development Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

This bill creates a right to paid sick leave for employees not covered by a collective bargaining agreement who are employed by an employer that employs 50 or more employees. It also creates a right to unpaid sick leave for employees of an employer that employs fewer than 50 employees. This bill takes effect January 1, 2019.

## **LD 1162 An Act To Reduce the Incidence of Obesity and Chronic Disease in Maine**

**Sponsor:** *Sen. Libby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064262>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/14/2017 9:00 AM

**Final Status:**

This bill provides for reimbursement under the MaineCare program for medical nutritional therapy provided by physicians, licensed dietitians and dietitian nutritionists and reimbursement for obesity treatment medication.



## LD 1166 An Act Regarding Anesthesia Care in Rural Maine

**Sponsor:** *Sen. Cushing* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064269>

**Labor, Commerce, Research and Economic Development Committee Status:** OTP

**Public Hearing:** 4/11/2017 1:00 PM **Final Status:** PL 2017, 188

This bill permits certified registered nurse anesthetists in critical access hospitals and hospitals located in rural areas to conduct a preanesthetic assessment, verify informed consent, make indicated adjustments and corrections, order appropriate lab tests and diagnostic imaging tests and prescribe certain drugs

## LD 1189 An Act To Define the Age of Consent for Alcohol or Drug Treatment and Mental Health Services

**Sponsor:** *Rep. Pouliot* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064317>

**Health & Human Services Committee Status:** CO REQ

**Public Hearing:** 5/3/2017 1:00 PM **Final Status:**

Current law provides that a minor under 18 years of age may consent to treatment for abuse of alcohol or drugs or for emotional or psychological problems. This bill provides that a minor who is 14 years of age or older may consent to treatment for abuse of alcohol or drugs or for emotional or psychological problems and does not need the consent of a parent or guardian for such treatment. It also provides that if the parent or guardian consents to such treatment of a minor 14 years of age or older, the minor may not abrogate that consent and that if a minor 14 years of age or older consents to such treatment, a parent or guardian may not abrogate that consent.

## LD 1197 An Act to Support Substance Use Disorder Prevention, Treatment and Recovery

**Sponsor:** *Rep. Beebe-Cen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064325>

**Marijuana Legalization Implementation Committee Status:** CO REQ

**Public Hearing:** **Final Status:**

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.

## LD 1198 An Act To Enhance the Administration of the State's Group Health Plan

**Sponsor:** *Rep. Foley* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064334>

**Insurance & Financial Services Committee Status:** PTBE

**Public Hearing:** 4/18/2017 1:00 PM **Final Status:** PL 2017, CH 56

This law allows the term of the contract for the State's group health plan to be extended in one-year increments for up to 3 additional years.

## LD 1200 An Act Relating To the Licensure of Physicians and Surgeons

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064336>

**Labor, Commerce, Research & Economic Development Committee Status:** OTPA

**Public Hearing:** 4/11/2017 1:00 PM **Final Status:** PL 2017, CH 189

As enacted, this law prohibits the Board of Osteopathic Licensure and the Board of Licensure in Medicine from requiring a physician to obtain osteopathic continuous certification or maintenance of certification from a specialty medical board as a condition of initial licensure or license renewal. The enacted law does not have a provision related to physician reimbursement, physician employment and hospital admitting privileges.



## **LD 1212 An Act To Amend the Definition of "Eligible Business Equipment" for the Purposes of the Business Equipment Tax Exemption Program**

**Sponsor:** *Sen. Katz* <http://legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064355>

**Taxation**

**Committee Status:** APP TBL

**Public Hearing:** 4/19/2017 1:00 PM

**Final Status:**

This bill changes the statutory location of the tax exemption for personal property occupied or used solely for its own purposes by a hospital licensed by the Department of Health and Human Services, a health maintenance organization or a blood bank. This bill moves the exemption from the statutes regarding exemption of real and personal property, since the exemption no longer applies to real property, to the definition of "eligible business equipment" for the purposes of defining personal property that is exempt from property tax under the business equipment tax exemption, or "BETE," program. The property remains exempt from taxation; the purpose of the bill is to force the state to provide municipalities with a partial reimbursement for the lost tax revenue as the state does for all other exempt personal property.

## **LD 1219 An Act To Amend the Laws Governing Forensic Examination Kits**

**Sponsor:** <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064374>

**Criminal Justice and Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2017, CH 156

This bill amends laws governing forensic examination kits to provide for the kits to be used for testing in relation to alleged crimes other than gross sexual assault. Of interest to hospitals, the bill would establish that each kit's tracking number would be the number assigned to the kit by the manufacturer rather than the number assigned by the hospital or health care provider.

## **LD 1223 An Act To Facilitate the Continued Operation of the Department of Corrections Intensive Mental Health Unit**

**Sponsor:** *Sen. Rosen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064382>

**Criminal Justice & Public Safety**

**Committee Status:**

**Public Hearing:**

**Final Status:** PL 2017, CH 147

This law removes the provisions of law that on August 1, 2017 repeal provisions enacted in Public Law 2013, chapter 434 that enable the Department of Corrections to establish an intensive mental health unit, which provides services to the department's prisoners and to prisoners of jails, and that enable the department to obtain court orders for the involuntary medication of prisoners with mental illness.

## **LD 1273 Resolve, To Redispense Donated Prescription Drugs**

**Sponsor:** *Rep. Hymanson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064495>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/24/2017 9:00 AM

**Final Status:**

This resolve requires the Maine Board of Pharmacy to adopt rules to allow a nongovernmental organization in the State to coordinate both the donation of unused prescription drugs by nursing homes, hospitals, wholesalers and other institutional pharmacies and the subsequent redispensing of these prescription drugs at no cost to low-income residents of the State.

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## **LD 1274 An Act To Promote Universal Health Care, Including Dental, Vision and Hearing Care**

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064496>

**Insurance & Financial Services**

**Committee Status:** OTPA

**Public Hearing:** 5/4/2017 1:00 PM

**Final Status:**

This bill establishes a single-payer health care system in the State, effective July 1, 2020, that finances health care services for most Maine residents. The bill directs the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Insurance and Financial Services to jointly submit during the 2017 legislative interim legislation to fully implement the single-payer system.

## **LD 1279 An Act To Ensure Patient Protections in the Health Insurance Law**

**Sponsor:** *Sen. Jackson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064492>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:** 5/4/2017 1:00 PM

**Final Status:**

This bill allows children 26 years of age and younger to remain on their parents' health insurance policy. It clarifies that carriers offering individual or group health plans may not establish lifetime or annual limits on the dollar value of benefits. It clarifies that individual, group and blanket health plans may not impose a preexisting condition exclusion on any enrollee.

## **LD 1287 An Act To Strengthen Efforts To Recruit and Retain Primary Care Professionals and Dentists in Rural and Underserved Areas of the State**

**Sponsor:** *Sen. Jackson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064508>

**Taxation**

**Committee Status:** APP TABLE

**Public Hearing:**

**Final Status:** PTBE

This bill extends through 2026 the income tax credit for eligible dentists who practice in underserved areas. With respect to the primary care access credit, the bill increases the number of primary care professionals who practice in underserved areas who may be certified for the credit and allows the credit for primary care professionals to remain in effect beyond January 1, 2019.

## **LD 1300 An Act To Require a Prescription for a Medication That Contains Certain Substances That May Be Used To Make Methamphetamine**

**Sponsor:** *Rep. Cooper* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064523>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/3/2017 1:00 PM

**Final Status:** DEAD

This bill requires a prescription to possess any amount of ephedrine or pseudoephedrine. It removes references to ephedrine and pseudoephedrine from the laws governing over-the-counter sales of methamphetamine precursors.

## **LD 1303 An Act To Establish the Vaccine Consumer Protection Program within the Department of Health and Human Services**

**Sponsor:** *Rep. O'Connor* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064526>

**Health & Human Services**

**Committee Status:**

**Public Hearing:**

**Final Status:** DEAD

This bill establishes the Vaccine Consumer Protection Program within the Department of Health and Human Services and describes the services provided under the program. This bill also clarifies that a medical exemption from immunization for the purposes of school attendance is to be determined by the child's physician. This bill also removes the Commissioner of Education and the Department of Health and Human Services rule-making authority regarding the statutory immunization provisions and school and municipal authority to have more stringent immunization requirements than state law.

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## LD 1314 Resolve, To Improve Access to Neurobehavioral Services

**Sponsor:** *Rep. Malaby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064541>

**Health & Human Services**

**Committee Status:** APP TABLE

**Public Hearing:** 4/21/2017 9:00 AM

**Final Status:**

This resolve requires the Department of Health and Human Services to provide by September 1, 2018 16 new neurobehavioral beds in one or more neurobehavioral centers to serve individuals with significant behavioral challenges and complex medical needs who need short-term evaluation and treatment before transitioning to a long-term care environment either in the community or a long-term care facility.

## LD 1325 An Act Regarding Opioids and Palliative Care

**Sponsor:** *Rep. Brooks* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064569>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 4/20/2017 1:30 PM

**Final Status:** DEAD

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

## LD 1326 An Act To Reduce Morbidity and Mortality Related to Opioid Misuse

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064570>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 4/28/2017 9:00 AM

**Final Status:** DEAD

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 community-based drug prevention programs for each year of the current biennium

## LD 1327 An Act To Allow Former Military Medical Personnel To Perform Certain Medical Services

**Sponsor:** *Rep. Farrin* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064571>

**Labor, Commerce, Research and Economic Development Committee Status:** CO REQ

**Public Hearing:** 4/24/2017 10:00 AM

**Final Status:**

This bill allows a former United States Army medic, United States Air Force medical technician, United States Navy corpsman or United States Coast Guard health services technician to perform certain medical services under the supervision of a person holding a license to practice medicine, osteopathic medicine or podiatry or at a health care facility under a medical practice agreement approved by the respective licensing board.



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## LD 1359 An Act To Adopt the Interstate Medical Licensure Compact

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064625>

**Labor, Commerce, Research and Economic Development Committee Status:** OTPA

**Public Hearing:** 4/24/2017 10:00 AM **Final Status:** PL 2017, CH 253

This law enacts the Interstate Medical Licensure Compact. The compact provides a mechanism by which a physician licensed in one member state may apply for and receive an expedited license in another member state.

## LD 1363 Resolve, Regarding Legislative Review of Portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program and Prescription of Opioid Medications, a Late-filed Major Substantive Rule of the Department of Health and Human Services

**Sponsor:** *Emergency* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064631>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:** 4/20/2017 1:30 PM **Final Status:** RESOLVE 2017, CH 16

This law provides that the Department of Health and Human Services may finally adopt portions of Chapter 11: Rules Governing the Controlled Substances Prescription Monitoring Program and Prescription of Opioid Medications, a provisionally adopted major substantive rule that was filed outside the legislative rule acceptance period, only if the rule is modified.

The first required modification is to the routine technical portions of the rule establishing Exemption Code A for active and aftercare cancer treatment. The exemption code in the rule must be amended to remove the 6-month limit for aftercare cancer treatment post remission.

The 2nd required modification is to the routine technical portions of the rule establishing Exemption Code H for circumstances when an individual is prescribed a 2nd opioid after proving unable to tolerate a first opioid. The exemption code in the rule must be amended so that the individual is not required to return the initial prescription to a pharmacy for collection prior to dispensation of the 2nd prescription. The department must recommend to dispensers that patients are provided with guidance on proper disposal of the first opioid prescription.

The 3rd required modification is to allow for dispensers to provide an early refill of a prescription before the refill date if, in the judgment of the dispenser, the early refill does not represent a pattern of early refill requests by the individual.

The 4th required modification is to allow for dispensers to contact prescribers by telephone to verify and document information about prescriptions.

The 5th required modification is to establish a process for a dispenser who receives a prescription for an opioid medication from an out-of-state prescriber that does not comply with department rules. The dispenser may fill the prescription if the dispenser records an oral confirmation with the validity of the prescription from the out-of-state prescriber and documents any missing information such as diagnosis code, exemption code and acute or chronic pain notation and the dispenser makes a reasonable effort to determine that the oral confirmation came from the prescriber or prescriber's agent, which may include a telephone call to the prescriber's telephone number listed in a telephone directory or other directory.

The 6th required modification is to delay the requirement for dispensers to provide information to the Prescription Monitoring Program on the exemption code and ICD-10 code until July 1, 2018 and allow the Department of Health and Human Services to approve waivers after July 1, 2018 for dispensers who are unable with good cause to comply with the requirement.

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## LD 1385 An Act Governing Direct Primary Care Membership Agreements

**Sponsor:** *Sen. Whittemore* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064643>

**Insurance & Financial Services**

**Committee Status:** DIV RPT

**Public Hearing:** 5/4/2017 1:00 PM

**Final Status:** PL 2017, CH 112

This bill provides that nothing in state law may be construed as prohibiting a patient or legal representative of a patient from seeking care outside of an insurance plan or outside of the Medicaid or Medicare program and paying for such care. It also provides that nothing in state law may be construed as prohibiting a physician, other medical professional or a medical facility from accepting payment for services or medical products outside of an insurance plan. It provides that a direct primary care membership agreement not insurance and is not subject to regulation by the Department of Professional and Financial Regulation, Bureau of Insurance. A direct primary care membership agreement is defined as a contract between a direct primary care provider and an individual patient or legal representative of a patient in which the provider agrees to provide primary care services to the individual patient for an agreed-to fee over an agreed-to period of time, the provider agrees not to bill 3rd parties on a fee-for-service basis and any per-visit charges under the agreement are less than the monthly equivalent of the provider fee.

## LD 1388 An Act To Prohibit the Falsification of Medical Records

**Sponsor:** *Sen. Rosen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064646>

**Criminal Justice & Public Safety**

**Committee Status:** APP TBL

**Public Hearing:**

**Final Status:** PTBE

This bill provides that the falsification of health care records maintained by a health care provider with the intent to deceive another person is a Class D crime except that it is a Class C crime if any reliance on the falsification causes bodily injury or the impairment of a person's mental or behavioral condition.

## LD 1406 An Act To Promote Prescription Drug Price Transparency

**Sponsor:** *Sen. Vitelli* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064710>

**Judiciary**

**Committee Status:** CO REQ

**Public Hearing:** 5/16/2017 1:00 PM

**Final Status:**

This bill amends the law governing profiteering in prescription drugs. The bill requires more disclosure of drug production, research and development costs, marketing and advertising costs and actual costs paid upon purchase. The bill allows investigations by the Attorney General of violations of these provisions. The bill adds a required written report from the Attorney General each year.

## LD 1407 An Act Regarding Prescription Drug Step Therapy

**Sponsor:** *Sen. Rosen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064713>

**Insurance & Financial Services**

**Committee Status:** APP TBL

**Public Hearing:** 4/25/2017 1:00 PM

**Final Status:** PTBE

This bill requires health insurers to establish a process for prescription drug step therapy override exception determinations.

## LD 1410 An Act To Adopt the Nurse Licensure Compact

**Sponsor:** *Sen. Volk* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064735>

**Labor, Commerce, Research and Economic Development**

**Committee Status:** OTPA

**Public Hearing:** 5/9/2017 1:00 PM

**Final Status:** PL 2017, CH 258

This law adopts the model act for the multistate nurse licensure compact endorsed by the National Council of State Boards of Nursing and adds a federal fingerprint background check for new licensees as required by the compact. Maine has been a participant in the compact for many years and needed to enact statutory changes to remain in the compact.



## **LD 1417 An Act To Require Insurance Coverage for the Diagnosis and Treatment of Lyme Disease**

**Sponsor:** *Rep. Fredette* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064748>

**Insurance & Financial Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/25/2017 1:00 PM

**Final Status:**

This bill requires a carrier offering or renewing a health plan in the State to provide coverage to diagnose and treat Lyme disease.

## **LD 1424 An Act To Amend the Laws Governing MaineCare Eligibility Determination For Applicants To Nursing Homes**

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064761>

**Health & Human Services**

**Committee Status:** ONPT

**Public Hearing:** 5/1/2017 1:30 PM

**Final Status:** DEAD

This bill amends the laws governing MaineCare eligibility determinations for applicants to nursing homes. It directs the Department of Health and Human Services to provide timely and adequate notice to both the applicant and the facility in which the individual resides or seeks to reside if the department is unable to make a decision of eligibility due to inconclusive or conflicting information or other deficiencies in the application and requires the department to notify the applicant and the affected facility of the additional information required. It requires that the provision of copies of all communications be timely provided to the facility as well as the applicant, and that the applicant be provided a reasonable amount of time to respond and provide information. It directs the department to extend the time frame for responses in appropriate circumstances. If an application is denied and if necessary information is later provided, the additional information must be used to update and supplement the prior application, and the applicant need not submit a new application.

The bill also requires the department to provide timely advance notice of reviews for annual determinations and other periodic redeterminations of MaineCare eligibility to a MaineCare recipient and the facility in which the recipient resides or seeks to reside. The bill requires the department to provide to the recipient and the facility in which the recipient resides or seeks to reside copies of communications.

## **LD 1427 An Act To Make Community Paramedicine Projects Permanent**

**Sponsor:** *Rep. Gerrish* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064777>

**Criminal Justice and Public Safety**

**Committee Status:** OTPA

**Public Hearing:** 5/1/2017

**Final Status:** PL 2017, CH 276

This Act makes community paramedicine pilot projects established by the Emergency Medical Services' Board permanent. The law also prohibits the use of state funds to fund community paramedicine projects.

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## **LD 1430 An Act To Develop a Statewide Resource and Referral Center and Develop Hub-and-spoke Models To Improve Access, Treatment and Recovery for Those with Substance Use Disorder**

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064780>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 4/28/2017 9:30 AM

**Final Status:**

This bill establishes a statewide resource and referral center for individuals with substance use disorders and friends and family members of individuals with substance use disorders, law enforcement and providers of substance abuse treatment. It requires the Department of Health and Human Services to contract with evidence-based substance abuse treatment providers across the State to provide integrated medication-assisted treatment to individuals with substance use disorders. Hubs provide comprehensive services for acute needs, and spokes are primary care facilities that offer behavioral health services or are connected to providers of those services. The Department of Health and Human Services is directed to fund treatment for individuals without insurance and develop a rate of reimbursement that takes into account the multiple parts of treatment an individual with a substance use disorder requires in addition to medication. The Department of Labor is directed to develop a career center program to assist individuals in treatment for substance use disorders or in recovery with career planning and taking advantage of employment opportunities. The Department of Health and Human Services is directed to develop assessment measures to evaluate performance and present a report on progress, implementation and assessment to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 1, 2020.

## **LD 1435 An Act To Ensure Transparency in the Distribution of Federal Block Grant Funds**

**Sponsor:** *Rep. Jorgensen* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064809>

**Health & Human Services**

**Committee Status:** CO REQ

**Public Hearing:** 5/8/2017 1:00 PM

**Final Status:**

This bill requires the Department of Health and Human Services annually to develop and submit to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs proposed plans for expenditures of federal block grant funds including a description of current expenditures of federal block grant funds and how the department proposes to change any expenditure. Under the bill, the department may not make an expenditure from any federal block grant unless the expenditure is recommended by the joint standing committee and approved by the Legislature. When the Legislature is not in session, the department may make an expenditure if the Commissioner of Health and Human Services determines that the expenditure is necessary to avert an emergency and provides 60 days' notice to the joint standing committee.

## **LD 1436 Resolve, To Reduce MaineCare Spending through Targeted Nutrition Interventions**

**Sponsor:** *Rep. Hamann* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064810>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:**

**Final Status:** DEAD

This resolve directs the Department of Health and Human Services to file an application with the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services for a demonstration waiver to allow for reimbursement of medically tailored food and nutrition interventions when a health care provider determines that certain elements of nutrition or foods based upon a nutrition plan developed by a licensed dietitian are necessary for a patient's health. This resolve also directs the Department of Health and Human Services to file the application by October 1, 2017 with the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to request that home-delivered meals be reimbursable under MaineCare as directed by Resolve 2015, chapter 54.



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## LD 1496 An Act To Clarify the Scope of the Maternal and Infant Death Review Panel

**Sponsor:** *Rep. Sanderson* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280064958>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2017 1:00 PM

**Final Status:** DEAD

This bill changes the name of the maternal and infant death review panel to the maternal, fetal and infant mortality review panel and allows the panel coordinator access to medical records for the purposes of conducting a review without having to obtain permission in all cases.

## LD 1517 An Act To Ensure Access to Behavioral Health Services

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065008>

**Health & Human Services**

**Committee Status:** APP TBL

**Public Hearing:** 5/5/2017 2:30 PM

**Final Status:**

This bill establishes the Behavioral Health Oversight Council to review reimbursement rate-setting for certain behavioral health services provided under MaineCare and advise the Commissioner of Health and Human Services, the Commissioner of Corrections and the Commissioner of Public Safety regarding the behavioral health system in the State. It sets out requirements for reimbursement rate-setting to be used by the Department of Health and Human Services to determine rates for certain behavioral health services provided under MaineCare. It directs the Department of Health and Human Services to amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Sections 13, 17, 23, 28, 65 and 97 to increase reimbursement rates by fiscal year 2018-19 to reflect a 20% increase from rates in fiscal year 2008-09.

## LD 1521 An Act To Amend the Property Tax Laws

**Sponsor:** *Rep. Hilliard* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065012>

**Taxation**

**Committee Status:** DIV RPT

**Public Hearing:** 5/9/2017 2:00 PM

**Final Status:** DEAD

Part B expands the authorization for municipal assessment of service charges for certain municipal costs against certain property exempt from property tax to remove the exemption for student housing and parsonages and to remove the limit on application of the charge to residential property used for rental income. The service charges may be levied only against an owner that has total real estate assets in the municipality with an assessed value of \$10,000,000 or more. The existing cap of 2% of the gross annual revenues of the institution or organization is retained.

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**LD 1527 An Act To Ensure Safety, Quality and Transparency in the Medical Marijuana Market and To Ensure Sufficient Funding for Regulation and Enforcement with Respect to the Retail Marijuana Industry**

**Sponsor:** *Rep. Perry* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065023>

**Health & Human Services**

**Committee Status:** OTPA

**Public Hearing:**

**Final Status:**

This bill amends the Maine Medical Use of Marijuana Act in the following ways.

1. It imposes mandatory testing, labeling and record-keeping requirements on registered dispensaries. It provides that registered dispensaries are subject to inspection by the local fire department, building inspector or code enforcement officer to confirm that no health or safety concerns are present and that local health and safety ordinances apply to registered dispensaries.
2. It imposes mandatory testing, labeling and record-keeping requirements on registered primary caregivers. It provides that registered primary caregivers are subject to inspection by the Department of Health and Human Services to ensure regulatory compliance. It provides that registered primary caregivers are subject to inspection by the local fire department, building inspector or code enforcement officer to confirm that no health or safety concerns are present and that local health and safety ordinances apply to registered primary caregivers.
3. It provides that mandatory testing of medical marijuana and medical marijuana products may be conducted by testing facilities licensed under either the Maine Medical Use of Marijuana Act or the Marijuana Legalization Act.
4. It imposes a special tax of 20% on retail marijuana and retail marijuana products sold by retail marijuana stores and retail marijuana social clubs to ensure that the tax revenue generated is sufficient to fund enforcement and regulation with respect to the retail marijuana industry. It also provides that in addition to this special tax, retail marijuana and retail marijuana products are subject to the state sales tax.



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## LD 1544 An Act To Update the Maine Insurance Code To Maintain Conformance with Uniform National Standards

**Sponsor:** Rep. Whittemore <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065067>

**Insurance & Financial Services**

**Committee Status:** OTP

**Public Hearing:** 5/10/2017 10:00 AM

**Final Status:** PL 2017, CH 169

This bill updates several provisions of the Maine Insurance Code to incorporate recent amendments to model laws adopted by the National Association of Insurance Commissioners, or NAIC, and makes related technical changes. These amendments maintain the State's compliance with uniform financial solvency standards and with the NAIC's accreditation requirements for state insurance regulators.

Part A enhances regulatory oversight and complies with NAIC accreditation requirements by requiring domestic insurance carriers to file corporate governance annual disclosure reports and clarifying the filing requirement for quarterly financial statements. Part A also updates the procedures for examinations and holding company supervision for health maintenance organizations, updates other financial reporting laws to conform to current requirements and clarifies the applicability of statutory accounting principles to nonprofit hospital and medical service organizations.

Part B facilitates coordinated regulatory action and complies with NAIC accreditation requirements by incorporating a group supervision framework. It amends the law regarding Maine insurance holding companies and examination laws to update obsolete references to the former NAIC Examiners' Handbook. It clarifies the Superintendent of Insurance's ability to hire examiners with any necessary credentials. It resolves inconsistencies in the criminal conviction reporting requirements and clarifies that dividend payments and affiliate transactions are aggregated over any consecutive 12-month period for purposes of applying statutory materiality thresholds.

Part C amends the law regarding credit for reinsurance to allow the Superintendent of Insurance to waive certain requirements and to incorporate the recently developed framework establishing uniform minimum collateral requirements for reserve financing transactions.

Part D corrects a conflict between state and federal insolvency laws and clarifies the priority of secured claims and federal claims.

Part E updates the Maine Business Transacted with Broker-Controlled Insurer Act to conform it to the current NAIC model act and comply with NAIC accreditation requirements. It corrects an inconsistency by clarifying the law's applicability to domestic risk retention groups, and it replaces obsolete references to "brokers" with references to "producers." Part E also clarifies a definition of "licensed insurer," amends the disclosure section to treat the producer rather than the insurer as the controlling party, removes superfluous enforcement language and repeals an obsolete transition clause.

Part F makes technical corrections to the risk-based capital standards laws to address issues identified during the most recent Bureau of Insurance accreditation review. These amendments codify current practice and maintain compliance with NAIC accreditation requirements, clarifying that the solvent run-off exception to mandatory control does not apply to health insurers, clarifying that confidential risk-based capital information may be shared with other public officials and agencies on the same basis as other confidential regulatory information, providing that risk-based capital information may not be used for rate-making purposes except to the extent that ratemaking and related activities are part of a corrective action for a risk-based capital impaired insurer and clarifying that the corrective action plan requirements for foreign insurers apply at all action levels.

Part G updates the captive insurance companies laws to respond to emerging regulatory issues and to make technical corrections. It clarifies the definitions of "controlled unaffiliated business" and "pure nonprofit captive insurance company" and clarifies that a captive insurance company's license application's supporting documents must include a plan of operation and that the additional supporting documents required for sponsored captive insurers are subject to the same confidentiality provisions as the other supporting documents. It corrects obsolete references to manager-managed limited liability companies and updates the reporting provisions for association and industrial captive insurers consistent with Part A of the bill. It provides that statutory rather than generally accepted accounting principles audits are to be filed when the captive insurer uses statutory accounting principles as its general basis of accounting, requires a sponsored captive insurer's plan of operation to specify how assets and liabilities are attributed between the protected cells and the general account and clarifies that a sponsored captive insurer's obligations to reinsurers follow the reinsured participant and not the general account.



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## LD 1545 An Act Regarding Disclosure of Health Care Information of a Deceased Person

**Sponsor:** *Sen. Libby* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065068>

**Health & Human Services** **Committee Status:** ONTP  
**Public Hearing:** 5/9/2017 3:00 PM **Final Status:** DEAD

This bill requires a health care practitioner or facility to provide health care information of a deceased person to an immediate family member upon request of the family member, including the parent or guardian of a minor child of the deceased when there is documented need for parental medical history for the health and well-being of that minor child

## LD 1546 An Act To Clarify the Language Defining Schedule W Drugs and To Add Drugs to the List of Schedule W Drugs

**Sponsor:** *Sen. Cyrway* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065071>

**Criminal Justice & Public Safety** **Committee Status:** DIV RPT  
**Public Hearing:** 5/10/2017 9:00 AM **Final Status:** PL 2017, CH 274

This law clarifies that any compound, mixture or preparation containing narcotic drugs in any quantity is a schedule W drug unless listed or described in another schedule. The bill adds, U-47700, W-18, W-15, AH-7921, despropionyl fentanyl, furanylfentanyl and fluorofentanyl to the list of schedule W drugs.

## LD 1556 An Act To Protect Children from Prenatal Drug and Alcohol Exposure

**Sponsor:** *Rep. Head* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065118>

**Health & Human Services** **Committee Status:**  
**Public Hearing:** 5/8/2017 3:00 PM **Final Status:** DEAD

Currently, certain mandated reporters of child abuse are required to report to the Department of Health and Human Services when they know or suspect that an infant had been exposed to drugs or alcohol prior to birth. This bill extends that mandate to all mandated reporters of child abuse, adds substance abuse addiction treatment providers to the list of mandated reporters and requires all mandated reporters to report to the Department of Health and Human Services not only after the birth of an infant but when they know of or suspect substance abuse by a woman during her pregnancy.

## LD 1557 An Act To Protect Maine Consumers from Unexpected Medical Bills

**Sponsor:** *Rep. Grohman* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065119>

**Insurance & Financial Services** **Committee Status:** OTPA  
**Public Hearing:** 5/10/2017 1:00 PM **Final Status:** PL 2017, CH 218

As enacted, the law provides that a carrier shall require an enrollee that receives a surprise bill from an out-of-network provider to pay only the applicable cost-sharing coinsurance, copayment, deductible or other out-of-pocket expense that would be imposed for the health care services if the services were rendered by a network provider.

The amendment also sets the reimbursement rate for that out-of-network provider at the average network rate under the enrollee's health plan unless the carrier and out-of-network provider agree otherwise.

If an out-of-network provider is reimbursed by the carrier, the provider may not balance bill the enrollee for any amount beyond the enrollee's applicable cost sharing.

Under the law, "surprise bill" means a bill for health care services, other than emergency services, received by an enrollee for services rendered by an out-of-network provider, when the services were rendered by the out-of-network provider at a network provider, during a service or procedure performed by a network provider or during a service or procedure previously approved or authorized by the carrier and the enrollee did not knowingly elect to obtain such services from the out-of-network provider.

The law also requires health carriers to make available provider directories. It provides discretion to the Superintendent of Insurance to determine if rulemaking is necessary. Effective date of January 1, 2018.



## LD 1563 Resolve, To Establish the Maine Health Advisory Committee

**Sponsor:** *Sen. Gratwick* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065127>

**Health & Human Services**

**Committee Status:** ONTP

**Public Hearing:** 5/9/2017 3:00 PM

**Final Status:** DEAD

This resolve establishes the Maine Health Advisory Committee. The duties of the Committee include, the study health care issues, including but not limited to the issues of quality, affordability and accessibility of health care throughout the State; the prevention of illness; fairness and equity of health care delivery and accessibility in different geographic regions of the State; various funding options; and methods of cost containment. Through the use of public meetings, questionnaires, polling and other sampling techniques, the advisory committee shall solicit information and concerns from the public. The advisory committee shall review strategies employed by other states and, based on the information it gathers, shall develop recommendations to present to the Legislature regarding the delivery and financing of health care in the State.

## LD 1566 An Act To Enact the Maine Fair Chance Employment Act

**Sponsor:** *Rep. Talbot-Ros* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065136>

**Labor, Commerce, Research & Economic Development Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill enacts the Maine Fair Chance Employment Act and adds restrictions to the use of criminal history information in the context of employment decisions by private employers and the State and its political subdivisions and of licensing decisions by licensing agencies.

It prohibits an employer from asking an applicant for employment to disclose information concerning the applicant's criminal history, or considering such information, until after the applicant has received a conditional offer of employment. It restricts the way a private employer, or the State and its political subdivisions, may use criminal history information in the course of making employment decisions and adds similar restrictions to the existing restrictions applicable to licensing agencies' consideration of criminal history information. It also makes certain criminal history information in the possession of the State and its political subdivisions confidential and makes all criminal background check information obtained by the State in connection with an employment decision confidential.

The bill also contains enforcement provisions including via the Human Rights Commission and private rights of action.

## LD 1587 An Act To Provide Economic Security to Maine Families through the Creation of a Paid Family Medical Leave System

**Sponsor:** *Rep. Herbig* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065254>

**Labor, Commerce, Research & Economic Development Committee Status:** CO REQ

**Public Hearing:**

**Final Status:**

This bill creates a paid family medical leave program, patterned after the unpaid family medical leave program existing in current law but requiring a contribution from an eligible employee, or a self-employed person on a voluntary basis, of no more than 0.5% of the employee's or self-employed person's wages or earnings. The program requires employers to deduct the contributions from employee paychecks and for the employers and self-employed persons to submit contributions to the Department of Labor, Bureau of Unemployment Compensation, which is charged with administering the program. The program pays benefits of up to 66% of an employee's wages or self-employed person's earnings capped at the same maximum amount as unemployment benefits for leave taken by the employee or self-employed person for various family-related medical issues. This bill makes participation optional for employers that employ fewer than 15 employees. This bill also directs the Department of Labor to develop an implementation plan dealing with staffing, technology, start-up expense, rulemaking and scheduling to begin the program on its effective date of October 1, 2019.



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## **LD 1592 An Act To Remove Barriers to Professional Licensing for Veterans**

**Sponsor:** *Rep. Golden* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065286>

**Labor, Commerce, Research & Economic Development Committee Status:** OTPA

**Public Hearing:** 5/16/2017 2:30 PM **Final Status:** PL 2017 CH 173

This bill grants the Director of the Office of Professional and Occupational Regulation within the Department of Professional and Financial Regulation the authority to modify licensing requirements of professional licensing boards administered by the Office of Professional and Occupational Regulation on a case-by-case basis for applicants for licensure who are military veterans.

## **LD 1594 An Act Regarding the Dispensing of Naloxone Hydrochloride by Pharmacists**

**Sponsor:** *Rep. Vachon* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065320>

**Labor, Commerce, Research & Economic Development Committee Status:** DIV RPT

**Public Hearing:** **Final Status:** PL 2017, CH 249

This emergency law provides that a pharmacist may prescribe and dispense naloxone hydrochloride in accordance with rules to be adopted by the Board of Pharmacy.

## **LD 1600 An Act To Establish an Opioid Addiction Prevention and Rehabilitation Treatment Program Funded by a Tax Imposed upon the Sale of Opioids**

**Sponsor:** *Rep. O'Neill* <http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065337>

**Taxation Committee Status:** DIV RPT

**Public Hearing:** 5/16/2017 1:15 PM **Final Status:** DEAD

This bill establishes the Opioid Addiction Prevention and Rehabilitation Program, to be funded by revenue generated by a tax imposed on the sale and distribution of products that contain opioids at the rate of 1¢ per milligram of active opioid ingredient.

## **LD 1605 An Act To Increase Consumer Prescription Drug Protections**

**Sponsor:** *Sen. Vitelli* <http://legislature.maine.gov/LawMakerWeb/summary.asp?paper=SP0563&SessionID=12>

**Judiciary Committee Status:** CO

**Public Hearing:** 5/23/2017 1:00 PM **Final Status:** CARRY OVER

This bill requires the Maine Health Data Organization to annually identify, upon the request of the Attorney General, prescription drugs on which the State spends significant amounts of money and for which the manufacturer's list price for the drug has increased by 50% or more over the past 5 years or 15% or more over the past 12 months. The Maine Health Data Organization is required to provide the list to the Attorney General, who must require the manufacturer of the drugs to provide a justification for the increase.

The bill also prohibits manufacturers and wholesale distributors from price gouging in the sale of essential off-patent or generic drugs. It authorizes the Attorney General to obtain data from the Maine Health Data Organization concerning increases in prices of essential off-patent or generic drugs and requires manufacturers of essential off-patent or generic drugs to submit information to the Attorney General upon request of the Attorney General.

## **LD 1607 An Act To Prioritize Family Members as Surrogates for Medical Decisions**

**Sponsor:** *Rep. Hawke* <http://legislature.maine.gov/LawMakerWeb/summary.asp?paper=HP1108&SessionID=12>

**Judiciary Committee Status:** DIV RPT

**Public Hearing:** 5/23/2017 1:00 PM **Final Status:** DEAD

Current law places nonspousal partners above adult children, parents and adult siblings when prioritizing who may act as a surrogate for medical decisions for an incapacitated adult, including the decision to withhold or withdraw life-sustaining treatment. This bill gives adult children, parents and adult siblings medical decision-making priority over nonspousal partners.



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## LD 1619 An Act To Report Limited Information to the Controlled Substances Prescription Monitoring Program Concerning Methadone

**Sponsor:**

<http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280065530>

**Health & Human Services**

**Committee Status:** DIV RPT

**Public Hearing:** 5/25/2017 3:00 PM

**Final Status:** PL 2017, CH 243

As enacted, the law allows for the name of a methadone treatment facility and dosage information regarding methadone for the treatment of opioid dependency to be entered into the Controlled Substances Prescription Monitoring Program if a patient has given consent to the facility and the information is disclosed only during a medical emergency and only to medical personnel involved in treating the patient. Any disclosure of methadone dosage information must be documented in the Controlled Substances Prescription Monitoring Program and communicated to the methadone treatment facility. DHHS is obligated to convene a stakeholder group to discuss changes to the PMP to carry out intent of this law.

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