



Key Health Care Legislation from the 127th Maine Legislature, First Regular Session

**Maine Medical Association's
162nd Annual Session**
Harborside Hotel & Marina, Bar Harbor, Maine
September 11-13, 2015



Lobbying 101

- Lobbying is not a “dirty word”
- Democracy is a “participation sport”
- Lobbying as a private citizen is constitutionally protected & is virtually unlimited
- “8-hour rule” for paid lobbyists



Constitutional Protections

- Amendment I to the U.S. Constitution:
“Congress shall make no law . . . abridging . . . the right . . . to petition the government for a redress of grievances.”
- Article I, Section 15 of the Maine Constitution, Right of Petition



The Policymakers

- 186 Legislators; 127th Maine Legislature
 - 20 R, 15 D in Senate
 - 76 D, 67 R, 4 I, 2 U in House with 2 vacancies
- 151 members of the House of Representatives, each representing 8797 citizens
- 35 Senators, each representing 36,426 citizens
- All elected every 2 years for maximum of 4 consecutive terms
- Governor: elected every 4 years for maximum of 2 terms
- Impact of term limit & MCEA public campaign financing laws



Physicians in the 127th Maine Legislature

- Senator Geoffrey Gratwick, M.D. (D – Senate District 9, Bangor & Hermon)
- Representative Linda Sanborn, M.D. (D – House District 26, part of Gorham)
- Representative Heidi Brooks, M.D. (D – House District 61, part of Lewiston)
- Representative Patricia Hymanson, M.D. (D – House District 4, Ogunquit & parts of Wells, York, & Sanford)



House Leadership

- Speaker: Representative Mark Eves (D – House District 6, parts of North & South Berwick)
- Majority Leader: Representative Jeff McCabe (D – House District 107, Skowhegan & part of Madison)
- Asst. Majority Leader (Whip): Representative Sarah Gideon (D – House District 48, Freeport & part of Pownal)
- Minority Leader: Representative Kenneth Fredette (R – House District 100, Corinna, Dixmont, Newport, Plymouth, & part of Etna)
- Asst. Minority Leader (Whip): Representative Ellie Espling (R – House District 65, New Gloucester & part of Poland)



Senate Leadership

- President: Senator Michael Thibodeau (R – Senate District 11, Waldo County)
- Majority Leader: Senator Garrett Mason (R – Senate District 22, Androscoggin County)
- Asst. Majority Leader (Whip): Senator Andre Cushing (R – Senate District 10, Penobscot County)
- Minority Leader: Senator Justin Alfond (D – Senate District 27, Cumberland County)
- Asst. Minority Leader (Whip): Senator Dawn Hill (D – Senate District 35, York County)



Tracking Maine Legislation

- Maine legislature's web site:
<http://legislature.maine.gov/>
 - Bill status: L.D. #
 - Session laws: P.L. or Resolves Chapter
 - Statutes: 24 M.R.S.A. sec. 2851
- State agency rules online:
<http://www.maine.gov/sos/cec/rules/rules.html>
- Find your legislator:
<http://legislature.maine.gov/house/townlist.htm>



Governor's Contact Info.

Office of the Governor
State House Station #1
Augusta, Maine 04333-0001
207-287-3531
207-287-1034 Fax
Governor@maine.gov



House Contact Info.

The Honorable John/Jane Doe
Maine House of Representatives
State House Station #2
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Senate Contact Info.

The Honorable John/Jane Doe
The Maine Senate
State House Station #3
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Key Legislative Committees

- Joint Standing Committees on:
 - Appropriations & Financial Affairs
 - Taxation
 - Labor, Commerce, Research & Economic Development
 - Health & Human Services
 - Insurance & Financial Services
 - Judiciary
- Committee membership lists with contact info.:
<http://legislature.maine.gov/committee/#Committees>



Appropriations Jurisdiction

- Develops state budget
- Approves all state spending



Taxation Jurisdiction

- Generates revenue



Labor, Commerce, Research & Economic Development Jurisdiction

- Provides oversight for Department of Professional & Financial Regulation
 - Administrative boards regulating individual health care practitioners
 - Budgetary relationship with “affiliated” boards – Board of Licensure in Medicine, Board of Osteopathic Licensure, Board of Dentistry
- Has jurisdiction over licensure & discipline of individual health care practitioners & handles scope of practice issues



Health & Human Services Jurisdiction

- Provides oversight for Department of Health & Human Services
 - MaineCare program
 - Health care facility licensing & regulation: hospitals, nursing homes, ambulatory surgical facilities, assisted living facilities, etc.
 - Behavioral health care policy
 - Long-term care policy
 - Public health policy



Insurance & Financial Services Jurisdiction

- Provides oversight for the Bureau of Insurance
 - Licenses & regulates health insurance carriers, third-party administrators, utilization review entities, and agents (producers)
- Developed Maine's system of regulation of managed care organizations (Maine's *Patient Bill of Rights*) & handles mandated health care benefits
- Has jurisdiction over health care reform, including ACA implementation & the former Dirigo Health Program



Judiciary Jurisdiction

- Has jurisdiction over issues of medical liability, medical ethics, and medical rights
- Developed all of Maine's medical liability reform laws & has handled issues of advance directives & end-of-life care



Maine's Path of Legislation

- Idea developed
- Bill drafted (Legislative Request or LR)
- Bill introduced (Legislative Document or LD)
- Committee reference
- Committee action (public hearing/work session(s)/vote)
- First Reading (committee amendments)
- Second Reading (floor amendments)
- Next chamber, same process (must pass in identical form in both chambers)
- Governor's action (10 days to sign or veto)
- Law (effective 90 days after adjournment, unless emergency or specified effective date; citation is "Public Law" or "Resolve")



Lobbying Techniques

- Develop a relationship with your local legislators (or candidates) – before you want something from them
- Communicate clearly & concisely – in person, by phone, or personalized e-mail or letter
- Keep it simple – how will constituents be affected?
- Think compromise – “no hard votes”



Tips on Testifying

- Bring 30 copies of written testimony (20 – 25 for the committee & 5 extra for press or others)
- Make your points concisely – no more than 3 minutes; refer members to supplemental written information, if necessary
- Greet the 2 committee chairs & members, then introduce yourself, your medical specialty, the location & nature of your practice, then proceed with your remarks
- Relax, don't be intimidated
- Disagree without being disagreeable
- Thank members for the opportunity to speak & offer to respond to questions
- Be prepared to say “I don't know, but I'll get back to you”



MMA's Opportunities for Advocacy

- MMA Legislative Committee
 - Amy Madden, M.D., Chair
 - Regular communications through meetings, conference calls, *Maine Medicine*, & *Maine Medicine Weekly Update*
 - Doctor of the Day Program
 - Physicians' Day at the Legislature
- MMA Mission: “To support Maine physicians, advance the quality of medicine in Maine, & promote the health of all Maine citizens”



10 Commandments of State Politics

- Never lie or mislead a legislator about the relative importance of an issue or the opposition's position or strength. Your credibility rests on your honesty.
- Look for friends in unusual places. In politics, a friend is a politician who helps you when you need help – whether a Democrat or Republican, liberal or conservative – even if that politician is hostile to you 90% of the time.
- Never cut off anybody from contact. Do not let a legislator consider you a bitter enemy because you disagree; today's opponent may be tomorrow's ally.
- Do not grab credit. "Nothing is impossible if it does not matter who gets the credit."
- Your word is your bond. Never promise anything you cannot deliver.



10 Commandments of State Politics

- Do not waste time on opponents who are publicly committed to their position. It is more productive to lobby legislators who are least committed or who claim to be neutral or keeping an open mind.
- Never forget to notice and thank anyone who has helped you. The “good ole boy” system is alive and well.
- Do not gossip. Knowing a legislator’s peculiarities and peccadilloes is one thing; talking about them is another. Remember that discretion is the better part of valor.
- “When you are crossed politically, don’t get mad. Get even.” (Bobby Kennedy) The power of the ballot box is yours.
- Carry a rabbit’s foot. In lobbying you can know your opponent; you can develop imaginative and reasonable compromises; you can burn the midnight oil to digest all the arguments; but it can all go right down the drain if you don’t have a little luck.
 - Legislative Support Center’s Manual of Public Interest Lobbying in Illinois, copyright September 1978



Highlights from the First Regular Session of the 127th Maine Legislature

General Effective Date for first session
bills: Thursday, October 15, 2015



State Budget

- L.D. 236, An Act To Adjust Appropriations and Allocations from the General Fund and Other Funds for the Expenditures of the Department of Health and Human Services and To Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Year Ending June 30, 2015 (P.L. 2015, Ch. 16)
 - DHHS FY 2015 supplemental budget



State Budget

- L.D. 1019, 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, 2016 and June 30, 2017 (P.L. 2015, Ch. 267)
 - FY 2016-2017 biennial budget
 - ACA primary care fee increase (~\$3 M GF in each year of biennium) and health homes funding (~\$2.8 M GF in 2016, ~\$3.9 GF in 2017) retained



Children's Issues

- L.D. 199, An Act To Improve the Reporting of Child Abuse (P.L. 2015, Ch. 117)
 - Requires a mandated reporter, described as the "notifying person," to acknowledge in writing that the mandated reporter has received confirmation that the report has been made by the institution, facility or agency to the Department; if confirmation is not made within 24 hours, the mandated reporter must make the report



Children's Issues

- L.D. 231, An Act To Ensure That Schoolchildren with Dyslexia Receive the Assistance Needed (P.L. 2015, Ch. 338)
 - Defines "dyslexia" and requires school administrative units to screen for dyslexia only those students from kindergarten to grade 2 who have certain difficulties, as noted by a classroom teacher, beginning in the 2016-2017 school year; also requires the Department of Education to hire a dyslexia coordinator by October 1, 2015 and describes the dyslexia coordinator's duties



Children's Issues

- L.D. 263, An Act To Provide a Minor with a Defense to Prosecution in a Situation That Involves Risk of Alcohol Overdose (P.L. 2015, Ch. 154)
 - Provides a minor with a defense to prosecution under the alcoholic beverages laws applicable to minors when there is a risk of alcohol overdose



Children's Issues

- L.D. 483, An Act Regarding the Reporting Standards for Child Abuse (P.L. 2015, Ch. 178)
 - MMA bill
 - Provides an exception to the law mandating a report to the Department of suspected abuse or neglect of a child under 6 months of age for burns or other injuries occurring as a result of medical treatment following the delivery of the child while the child remains hospitalized



Children's Issues

- L.D. 556, An Act To Require Public Schools To Offer Instruction Related to Cardiopulmonary Resuscitation and the Use of an Automated External Defibrillator (P.L. 2015, Ch. 140)
 - Requires public schools to offer training to students on how to perform cardiopulmonary resuscitation and use automated external defibrillators in accordance with rules adopted by the Department of Education



Children's Issues

- L.D. 557, An Act To Provide Reasonable Accommodations for School Attendance for Children Certified for the Medical Use of Marijuana (P.L. 2015, Ch. 369)
 - Provides that a parent, guardian or other person designated as a primary caregiver for a minor child certified for the medical use of marijuana may possess and administer marijuana in a nonsmokeable form to that child in a school bus or on the grounds of a preschool or primary or secondary school
 - Provides that a child who holds a written certification for the use of medical marijuana may not be denied school eligibility



Children's Issues

- L.D. 1117, An Act To Clarify the Policy for Withdrawal of Life Support from Minors (P.L. 2015, Ch. 187)
 - Provides that a custodian of a child does not have the authority to withhold or withdraw life-sustaining medical treatment except in two situations:
 - when the parental rights to the child have been terminated and it is in the child's best interests
 - when the parental rights have not been terminated but the parents consent to that authority or, if the parents do not consent, the court determines that the nonconsenting parents are unfit by using the existing criteria in the statutes to determine the termination of parental rights and by determining that withholding or withdrawing life-sustaining medical treatment is in the best interests of the child



Children's Issues

- L.D. 1134, An Act To Require the Department of Health and Human Services To Distribute Information Regarding Down Syndrome to Providers of Prenatal and Postnatal Care and to Genetic Counselors (P.L. 2015, Ch. 269)
 - Requires hospitals, physicians, and other health professionals provide information about Down syndrome to expectant or new parents who have received a prenatal or postnatal diagnosis of Down syndrome; the Department must distribute appropriate information to health care providers



Children's Issues

- L.D. 1218, An Act Regarding the Administration of Vaccines by Pharmacists (P.L. 2015, Ch. 211)
 - Amends the law on pharmacists' authority to administer the influenza vaccine to a minor age 7 or older, rather than age 9 or older



Firearms/Domestic Violence

- L.D. 600, An Act To Prohibit a Person Convicted of a Crime of Domestic Violence from Possessing a Firearm for a Period of 5 Years and To Better Align Maine Law with Federal Law Regarding Persons Prohibited from Possessing Firearms (P.L. 2015, Ch. 287)
 - Provides that a person convicted of a Class D crime of domestic violence is prohibited from possessing a firearm for 5 years; the prohibition expires at the end of the 5-year period unless the person is convicted of any subsequent crime during the 5-year period



Firearms/Domestic Violence

- L.D. 652, An Act To Authorize the Carrying of Concealed Handguns without a Permit (P.L. 2015, Ch. 327)
 - Authorizes a person who is not prohibited from possessing a firearm to carry a concealed handgun without a permit; also authorizes a person to possess a loaded pistol or revolver while in a motor vehicle or a trailer or other vehicle being hauled by a motor vehicle
 - Provides that a person who is 18 years of age or older and under 21 years of age and is on active duty in the Armed Forces or the National Guard or is an honorably discharged veteran and is not otherwise prohibited from carrying a firearm may carry a concealed handgun without a permit



Health Care Information

- L.D. 736, An Act To Allow Access to Certain Death Records (P.L. 2015, Ch. 189)
 - Authorizes the names and dates of death of individuals who died while patients at the Pineland Hospital and Training Center to be made available to the public in accordance with rules adopted by the Department



Individual Licensing/Scope

- L.D. 91, An Act To Allow Dental Hygienists To Prescribe Fluoride Dentifrice and Antibacterial Rinse (P.L. 2015, Ch. 326)
 - Includes anticavity toothpastes or topical gels with 1.1% or less sodium fluoride and oral rinses with 0.05%, 0.2%, 0.44% or 0.5% sodium fluoride, as well as chlorhexidine gluconate oral rinse
- L.D. 521, An Act To Amend the Health Care Practitioner Transparency Requirements (P.L. 2015, Ch. 35)
 - Repeals license posting requirement; clarifies listing of name on badge; repeals medical staff position on badge



Individual Licensing/Scope

- L.D. 740, An Act To Sustain Maine's Primary Care Professional Workforce (P.L. 2015, Ch. 108)
 - Expands eligibility for the income tax credit for eligible new primary care professionals to include persons already practicing in underserved areas and certified as eligible by the Department
- L.D. 830, An Act To Eliminate the Dual Licensing of Physician Assistants (P.L. 2015, Ch. 242)
 - Establishes a process for PA to be licensed by either the allopathic or osteopathic licensing board; authorizes boards to jointly adopt rules to implement process



Individual Licensing/Scope

- L.D. 834, An Act To Clarify the Use of "M.D." To Represent Achievement of a Graduate Degree by an Individual Not Licensed To Practice Medicine in Maine (P.L. 2015, Ch. 270)
 - MMA bill; allows a person who has received the doctor's degree from a reputable college or university to append the letters "M.D." to that person's name, if that person is not engaged in the practice of medicine or surgery, as long as that person's license to practice has never been revoked by the Board of Licensure in Medicine



Individual Licensing/Scope

- L.D. 422, An Act To Improve Access to Treatments for Lyme Disease (P.L. 2015, Ch. 235)
 - Provides that a licensed physician may prescribe, administer, or dispense long-term antibiotic therapy for a therapeutic purpose to eliminate infection or to control a patient's symptoms upon making a clinical diagnosis that the patient has Lyme disease or displays symptoms consistent with a clinical diagnosis of Lyme disease
 - It requires the clinical diagnosis and treatment to be documented in the patient's medical record by the prescribing licensed physician
 - It also defines terms, including "Lyme disease"



Insurance Practices

- L.D. 124, An Act To Require Payment by a Carrier for Health Care Services Provided to Enrollees of the Carrier (P.L. 2015, Ch. 84)
 - Requires carriers to pay providers for services rendered prior to credentials being granted, retroactive to when a complete application for credentialing is submitted, as long as credentials are granted
 - A claim may not be submitted until the provider has been notified of the credentialing decision and the effective date of any credentials



Insurance Practices

- L.D. 359, An Act To Assist Persons with Breast Cancer (P.L. 2015, Ch. 227)
 - Requires carriers to provide written notice regarding the requirements for inpatient coverage following treatment of breast cancer to physicians participating in the carrier's provider network and requiring attending physicians to provide a similar notice to patients when consulting with patients about breast cancer treatment



Insurance Practices

- L.D. 636, An Act To Provide Consumers of Health Care with Information Regarding Health Care Costs (P.L. 2015, Ch. 260)
 - Requires carriers offering individual and group health plans to provide certain information with respect to prescription drug coverage to prospective enrollees and enrollees on its publicly accessible website
 - Requires carriers to post each prescription drug formulary for each health plan in a manner that allows enrollees to determine whether a particular prescription drug is covered under a formulary
 - Requires carriers to provide information about utilization review, prior authorization or step therapy, cost-sharing, exclusions from coverage and the amount of coverage for out-of-network providers or noncovered health care services



Insurance Practices

- L.D. 978, An Act To Promote Patient Choice and Access to Health Care (P.L. 2015, Ch. 111)
 - Prohibits carriers offering individual and group health plans from refusing to reimburse for services provided by a chiropractor acting within the scope of the chiropractor's license if the services are covered by the carrier and the chiropractor participates in the carrier's provider network
 - Applies to all policies and contracts issued or renewed on or after January 1, 2016



Insurance Mandates

- L.D. 572, An Act To Ensure Appropriate Health Insurance Coverage for Prescription Eye Drops (P.L. 2015, Ch. 91)
 - MSEPS bill
 - Requires carriers offering health plans to provide coverage for early refills of prescription eye drop medication under certain circumstances
 - Enrollee must request the refill no earlier than the date on which 70% of the days of use authorized by the prescribing health care provider have elapsed
 - Applies to all policies and contracts issued or renewed on or after January 1, 2016



Insurance Mandates

- L.D. 919, An Act To Provide Access to Opioid Analgesics with Abuse-deterrent Properties (P.L. 2015, Ch. 371)
 - Requires carriers offering individual and group health plans to provide coverage for abuse-deterrent opioid analgesic drug products on a basis not less favorable than that for other opioid analgesic drug products on any formulary, preferred drug list, or other list of drugs used by the carrier



Medicaid Policy

- L.D. 319, An Act To Strengthen the Economic Stability of Qualified Maine Citizens by Expanding Coverage of Reproductive Health Care and Family Services (P.L. 2015, Ch. 356)
 - Expands Medicaid coverage for reproductive health care and family planning services to adults and adolescents who have individual incomes less than or equal to 209% of the nonfarm income official poverty line as defined in accordance with federal law, which is the same Medicaid coverage level as for pregnant women



Medicaid Policy

- L.D. 649, Resolve, To Ensure That MaineCare-eligible Children Have Equal Access to Providers of Dental, Hearing and Vision Services (Resolves 2015, Ch. 30)
 - Requires the Department, with input from stakeholders, to develop a comprehensive strategy to ensure that MaineCare-eligible children have the same access to providers of dental, hearing, and vision services as have children with private health insurance
 - Requires the Department to submit the strategy and related recommendations to the Joint Standing Committee on Health and Human Services by January 15, 2016



Medical Ethics/Rights

- L.D. 666, An Act To Allow a Patient To Designate a Caregiver in the Patient's Medical Record (P.L. 2015, Ch. 370)
 - Allows a patient admitted to a hospital to designate a caregiver, who may provide aftercare for the patient and whose identifying information must be entered into the patient's medical records at the hospital
 - If the patient or patient's legal guardian provides written consent to release medical information to the designated caregiver, the hospital is required to notify the caregiver prior to the patient's being discharged or transferred, consult with the caregiver as to the patient's discharge plan and provide the caregiver any necessary instruction in providing aftercare to the patient if the patient is discharged to the patient's residence



Mental Health/Substance Abuse

- L.D. 140, An Act To Expand Access To Lifesaving Opioid Overdose Medication (P.L. 2015, Ch. 351)
 - Allows for the prescription of naloxone hydrochloride by standing order and allows for the prescription of naloxone hydrochloride to friends of and other persons in a position to assist an individual at risk of experiencing an opioid-related drug overdose, in addition to immediate family members as currently permitted in law
 - Also allows for the prescription of naloxone hydrochloride by standing order to a public health agency operating an overdose prevention program in accordance with rules adopted by the Department



Mental Health/Substance Abuse

- L.D. 729, An Act To Add Acetylfentanyl and Methylfentanyl Derivatives to the List of Schedule W Drugs (P.L. 2015, Ch. 330)
 - Adds to the list of Schedule W drugs any methylfentanyl derivatives



Mental Health/Substance Abuse

- L.D. 1145, An Act To Improve Maine's Involuntary Commitment Processes (P.L. 2015, Ch. 309)
- Based on certain recommendations in the report "Recommendations for Improving the Involuntary Commitment Process," by the Judicial Branch Mental Health Working Group dated December 15, 2014
- Amends the laws governing involuntary hospitalization in various ways



Mental Health/Substance Abuse

- L.D. 1368, An Act To Require the Documentation of the Use of Seclusion and Restraint at Mental Health Institutions in the State (P.L. 2015, Ch. 266)
 - Requires public and private licensed psychiatric institutions to submit quarterly and annual reports to the Commissioner of Health and Human Services that include data regarding the hours and number of uses of restraint and seclusion
 - Commissioner is required to submit a report by January 1st of each year to the Joint Standing Committee on Health & Human Services; Committee may report out legislation



Mental Health/Substance Abuse

- L.D. 1391, An Act Regarding the Treatment of Forensic Patients (P.L. 2015, Ch. 325)
 - Allows the Commissioner of Health and Human Services to administer medication to a defendant who has been found incompetent to proceed without the defendant's consent if a court finds that certain standards have been met
 - Allows the commissioner to authorize a hospital to administer medication to a defendant who has been found incompetent to proceed or to a person who has been committed to the custody of the commissioner following acceptance of a negotiated insanity plea or following a verdict or finding of insanity without that defendant's or person's consent if certain standards are met, subject to appeal to the court



Mental Health/Substance Abuse

- L.D. 1434, An Act To Amend the Laws Governing Law Enforcement's Access to, and Access to Information about, Certain Persons in Hospitals and Mental Health Facilities (P.L. 2015, Ch. 218)
 - Authorizes a hospital to disclose otherwise confidential health information of a patient without the consent of the patient
 - For the purpose of assisting a law enforcement agency to serve a protection from abuse order to a person who is a patient in the hospital; or
 - For the purpose of notifying a law enforcement agency that brought a patient to the hospital that the patient is leaving the hospital so that the agency may arrest the patient



Public Health

- L.D. 629, An Act Regarding Community Paramedicine Pilot Projects (P.L. 2015, Ch. 92)
 - Removes the time limitation of 3 years for community paramedicine pilot projects
 - Removes a provision limiting the number of pilot projects
- L.D. 662, An Act To Increase Access to Health Care through Telemedicine (P.L. 2015, Ch. 137)
 - Authorizes the Board of Licensure in Medicine to register a physician not licensed to practice medicine in this State to provide medical services through interstate telemedicine to patients in this State if certain requirements are met



Public Health

- L.D. 905, Resolve, To Study Allocations of the Fund for a Healthy Maine (Resolves 2015, Ch. 47)
 - Directs the Joint Standing Committee on Health and Human Services to review whether allocations of the Fund for a Healthy Maine are properly aligned with the State's public and preventive health priorities and goals and recommend adjustments to allocations as necessary
 - The committee is authorized to meet up to 6 times when the Legislature is not in session and the committee's report must be submitted by December 2, 2015



Public Health

- L.D. 1013, An Act To Prevent the Shackling of Pregnant Prisoners (P.L. 2015, Ch. 315)
 - Commissioner of Corrections establishes mandatory minimum standards for using restraints applicable to pregnant prisoners and pregnant juveniles in jails by adopting routine technical rules
 - Notice of the rules is provided only to female prisoners and female juveniles



Public Health

- L.D. 1076, Resolve, Directing the Department of Health and Human Services To Increase Public Awareness about and Access to Federal Resources Related to Vaccine Injuries (Resolves 2015, Ch. 37)
 - Directs the Department of Health and Human Services to create a link on the department's publicly accessible website to existing federal resources related to vaccine injuries, including but not limited to information about the National Vaccine Injury Compensation Program and the Vaccine Adverse Event Reporting System



Public Health

- L.D. 1125, An Act To Expand Public Access to Epinephrine Autoinjectors (P.L. 2015, Ch. 231)
 - Allows entities, organizations, and places of employment at which allergens capable of causing anaphylaxis may be present, other than schools, to stock prescribed epinephrine autoinjectors and administer them to persons believed in good faith to be experiencing anaphylaxis
 - Provides that those entities, organizations, and places of employment may not be held liable for any injuries or related damages that may result
 - It requires training for employees or agents of such entities, organizations or places of employment



Public Health

- L.D. 1301, An Act To Improve the Safety of Vulnerable Users in Traffic and To Clarify the Responsibilities of Bicyclists and Pedestrians (P.L. 2015, Ch. 164)
 - It creates a vulnerable user law to protect people on public ways who are not in motor vehicles
 - It requires a driver education course to include instruction to impart the understanding and skills necessary to operate a motor vehicle safely in a situation in which a vulnerable user is sharing the road with that motor vehicle
 - It specifies that a person riding a bicycle or scooter or operating on roller skis has the same rights and duties as a person operating a motor vehicle



Tobacco Policy

- L.D. 423, An Act To Require Child-resistant Packaging for Nicotine Liquid Containers (P.L. 2015, Ch. 288)
 - Provides a definition for "electronic nicotine delivery device"
 - Prohibits sale of a nicotine liquid container unless the container is child-resistant packaging
 - Directs the Commissioner of Health and Human Services to monitor the status of any effective date of final federal regulations that mandate child-resistant packaging standards for nicotine liquid containers and to notify the Joint Standing Committee on Health & Human Services of that occurrence



Tobacco Policy

- L.D. 1108, An Act To Protect Children and the Public from Vapor from Electronic Smoking Devices (P.L. 2015, Ch. 318)
 - The bill defines a new term, "electronic smoking device," and amends the definition of "smoking" to include use of an electronic smoking device



Key Bills That Failed

- Immunization policy
 - L.D. 471, An Act To Improve Childhood Vaccination Rates in Maine
 - L.D. 473, Resolve, Directing the Department of Education and the Department of Health and Human Services To Jointly Adopt Rules To Protect Children's Health
 - L.D. 606, An Act To Remove the Philosophical Exemption from the Immunization Requirements for School Students and Employees of Nursery Schools and Health Care Facilities
- CRNA prescriptive authority
 - L.D. 970, An Act Regarding Advanced Practice Registered Nurse Requirements



Key Bills That Failed

- ACA Medicaid Expansion
 - L.D. 854, An Act To Increase Access to Health Security by Expanding Federally Funded Health Care for Maine People



Bills Carried Over to the Second Regular Session

Committees usually have to vote on carry over bills within the first month of the second session



Criminal Justice & Public Safety

- L.D. 440, An Act to Create a Secure, Therapeutic Mental Health Unit
- L.D. 1114, An Act to Protect Maine's Children from Sexual Abuse and Exploitation



Education & Cultural Affairs

- L.D. 356, An Act to Permit the New England School of Dental Technology to Grant the Degree of Bachelor of Science



Health & Human Services

- L.D. 180, An Act to Allow Terminally Ill Patients to Choose to Use Experimental Treatments
- L.D. 213, An Act to Ensure the Comprehensive Medical, Dental, Educational and Behavioral Assessment of Children Entering State Custody (MAAP bill)
- L.D. 475, Resolve, to Increase MaineCare Services for Certain Recipients to Allow Them to Remain at Home
- L.D. 622, An Act to Require Training of Mandated Reporters Under the Child Abuse Laws



HHS (cont)

- L.D. 633, An Act to Improve the Health of Maine Citizens and the Economy of Maine by Providing Affordable Market-based Coverage Options to Low-income Uninsured Citizens (Cover Maine Now/ACA Medicaid Expansion)
- L.D. 726, An Act to Increase Patient Safety in Maine's Medical Marijuana Program
- L.D. 842, An Act to Establish Peer Center Reimbursement
- L.D. 885, An Act to Promote Enhanced Eligibility Verification in Maine's Welfare System



HHS (cont)

- L.D. 886, Resolve, Directing the Department of Health and Human Services to Increase Reimbursement Rates for Home-based and Community-based Services
- L.D. 949, An Act to Enact the Recommendations of the Commission on Independent Living and Disability
- L.D. 966, An Act to Assist Patients in Need of Psychiatric Services
- L.D. 1030, An Act to Better Coordinate the Work of Mental Health Crisis Agencies with Law Enforcement Agencies



HHS (cont)

- L.D. 1097, An Act to Improve the Integrity of Maine's Welfare Programs
- L.D. 1149, Resolve, Directing the Maine Center for Disease Control and Prevention to Report on Progress toward Meeting Healthy Maine 2020 Goals Pertaining to Reproductive Health
- L.D. 1209, An Act to Increase the Effectiveness of Peer Supports in the State
- L.D. 1267, An Act to Assist Working Families with Young Children
- L.D. 1268, An Act to Reform Welfare by Establishing Bridges to Sustainable Employment



Insurance & Financial Services

- L.D. 704, An Act Regarding Notice Provided by Insurance Carriers to Health Care Providers
- L.D. 1150, An Act Regarding Maximum Allowable Cost Pricing Lists Used by Pharmacy Benefit Managers
- L.D. 1305, An Act to Encourage Health Insurance Consumers to Comparison Shop for Health Care Procedures and Treatment



Judiciary

- L.D. 1065, An Act to Amend the Law Regarding Temporary Powers of Attorney over Minors and Incapacitated Persons
- L.D. 1214, An Act to Implement the Recommendations of the Mental Health Working Group
- L.D. 1224, An Act to Amend the Child Protective Services Laws
- L.D. 1311, An Act to Establish the Patient Compensation System Act



Labor, Commerce, Research & Economic Development

- L.D. 690, An Act to Ensure the Safety of Home Birth (Home Birth Collaborative bill)
- L.D. 1384, An Act to Improve Workplace Safety by Simplifying and Improving Employers' Substance Abuse Policy Requirements



Taxation

- L.D. 973, An Act to Ensure that Nicotine Products are Taxed Equally



State Regulatory Issues

- Workers Compensation Board Rule Chapter 5, Medical Fee Schedule
 - Triennial board review of fee schedule
 - \$60 CF in professional fee schedule
 - Continuing concerns regarding quality of ambulatory surgical facility data on which base rate is determined



Federal Issues

- ICD-10 Implementation
- ACA



Questions?

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