

**MMA Legislative Update:
129th Maine Legislature, First Regular Session**

Focus on Health-related Bills

2019

Disclosure

- I have no financial interest in the topic of this presentation & no actual or potential conflict of interest to disclose
- I am an employee of the Maine Medical Association, a professional organization representing more than 4300 physicians, residents, & medical students in Maine whose mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens

The Policymakers

- 186 Legislators; 129th Maine Legislature
 - 21 D, 14 R in Senate
 - 89 D, 56 R, 1 Common Sense Independent, & 5 I or U in House
- 151 members of the House of Representatives, each representing ±8,800 citizens
- 35 Senators, each representing ±38,000 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 129th Maine Legislature

- Senator Geoffrey Gratwick, M.D. (D – Senate District 9, Penobscot County)
- Senator Linda Sanborn, M.D. (D – Senate District 30, Cumberland County)
- Senator Ned Claxton, M.D. (D – Senate District 20, Androscoggin County)
- 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)

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>

Key Legislative Committees

- Joint Standing Committees on:
 - Appropriations & Financial Affairs
 - Taxation
 - Health & Human Services
 - Health Coverage, Insurance & Financial Services
 - Judiciary
 - Labor & Housing
 - Innovation, Development, Economic Advancement, & Business
 - Criminal Justice & Public Safety
- Committee lists:
<http://www.legislature.maine.gov/committee/#Committees>

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")

Highlights from the First Regular Session of the 129th Maine Legislature

1/2/19 – 6/19/19

8/26/19

Physician-Assisted Death (PAD)

- L.D. 1313, *An Act to Enact the Maine Death with Dignity Act*, P.L. 2019, Chapter 271:
<http://www.legislature.maine.gov/LawMakerWeb/summary.asp?ID=280072574>
 - MMA testimony “neither for nor against:”
https://www.mainemed.com/sites/default/files/content/testimony/ld1313_testimony.pdf
- Revised MMA Statement of Physician-Assisted Suicide adopted by Board on 4/25/19:
[https://www.mainemed.com/sites/default/files/content/Statement on Physician-Assisted Suicide Final%204-25-19.pdf](https://www.mainemed.com/sites/default/files/content/Statement%20on%20Physician-Assisted%20Suicide%20Final%204-25-19.pdf)

P.L. 2019, Chapter 271 Overview

- Enacted text:
<http://www.mainelegislature.org/legis/bills/getPDF.asp?paper=HP0948&item=3&snum=129>
- Qualified patient's principal right under Act is to make "written request" for medication
- Must follow statutory form
- Must be signed & dated by qualified patient
- Must be witnessed by at least 2 individuals
 - Attending physician may not be a witness

Attending physician responsibilities

- Make initial determinations
 - Patient has terminal disease
 - Patient is competent
 - Patient has made written request voluntarily
- Request that patient demonstrate residency
- Obtain informed consent
- Refer patient to consulting physician for medical confirmation
- Meet alone with patient (with interpreter, if necessary) to confirm lack of coercion or undue influence
- Refer patient for counseling, if appropriate
- Recommend that patient notify next of kin

Attending physician responsibilities

- Counsel patient to have another person present when taking medication & not to take it in a public place
- Inform patient of the right to rescind the request
- Verify, immediately before writing prescription, that patient is making informed decision
- Fulfill medical record documentation requirements
- Ensure all appropriate steps taken under Act
- Dispense medications directly or contact pharmacy
- Significant documentation requirements

Is physician participation required?

- **No.** Nothing in the Act requires a physician to participate
- If a health care provider (individual or facility) is unable or unwilling to fulfill a qualified patient's requests under the Act, the provider must transfer all relevant records to a new provider upon request

Other provisions of the Act

- Effect on construction of wills, contracts, & other agreements
- Effect on construction of insurance or annuity policies
- Does not authorize euthanasia
- Does not lower standard of care
- Basis for prohibiting persons or entities from participating under the Act

State Budget

- *L.D. 1001, 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, 2019, June 30, 2020 and June 30, 2021 (P.L. 2019, Chapter 343)*
 - **FY 2020-2021 biennial budget**
 - Maintains current level of services
 - Rebases hospital tax
 - Funds Medicaid expansion
 - Continues enhanced primary care payments initially authorized under ACA & then continued with state funds

129th Maine Legislature: a health care agenda

- Political “blue wave” in Maine in 2018 elections means active 2019 session for health care
- Governor Mills issues two key **Executive Orders** immediately after inauguration
 - Executive Order 1 (ACA Medicaid expansion):
https://www.maine.gov/governor/mills/sites/maine.gov/governor.mills/files/inline-files/Executive%20Order%201_0.pdf
 - Executive Order 2 (Opioid crisis response):
https://www.maine.gov/governor/mills/sites/maine.gov/governor.mills/files/inline-files/Executive%20Order%202_0.pdf
 - Appointment of Gordon Smith as Director of Opioid Response

Health care agenda: carryovers

- Health care reform: 5 bills carried over in the HCIFS Committee (L.D. 51, 1591, 1611, 1617, 1755)
- Licensing & regulation of Physician Assistants (L.D. 1660) carried over in HCIFS Committee

Health care agenda: Opioid Bills

(Chapter references to Public Laws 2019)

- Ch. 203 Naloxone use in life underwriting
- Ch. 292 Naloxone in recovery residences
- Ch. 269: Authorizes acupuncture to treat SUD
- **Ch. 137: Criminal liability exemption for reporting medical emergency**
- Ch. 368, 369: Drug testing
- Ch 342: Substance exposed infants
- Ch. 358, 524: Access, quality and safety in recovery residences
- Ch. 432: Substance Use Disorder Services Commission
- Ch. 488: Brain injury resources for underserved populations

Health care agenda: Public Health & Safety

- **Ch. 62: Prohibits use of certain disposable food service containers**
- Ch. 86: Coverage for colorectal cancer screening
- Ch. 100: Lead abatement orders filed in registry of deeds
- Ch. 234: Disclosure of methamphetamine presence in real estate
- **Ch. 277: Toxic chemicals in packaging**
- **Ch. 346: Prohibit single use plastic bags**
- **Ch. 411: Removal of dangerous weapons from persons in protective custody (ERPA)**
- Ch. 479: Lead poisoning control act strengthened
- **Ch. 486: Prohibits use of phones and electronic devices while driving**
- Ch. 490: Workplace accommodations for pregnant workers
- Ch. 523: Requires certain credentials for Maine CDC Director

Health care agenda: Tobacco

- **Ch. 61: Prohibits vaping and device possession on school grounds**
- Ch. 381: Limited disclosure of cigarette sales to allow payments from tobacco settlement funds
- Ch. 495: Prohibits furnishing tobacco to minors
- **Ch. 530: Tobacco tax equalization**

Health care agenda: Children

- Ch. 28: Child Welfare Advisory Panel reports
- **Ch. 32: Okays use of sunscreen in schools**
- Ch. 54: Prevention of food shaming in schools
- Ch. 106: Destigmatizing mental illness in health instruction
- Ch. 130: MaineCare coverage during reunification
- **Ch. 154: Repeals non-medical exemptions to school vaccine rules**
- Ch. 155: Guardianship & mental health care
- Ch. 158: Lead testing in schools
- Ch. 162: Medical assessments for youth in foster care
- Ch. 165: Outlaws “conversion therapy” for minors

Health care agenda: Children (cont'd)

- Ch. 172: Radon testing in schools
- Ch. 201: Lead screening for children
- Ch. 206: Health service access for homeless youth
- Ch. 299: Child safety seats
- **Ch. 275: Prohibits tanning bed use by those under 18**
- **Ch. 425: Funding for school based health centers**
- **Ch. 426: Vitamin K and antibiotic eye ointment for newborns**
- Ch. 429: Kindergarten readiness for children who are hard of hearing
- Ch. 433: Advance children's cancer research
- Ch. 444: Increased availability of foster homes
- Ch. 481: Social & emotional learning for children

Health care agenda: Medical Practice

- Ch. 87: Circumstances of death that must be reported to CME
- Ch. 198: Increases damage limits in wrongful death cases
- Ch. 236: Updates family planning statutes
- **Ch. 262: Allows PAs and APRNs to perform abortions**
- Ch. 289: Telehealth
- **Ch. 295: Step therapy**
- **Ch. 273: Prior authorization limitations**
- **Ch. 317: Mental health professionals' duty to warn or protect**
- Ch. 499: Protects medical professionals' licensing information
- **Ch. 510: Funding for Doctors for Maine's Future program**

Health care agenda: Insurance Coverage

- **Ch. 5: Enacts ACA protections into state law**
- Ch. 30: Responsibility for incorrect payments of health claims
- Ch. 77: Credit ratings for overdue medical expenses
- Ch. 171: Patient protection in insurer medical reviews
- **Ch. 178: Prohibiting denial of referral by out-of-network providers**
- Ch. 182: Medical payments coverage for consumers
- Ch. 208: Protection of genetic testing information
- **Ch. 238: Prudent layperson standard for emergency care coverage**
- Ch. 244: Primary health care spending transparency
- **Ch. 274: MaineCare coverage for abortion**
- Ch. 330: Short term, limited duration health plans
- Ch. 420: MaineCare family planning benefit
- Ch. 522: Establishes Health Insurance Consumer Assistance Program

Health care agenda: Drug & Device Costs

- Ch. 34: Interchangeable biological products
- **Ch. 418: Coverage for hearing aids**
- Ch. 454: Nonprescription drug sales through vending machines
- Ch. 469: Unfair practices by pharmacy benefit managers
- **Ch. 470: Drug price transparency**
- Ch. 471: Establishes Prescription Drug Affordability Board
- **Ch. 472: Wholesale prescription drug importation**

Health care agenda: Marijuana

- Ch. 125: Employment termination for marijuana intoxication
- Ch. 209: Cannabis access for visiting patients
- Ch. 217: Clarifying medical marijuana laws
- Ch. 231: Changes marijuana tax laws
- Ch. 256: Medical marijuana cultivation limits
- Ch. 312: Allows medical marijuana dispensaries to become for-profit
- Ch. 331: Corrects inconsistencies in recent marijuana laws
- Ch. 354: Marijuana testing facility certification
- Ch. 491: “Adult use” marijuana laws

Questions?

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