

MMA Update on Physician Advocacy & the 128th Maine Legislature

MaineGeneral Medical Center

Augusta, Maine

Tuesday, September 25, 2018

The Policymakers

- 186 Legislators; 128th Maine Legislature
 - 18 R, 17 D in Senate
 - 74 D, 70 R, 1 Green Independent, 1 Common Sense Independent, & 5 I or U in House
- 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 128th Maine Legislature

- Senator Geoffrey Gratwick, M.D. (D – Senate District 9, Bangor & Hermon)
- 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
 - Labor, Commerce, Research & Economic Development
 - Health & Human Services
 - Insurance & Financial Services
 - Judiciary
- Joint Select Committee on Marijuana Legalization Implementation
- Committee membership lists with contact info.:
<http://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 128th Maine Legislature

General Effective Date for first session bills:
Wednesday, November 1, 2017

State Budget

- L.D. 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 (P.L. 2017, Ch. 284)
 - FY 2018-2019 biennial budget
 - Substantial hospital reimbursement cuts averted
 - Continued diversion of *Fund for a Healthy Maine* from statutorily designated purposes to general MaineCare budget
 - Repeals 3% income tax surcharge on high income individuals passed by referendum

Children's Issues

- L.D. 118, An Act To Require Moped Riders Under 18 Years of Age to Wear a Helmet (P.L. 2017, Ch. 51)
- L.D. 1112, An Act Regarding the Maternal and Infant Death Review Panel (P.L. 2017, Chapter 203)
 - Makes the Maine CDC Medical Director the “director” of the panel, provides access to PHI without family consent, and requires the panel to meet twice per year.
- L.D. 1113, An Act to Improve Antihunger Programs in Maine Schools (P.L. 2017, Chapter 238)
 - Directs DOE to make internet-based applications for the National School Lunch Program available to public schools

Children's Issues

- L.D. 1170, An Act To Reduce Youth Access to Tobacco Products (P.L. 2017, Ch. 308)
 - Prohibits sale of tobacco products to individuals under 21 unless the individual has attained the age of 18 by July 1, 2018
- L.D. 1261, An Act to Protect Children from Sex Trafficking (P.L. 2017, Chapter 135)
 - Establishes a Class D crime for an individual who solicits a minor for prostitution
- L.D. 1335, An Act to Provide Youth Mental Health First Aid Training to Secondary School Health Educators (P.L. 2017, Chapter 269)
 - Requires a school administrative district to provide such training if it receives funding specifically for that purpose

Firearms/Domestic Violence

- L.D. 1219, An Act To Amend the Laws Governing Forensic Examination Kits (P.L. 2017, Ch. 156)
 - Permits the kits to be used for sexual assaults other than “gross sexual assault” & directs a hospital or health care practitioner to bill the Victim’s Compensation Fund using a tracking number assigned by the manufacturer of the kit

Health Care Information

- L.D. 183, An Act Requiring the Use of the Electronic Death Registration System (P.L. 2017, Ch. 37)
 - Effective July 1, 2018, requires individuals filing a certificate of death to use the electronic death registration system maintained by the State Registrar of Vital Statistics

Individual Licensing/Scope

- L.D. 132, An Act To Authorize Podiatrists to Perform Certain Routine Procedures (P.L. 2017, Ch. 14)
 - Amends the scope of practice to include “performance of a history and physical on a podiatrists’ preoperative patient”
- L.D. 593, An Act To Update the License Renewal Provision of the Board of Licensure in Medicine (P.L. 2017, Ch. 63)
 - Amends the notice of impending expiration requirement from “mail” a renewal package to “notify” of the time to renew & allows renewal within 90 days after expiration by submitting the filing fee & late fee

Individual Licensing/Scope

- L.D. 801, An Act To Allow a Physical Therapist to Administer Certain Coagulation Tests in a Person's Home (P.L. 2017, Ch. 80)
 - Permits a physical therapist to administer a finger stick blood test as part of a home visit & requires a report of results to the attending clinician for interpretation
- L.D. 985, An Act To Promote Medical Care for Visiting Athletic Teams (P.L. 2017, Ch. 119)
 - Permits a physician with an unrestricted license in another state who provides medical services to an athletic team pursuant to a written agreement, to treat a member of the team, the coaching or other staff, the cheerleading squad, the band, & the mascot when visiting in Maine

Individual Licensing/Scope

- L.D. 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 (P.L. 2017, Ch. 145)
 - Requires a physician to perform the initial comprehensive visit for a resident in a SNF, but permits a physician to delegate any other required visit or medically necessary visit to a mid-level practitioner & permits delegation of all 3 types of visits for a resident in a NF
- L.D. 1166, An Act Regarding Anesthesia Care in Rural Maine (P.L. 2017, Ch. 188)
 - Permits CRNAs 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

Individual Licensing/Scope

- L.D. 1200, An Act Relating to the Licensure of Physicians (P.L. 2017, Ch. 189)
 - Prohibits the Board of Licensure in Medicine from requiring ABMS “maintenance of certification” (MOC) as a condition of initial licensure or renewal
- L.D. 1359, An Act To Adopt the Interstate Medical Licensure Compact (P.L. 2017, Ch. 253)
 - Authorizes the 2 physician licensing boards (M.D./D.O.) to request state & national criminal history information, including fingerprint records, for physicians who request expedited licensure under the Interstate Medical Licensure Compact

Individual Licensing/Scope

- L.D. 1410, An Act To Adopt the Nurse Licensure Compact (P.L. 2017, Ch. 258)
 - Adopts the model Interstate Nurse Licensure Compact of the National Council of State Boards of Nursing & adds a federal fingerprint background check requirement
- L.D. 1592, An Act To Remove Barriers to Professional Licensing for Veterans (P.L. 2017, Ch. 173)
 - Grants Director of the Office of Professional & Occupational Regulation within DPF to modify licensing requirements & waive licensing fees on a case-by-case basis for military veteran applicants to licensing boards under the Office

Individual Licensing/Scope

- L.D. 1594, An Act Regarding the Dispensing of Naloxone Hydrochloride by Pharmacists (P.L. 2017, Ch. 249)
 - Authorizes pharmacists to prescribe & dispense naloxone in accordance with rules of the Board of Pharmacy; the provision sunsets on July 1, 2019
- L.D. 455, An Act Relating to the Provision of Nicotine Replacement Products by Pharmacists (P.L. 2017, Ch. 185)
 - Includes within the scope of practice of pharmacists the ordering & dispensing of OTC nicotine replacement products

Insurance Practices

- L.D. 445, An Act To Encourage Maine Consumers To Comparison-shop for Certain Health Care Procedures and To Lower Health Care Costs (P.L. 2017, Ch. 232)
 - Beginning 1/1/19, carriers must establish a small group plan design for HAS-compatible plans that directly incentivize enrollees to shop for “comparable health care services”
 - “Comparable health care services:” non-emergency, OP services in 4 categories:
 - PT & OT
 - Radiology & imaging
 - Labs
 - Infusion therapy
 - BOI directed to study & evaluate program & report annually to the legislature beginning 3/1/20; sunset 1/1/24

Insurance Practices

- L.D. 445 continued
 - Beginning 1/1/18, carriers must develop & make available to enrollees a website & toll-free phone number to obtain estimated costs for “comparable health care services” from network providers
 - Carriers may direct enrollees to the MHDO web site, www.comparemaine.org
 - Beginning 1/1/19, carriers must, upon enrollee request, apply amount paid for “comparable health care service” from an out-of-network” (ME, NH, MA) provider to the enrollee cost sharing requirement, so long as the cost is same as or less than the statewide average payment based on MHDO data; sunset 1/1/24
 - Requires provider who makes a referral for a “comparable health care service” during an in-person visit to notify patient of right to obtain the service from another provider

Insurance Practices

- L.D. 1385, An Act Governing Direct Primary Care Service Agreements (P.L. 2017, Ch. 112)
 - Defines “direct primary care service agreement” & states that the relationship of the parties to such an agreement is not an insurance relationship
 - Ensures that a DPC fee may be paid by persons or entities other than the patient
 - Ensures that a DPC practitioner may bill separately for services not covered by the DPC service agreement
 - States that a DPC practitioner may enter into separate agreements with an insurance carrier to supplement a DPC service agreement & to develop DPC service pilot projects with state or federal agencies that provide health care coverage

Insurance Practices

- L.D. 1557, An Act To Protect Maine Consumers from Unexpected Medical Bills (P.L. 2017, Ch. 218)
 - Provides that an enrollee who receives a “surprise bill” from an out-of-network provider must pay only the cost-sharing that would be imposed for the services if rendered by a network provider
 - Sets the reimbursement rate for the service by the out-of-network provider at the network rate unless otherwise agreed & provider may not “balance bill” the patient
 - “Surprise bill” defined narrowly
 - Requires carriers to make available provider directories

Insurance Mandates

- L.D. 1237, An Act To Require Insurance Coverage for Contraceptive Supplies (P.L. 2017, Ch. 190)
 - Ensures coverage for contraceptive supplies without cost sharing for at least one drug, device or other product for each contraceptive method
 - If a health care provider recommends a particular contraceptive supply on the basis of medical necessity, coverage must be provided without cost sharing
 - Requires coverage for contraceptives dispensed for a 12-month period at the discretion of the health care provider

Medicaid Policy

- L.D. 761, An Act To Increase Access to Hearing Aids (P.L. 2015, Ch. 237)
 - Codifies current practice in the rules of the DHHS
 - Specifies that one hearing aid is reimbursable under the MaineCare program and that a 2nd hearing aid is reimbursable if an individual meets the department's requirements established by rule
 - Removes the exclusion of batteries and cords and other assistive listening devices from coverage
 - Replaces the term "physician" with the term "primary care provider"

Medicaid Policy

- L.D. 1485, An Act Regarding MaineCare Coverage for Telehealth Services (P.L. 2017, Ch. 307)
 - Establishes the Maine Telehealth & Telemonitoring Group within DHHS to
 - Evaluate technical difficulties
 - Make recommendations
 - Requires DHHS to make an annual report to the HHS Committee on & after 1/1/18
 - Directs DHHS to conduct rulemaking on aspects of MaineCare telehealth coverage, including coverage for group therapy for behavioral health & addiction services through telehealth

Medical Ethics/Rights

- L.D. 46, An Act To Provide Consistency with Regard to Jury Duty Exemption (P.L. 2017, Ch. 275)
 - Eliminates the exemption from jury duty for physicians & dentists in active practice, among other professionals
 - Physicians still may seek an exemption on a case-by-case basis
- L.D. 911, An Act To Prohibit Certain Gifts to Health Care Practitioners (P.L. 2017, Ch. 267)
 - Prohibits a “gift” from a PhRMA/medical device manufacturer to a health care practitioner
 - "Gift" does not include samples of prescription drugs to be given to patients for free, items with a total value of less than \$50 over a calendar year, payments to sponsors of educational programs, honoraria and payments of expenses incurred at an educational conference or meeting, compensation for research, publications or educational materials and salaries or other benefits paid to employees

Mental Health/Substance Abuse

- L.D. 1223, An Act To Facilitate the Continued Operation of the Department of Corrections Intensive Mental Health Unit (P.L. 2017, Ch. 147)
 - removes the 8/1/17 sunset in P.L. 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

Mental Health/SUD

- L.D. 1231, Resolve, To Assess the Need for Mental Health Care Services for Veterans in Maine and To Establish a Pilot Program To Provide Case Management Services to Veterans for Mental Health Care (Resolves 2017, Ch. 24)
 - Establishes a program for the collection of data by hospitals regarding veterans presenting to ERs for behavioral health care
 - Data must be analyzed by DHHS in coordination with the Director of the Maine Bureau of Veterans' Services to quantify the unmet need for mental health care services, particularly inpatient treatment, among veterans and to identify gaps in mental health services at the VA
 - Establishes a 2-year pilot program to provide contracted case management services to veterans in need of mental health care services
 - Provides funding to mitigate the costs to hospitals for collecting and reporting data and to pay for the contracted case management services program

Mental Health/SUD: The Opioid Abuse Crisis

- Joint Order, Establishing the Task Force to Address the Opioid Crisis in the State (S.P. 210)
 - Members include MMA EVP Gordon Smith, Sen. Geoffrey Gratwick, M.D., Steve Diaz, M.D., & Vernon “Trip” Gardner, M.D.
 - Web page: <http://www.maine.gov/legis/opla/OpioidTaskForce.htm>

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1031, An Act To Clarify the Opioid Medication Prescribing Limits Laws (P.L. 2017, Ch. 213)
 - Amends aspects of P.L. 2015, Ch. 488
 - Amends definition of “palliative care” to clarify that it does not require a terminal illness & includes chronic, unremitting, or intractable pain
 - Amends definition of “dispenser” to remove health care practitioners
 - Eliminates ER’s obligation to report controlled substance dispensed by the ER for period of 48 hours or less
 - Permits group practice leader to designate list of individuals authorized to access the PMP
 - Removes requirement that dispenser notify PMP in cases where fraud or duplication is involved, but requires dispenser to contact prescriber
 - Clarifies that PMP check is not required for either IP or OP surgical procedures
 - Clarifies that dispensing in conjunction with surgical procedures is exempt from the 100 MME limit

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 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 (Resolves 2017, Ch. 16)
 - Finally adopted rule recently posted:
file:///C:/Users/amaclean.MMA/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempState/Downloads/FINAL%2014-118%20C.M.R.%20Chapter%2011%20Rules%20Governing%20the%20pmp.pdf

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 273, An Act To Add an Exception to Prescription Monitoring Program Requirements (P.L. 2017, Ch. 122)
 - Amends the exceptions to the requirement in P.L. 2015, Ch. 488 to check the PMP to include the following:
 - Directly orders or administers an opioid or benzodiazepine medication in the ER, an IP hospital, a LTC facility, or a residential care facility
 - Directly orders, prescribes or administers an opioid or benzodiazepine medication to an individual suffering from pain associated with end-of-life or hospice care

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 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 (P.L. 2017, Ch. 87)
 - Permits PMP access by the CMO, Medical Director, or other administrative prescriber of a hospital for the prescribing information of prescribers employed by the hospital

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 479, An Act To Inform Patients of the Dangers of Addicting Opioids (P.L. 2017, Ch. 186)
 - Requires health care entities employing prescribers of opioid medications to develop an opioid prescribing policy that includes risk assessment, informed consent, and counseling on the risk of opioid use by 1/1/18

Public Health

- L.D. 1108, An Act To Restore Public Health Nursing Services (P.L. 2017, Ch. 312)
 - Requires DHHS to fill all public health nursing positions in the DHHS Public Health Nursing Program for which funding is provided
- L.D. 1427, An Act To Make Community Paramedicine Services Permanent (P.L. 2017, Ch. 276)
 - Gives Maine EMS the authority to continue “community paramedicine” in accordance with rules to be developed by the board

Medical Marijuana

- L.D. 764, An Act To Limit the Exclusion of a Patient from Eligibility for an Organ Transplant Based on Medical Marijuana Use (P.L. 2017, Ch. 252)
 - Requires a transplant evaluator to treat the use of medical marijuana in a form not smoked by a potential recipient of an anatomical gift as equivalent to any other prescribed drug

Health Care Reform

- Joint Study Order, to Establish the Task Force on Health Care Coverage for All of Maine (S.P. 592)
 - Interim study on health care reform for Maine based on no prescribed model (not single payer)
 - Depends on private fundraising efforts of principal legislator advocates

Highlights from the Second Regular Session of the 128th Maine Legislature

General Effective Date for second session bills:

Wednesday, August 1, 2018

(adjournment *sine die* was 5/2/18)

Children's Issues

- L.D. 1664, Resolve, Regarding Legislative Review of Portions of Chapters 126 and 261: Immunization Requirements for School Children, Joint Major Substantive Rules of the Department of Education and the Department of Health and Human Services (Resolves 2017, Ch. 32)
 - The bill authorizes final adoption of amendments to the joint DHHS/DOE rule on immunization requirements for school children to include the meningococcal vaccine

Children's Issues

- L.D. 1685, An Act to Create the Barbara Bush Children's Hospital Registration Plate (P.L. 2017, Ch. 400)
 - This bill creates a new specialty registration plate that will generate funds to support The Barbara Bush Children's Hospital at Maine Medical Center
- L.D. 1694, Resolve, Directing the Department of Education To Adopt Protocols Designed To Prevent Youth Suicide (Resolves 2017, Ch. 38)
 - This bill requires the Commissioner of Education to provisionally adopt amended rules on or before 12/31/18 designed to help prevent youth suicide in order to require that school administrative units have protocols for suicide prevention and intervention and counseling services after an incident of youth suicide in place beginning with the 2019-2020 school year

Children's Issues

- L.D. 1774, An Act To Reduce Child Poverty by Leveraging Investments in Families for Tomorrow (P.L. 2017, Ch. 387)
 - The bill makes changes to the Working Families Parents as Scholars Program
 - It renames the program the Higher Opportunity for Pathways to Employment Program
 - It changes eligibility for the program from those who are not qualified for TANF cash assistance to those who are qualified but are not receiving TANF cash assistance
 - It limits participation in the program to 500 participants
 - It adds an asset limit for eligibility
 - It allows the Commissioner of Health and Human Services to limit or suspend the program if sufficient funding is not available
 - It limits participation for 4-year undergraduate degrees to those fields of health care, technology and engineering determined by department rules to allow for changing employment needs in the State

-

Health Care Information

- L.D. 1735, An Act To Authorize Regional Medical Control Committees To Have Access to Maine Emergency Medical Services Data for Purposes of Quality Improvement (P.L. 2017, Ch. 373)
 - The bill provides that a regional medical control committee established to carry out a plan of quality improvement approved by the Department of Public Safety, EMS Board may have access to data collected by Maine EMS that allow identification of persons receiving emergency medical treatment for purposes relating to the approved quality improvement plan so long as the release of the data is approved by the EMS Board, the Medical Direction and Practices Board, and the Director of Maine EMS
 - The bill also clarifies that the EMS Board is required to ensure that confidential information submitted to the board by any entity is easily accessible by that entity without charge for a period of 4 years from the date that the confidential information is submitted to the board

Health Care Information

- L.D. 1388, An Act to Prohibit the Falsification of Medical Records (P.L. 2017, Ch. 410)
 - This bill establishes in the Maine Criminal Code the offense of “falsifying health care records”
 - Depending on the circumstances, this may be either a Class C or D crime

Health Care Reform

- L.D. 1476, An Act to Ensure Continued Coverage for Essential Health Care (P.L. 2017, Ch. 343)
 - The bill incorporates current requirements under the federal Patient Protection and Affordable Care Act for coverage of preventive health services, including services for women, into state law
 - The requirements apply to insurance policies issued or renewed after 1/1/19

Individual licensing/Scope

- L.D. 565, An Act Regarding Prescribing and Dispensing of Naloxone Hydrochloride by Pharmacists (P.L. 2017, Ch. 364)
 - Repeals provision of P.L. 2017, Ch. 249 that prohibits a pharmacist from prescribing or dispensing naloxone hydrochloride after 7/1/19

Individual licensing/Scope

- L.D. 1327, An Act to Expedite Health Care Employment for Military Veterans (P.L. 2017, Ch. 326)
 - This bill establishes the Health Care Employment for Military Veterans Program within the Department of Labor to create a “military-to-civilian crosswalk” of military training & experience with current civilian education & training standards
 - It also requires the DOL to provide direct assistance to eligible veterans seeking civilian health care employment

Insurance: Mandated Benefits

- L.D. 1030, An Act to Require Health Insurance Coverage for the Covered Services Provided by Naturopathic Doctors (P.L. 2017, Ch. 340)
- This bill requires coverage for services provided by naturopathic doctors if those services are within the scope of practice & would be covered if provided by other participating providers
- It prohibits carriers from excluding NDs from their networks so long as the ND is willing to meet the same terms & conditions as other participating providers
- Effective for policies issued or renewed after 1/1/19

Insurance Practices

- L.D. 1875, An Act To Amend the Maine Life and Health Insurance Guaranty Association Act (P.L. 2017, Ch. 382)
 - This bill amends the Maine Life & Health Insurance Guaranty Association Act to incorporate changes adopted by the NAIC in its 2017 amendments to its Life and Health Insurance Guaranty Association Model Act
 - For insolvencies & impairments occurring on & after 7/1/18, HMOs are made members of the association & assessments arising out of long-term care insurance business, which are currently allocated entirely to the health insurance account, are divided equally between the life & health insurance industries
 - The bill also makes various conforming amendments and technical corrections to the Maine Life & Health Insurance Guaranty Association Act & the Insurance Rehabilitation & Liquidation Law
 - The bill allows an insurer that is a member of the Maine Life & Health Insurance Guaranty Association & is not subject to premium taxation to take the tax credit for certain assessments of the association against its income tax liability to this State
 - An insurer that is a member of the association & is exempt from both premium taxation & income taxation in this State may recoup these assessments by a surcharge on its premiums in an amount reasonably calculated to recoup these assessments over a reasonable period of time, as approved by the Superintendent of Insurance

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1619, An Act To Report Limited Information to the Controlled Substances Prescription Monitoring Program Concerning Methadone (P.L. 2017, Ch. 243)
- The bill permits disclosure of methadone prescription information contained in the PMP in emergency circumstances with patient consent

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1730, An Act To Change the Procedures for Veterinarians in the Controlled Substances Prescription Monitoring Program (P.L. 2017, Ch. 360)
 - The bill removes veterinarians from the definition of "prescriber" in the laws governing the PMP so that veterinarians are not required to check the program when prescribing controlled substances, including opioids
 - It provides that veterinarians who dispense benzodiazepines or opioid medications for animals are dispensers within the PMP
 - It requires a veterinarian who dispenses a benzodiazepine or an opioid medication to check the PMP except when the veterinarian is operating in mobile or emergency circumstances or is dispensing less than 48 hours of medication
 - It also addresses the waiver on electronic prescribing of opioids & CME requirements

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1771, An Act to Stabilize Vulnerable Families (P.L. 2017, Ch. 415)
 - The bill requires DHHS to issue a RFP for 2 housing-based programs for mothers affected by SUD who have at least one child under 10 when entering the program
 - The mothers in the programs must receive stable housing & comprehensive services that support recovery & unification with their children
 - The services provided include care coordination, health care, child care, early childhood education, home supports, after-school programming, parenting education, treatment for mental health & SUD, postsecondary education, community-based transportation & employment supports
 - The programs must include data collection to assess long-term recovery outcomes, transition to employment & independence

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1871, An Act To Implement the Recommendations of the Task Force To Address the Opioid Crisis in the State Regarding Respectful Language (P.L. 2017, Ch. 407)
 - The bill removes statutory references to "alcoholic" and "alcoholism" as "substance use disorder" includes both alcohol and drug dependence
 - It also removes statutory references to "drug-dependent person" as this term is included in the term "person with a substance use disorder"
 - It requires that all executive agencies replace references to "substance abuse" with "substance use disorder" in rules, forms, policies, & publications

Mental Health/SUD: The Opioid Abuse Crisis

- L.D. 1892, An Act To Clarify the Prescribing and Dispensing of Naloxone Hydrochloride by Pharmacists (P.L. 2017, Ch. 417)
 - The bill clarifies that a pharmacist must follow protocols adopted by the Board of Pharmacy when prescribing & dispensing naloxone hydrochloride to an individual of any age who is at risk of experiencing an opioid-related drug overdose; who is a member of the immediate family of, or a friend of, an individual at risk of experiencing an opioid-related drug overdose; or who is in a position to assist an individual at risk of experiencing an opioid-related drug overdose

Prescription Drug Issues

- L.D. 1406, An Act to Promote Prescription Drug Price Transparency (P.L. 2017, Ch. 406)
 - The bill directs the MHDO to analyze and post pharmacy data it currently collects to identify prescription drugs, both brand name and generic, that are the most frequently prescribed, are the costliest drugs as determined by total spending and have the highest year-over-year cost increases
 - The MHDO is required to prepare the report annually, beginning with the first report by 12/1/18
 - It also directs the MHDO to develop a plan to collect data from manufacturers that will help explain how prescription drug prices are established
 - The MHDO must submit the plan as well as any recommendations for legislation to the Judiciary Committee by 4/1/19
 - The Judiciary Committee may report out legislation to the First or Second Regular Session of the 129th Legislature

Public Health

- L.D. 958, An Act to Enact the Uniform Emergency Volunteer Health Care Practitioners Act (P.L. 2017, Ch. 396)
 - This bill enacts select provisions of the UEVHCPA regulating & protecting health care practitioners who volunteer during an emergency

Public Health

- L.D. 1719, An Act to Implement a Regulatory Structure for Adult Use of Marijuana (P.L. 2017, Ch. 409)
 - This bill facilitates the development and administration of a regulated marketplace in the State for adult use marijuana and the regulation of the personal use of marijuana and the home cultivation of marijuana for personal adult use pursuant to the Marijuana Legalization Act, as approved by the voters at referendum in November 2016

128th Legislature, First & Second Special Sessions

- Tuesday, 6/19/18 – Thursday, 6/21/18; 7/9/18; 8/30/18; 9/13/18 adjournment *sine die*
- Substantial unfinished business, including many bills on the Special Appropriations Table
 - Children’s issues: 14 bills on MMA tracking list
 - Elder issues: 12 bills
 - Mental health issues: 20 bills
 - Opioid issues: 12 bills, including L.D. 1430, “hub & spoke” bill
 - Practice of medicine issues: 6 bills
 - Miscellaneous health care issues: 8 bills
- General effective date for special session bills: December 13, 2018

Budget issues

- L.D. 925, An Act Making Certain Appropriations and Allocations and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government (P.L. 2017, Chapter 460; effective 7/9/18)
 - Budget bill that includes several provisions addressing the opioid abuse crisis
 - Part E of the bill provides a 15% increase in reimbursement rates for medication management under MaineCare Benefits Manual, Chapter III, Section 65, *Behavioral Health Services*
 - Part G of the bill requires DHHS to support a “hub-and-spoke” system for the treatment and recovery of individuals with substance use disorder
 - Part J of the bill provides additional funding to support the State’s drug court system

Budget/Tax issues

- L.D. 1287, An Act To Strengthen Efforts To Recruit and Retain Primary Care Professionals and Dentists in Rural and Underserved Areas of the State (P.L. 2017, Chapter 435)
 - 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 (from 5 to 10) and allows the credit for primary care professionals to remain in effect beyond 1/1/19

Medical Marijuana

- L.D. 1539, An Act To Amend Maine's Medical Marijuana Law (P.L. 2017, Chapter 452)
 - Comprehensive amendment to medical marijuana regulatory framework dating to 1999
 - Eliminates definition of “debilitating medical condition” thereby permitting a medical provider (physician, physician assistant, or APRN) to issue a “written certification” to a “qualifying patient” within a bona fide patient-practitioner relationship if the practitioner believes marijuana will have a therapeutic or palliative effect
 - Some special rules for minors or those with SUDs
 - “Written certification” valid for no longer than 1 year
 - 1st time practitioner issuing “written certification” must have completed 1-hour CME course approved by DHHS within preceding 24 months

Medicaid

- L.D. 1714, An Act To Clarify Liability Pertaining to the Collection of Debts of MaineCare Providers by the Department of Health and Human Services (P.L. 2017, Chapter 442; effective 7/4/18)
 - The bill clarifies requirements for the definition of an ownership or control relationship in determining when DHHS may offset debts owed to the department by a provider against current MaineCare provider payments
 - It clarifies that DHHS may not offset current reimbursement owed to an entity related by ownership or control to the provider unless the person whose relationship is the subject of the offset has the voting power to govern the operation of the provider owing the debt
 - It prohibits DHHS from imposing liability for a debt owed by a provider on any person except a provider notified in accordance with statute of the debt or a person subject to collection by offset

Children's Issues

- L.D. 1923, An Act To Improve the Child Welfare System (P.L. 2017, Chapter 471; effective 9/7/18)
 - Provides funding for the creation of 16 Human Services Caseworker positions and 8 Customer Representative Associate II positions within DHHS, OCFS
 - It requires DHHS to report on the progress of the department in implementing the provisions of the legislation to the HHS Committee by 1/31/19
 - It requires DHHS to contract for a 3rd-party independent rate study to develop a separate rate for MaineCare reimbursement for trauma-focused cognitive behavioral therapy to be billed under rule Chapter 101: MaineCare Benefits Manual, Section 65. Currently, this therapy is available as outpatient therapy and home-based and community-based treatment under Section 65
 - The rate study must be completed no later than 4/1/19, and DHHS must report to the HHS Committee by 5/1/19
 - DHHS must amend its rules to establish the new rate

State Regulatory Issues

- Joint Rule Chapter 21, Use of Controlled Substances for Treatment of Pain
 - Concerns about potential application in LTC & other health care institutional settings
- Proposed Joint Rule Chapter 12, Joint Rule Regarding Office Based Treatment of Opioid Use Disorder

Federal Issues

- ACA & the health care reform debate
 - Trump Administration
 - U.S. Congress
 - Litigation

2018 Election Campaigns

- Federal

- Mid-term Congressional elections
- Maine's junior Senate seat: Angus King (I) v. Eric Brakey (R) v. Zak Ringlestein (D)
- Maine's 2nd CD: Jared Golden (D) v. Tiffany Bond (I) v. William Hoar (I) v. Bruce Poliquin (R)
- Maine's 1st CD: Mark Holbrook (R) v. Martin Grohman (I) v. Chellie Pingree (D)

- State

- Governor: Shawn Moody (R) v. Janet Mills v. Terry Hayes (I) v. Alan Caron (I)
- 186 seats in the 129th Maine Legislature: 8 physician candidates
- Election information:
<http://www.maine.gov/sos/cec/elec/upcoming/index.html>

2018 Referendum Questions

- L.D. 1864, An Act to Establish Universal Home Care for Seniors and Persons with Disabilities
 - Home care services funded by 3.8% tax on gross income over \$128,400
 - Potential impact on physician recruitment & retention
 - MMA Board of Directors took a position in opposition to the proposal
 - Also opposed by Spectrum, Maine Hospital Association, Home Care & Hospice Association, others

Questions?

Gordon H. Smith, EVP

gsmith@mainemed.com; 215-7461 (Cell)

Andrew B. MacLean, Deputy EVP & General Counsel

amaclean@mainemed.com; 215-7462 (Cell)

Peter P. Michaud, Associate General Counsel

pmichaud@mainemed.com; 475-3312 (Cell)

Maine Medical Association

207-622-3374