

Home Care  
& Hospice  
ALLIANCE OF MAINE



**2016**

**SUMMARY OF SELECTED LAWS**

**Enacted During the Second Regular Session  
of the 127<sup>th</sup> Maine Legislature**

# **Introduction**

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The Second Regular Session of the 127<sup>th</sup> Maine Legislature convened at the State House on January 6, 2016 and adjourned *sine die* (without assigning a day for a further meeting or hearing) on April 15, 2016. The general effective date for nonemergency laws passed in the Second Regular Session is Friday, July 29, 2016.

The primary work of the Alliance was focused on securing increased reimbursement rates for home health/home care services (Sections 40, 96, 19 and 63). L.D. 886, a carryover bill from last session, was sponsored by Rep. Ellie Espling. The bill, as amended, directed the department to:

1. Amend its rules for reimbursement rates for personal care and related services provided under Chapter 101: MaineCare Benefits Manual, Sections 12, 19 and 96 and Chapter 5, Office of Elder Services Policy Manual, Section 63 to reflect the final rates modeled in the February 1, 2016 report "Rate Review for Personal Care and Related Services: Final Rate Models" prepared for the department by Burns & Associates, Inc.
2. Amend its rules to increase the reimbursement rates for home health services provided under the provisions of Chapter 101: MaineCare Benefits Manual, Chapter III, Section 40 by 33%.
3. Estimate the number of hours, and the cost of those hours, of unmet need under Chapter 101: MaineCare Benefits Manual, Sections 12, 19, 40 and 96 and Chapter 5, Office of Elder Services Policy Manual, Section 63. The estimate must include individuals eligible for services but on a waiting list and individuals who are entitled to services that are eligible for reimbursement but are unable to locate individuals or agencies to provide those services.

The bill, as passed into law (Resolve 83), addressed reimbursement rates under the MaineCare Benefits Manual, Sections 12, 19 and 96 and Chapter 5, Office of Elder Services Policy Manual, Section 63 to reflect 50% of the increase in rates noted in the final rates modeled in the February 1, 2016 report. In addition, Resolve 83 directs the department to estimate the number of hours, and the cost of those hours, of unmet need under Sections 12, 19, 40 and 96 and Chapter 5, Office of Elder Services Policy Manual, Section 63. Furthermore, while Resolve 83 did not provide for rates increases for providers of Section 40 services, it does require the department to conduct a rate study of the services in rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 40, Home Health Services with a report to the Legislature having jurisdiction over health and human services matters with findings and recommendations for changes to the rates identified in section 4 no later than January 1, 2017.

Included with this packet, we have provided a list of the Public Laws, Resolves and Carry Over Bills with a link to each of them.

For a complete listing and text (once finalized) of all the laws passed during the session, go to <http://maine.gov/legis/opla/legdig127th-2nd.htm>.

Thank you to the members of the Alliance's Government Affairs Committee, as well as all members who engaged in advocacy efforts on behalf of the Alliance during the past session.

## List of Public Laws 2016

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[P.L., Ch. 388](#)     *An Act To Provide for Tax Conformity and Funding Methods*

(L.D. 1583)     **Summary:** This law addresses tax conformity related issues including funding.

[P.L., Ch. 418](#)     *An Act To Allow Terminally Ill Patients To Choose To Use Experimental Treatments*

(L.D. 180)     **Summary:** This law authorizes manufacturers of drugs, biological products and devices that have completed Phase I of a United States Food and Drug Administration-approved clinical trial but have not yet been approved for general use and remain under clinical investigation to make them available to eligible terminally ill patients. The law does not require a health care practitioner who is licensed in the State or a health care provider that is licensed in the State to provide any service related to an investigational drug, biological product or device. The law prohibits licensing boards from revoking, refusing to renew or suspending the license of or taking any other action against a health care practitioner based solely on the practitioner's recommendation to an eligible patient regarding access to or treatment with such a drug, biological product or device.

[P.L., Ch. 452](#)     *An Act To Enact the Recommendations of the Commission on Independent Living and Disability*

(L.D. 949)     **Summary:** This law includes the final recommendations of the Commission on Independent Living and Disability.

[P.L., Ch. 469](#)     *An Act To Improve the Workers' Compensation System Committee on Labor, Commerce, Research and Economic Development*

(L.D. 1553)     **Summary:** This law makes changes to the Maine Workers' Compensation Act of 1992.

[P.L., Ch. 477](#)

*An Act To Increase Payments to MaineCare Providers That Are Subject to Maine's Service Provider Tax*

(L.D. 1638)

**Summary:** This law provides for an increase in reimbursement rates to eligible MaineCare providers who are subject to the service provider tax.

[P.L., Ch. 481](#)

*An Act To Provide Funding to the Maine Budget Stabilization Fund*

(L.D. 1606)

**Summary:** This law requires the transfer of funds from the unappropriated surplus of the General Fund to the Maine Budget Stabilization Fund.

[P.L., Ch. 488](#)

*An Act To Prevent Opiate Abuse by Strengthening the Controlled Substances Prescription Monitoring Program*

(L.D. 1646)

**Summary:** This law makes changes to the laws governing the Controlled Substances Prescription Monitoring Program and the prescribing and dispensing of opioids and other drugs. It identifies exclusions for prescribing opioid medication to a patient for:

- (1) Pain associated with active and aftercare cancer treatment;
- (2) Palliative care, as defined in Title 22, section 1726, subsection 1, paragraph A, in conjunction with a serious illness, as defined in Title 22, section 1726, subsection 1, paragraph B;
- (3) End-of-life and hospice care;
- (4) Medication-assisted treatment for substance use disorder; or
- (5) Other circumstances determined in rule by the Department.

[P.L., Ch. 490](#)

*An Act To Encourage Maine Employers To Offer and Employees To Enroll in Disability Income Protection Plans in the Workplace*

(L.D. 1542)

**Summary:** This law authorizes an employer to provide its employees a group disability income protection plan, which is a group policy instituted by an employer that provides income benefits to an employee who is unable to work for an extended period of time because of sickness or an accident.

[P.L., Ch. 506](#)

*An Act Regarding the Long-term Care Ombudsman Program*

(L.D. 1617)

**Summary:** This law, which is a recommendation of the Commission To Study Difficult-to-place Patients, amends the law governing the long-term care ombudsman program to clarify that the long-term care ombudsman has the authority to act as a resource during the hospital discharge process to assist patients with complex medical needs who experience significant barriers to admission in a residential care facility, nursing facility or assisted living facility or program. It also provides funds to allow the program to contract for 2 new full-time positions within the program.

## List of Resolves 2016

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[Resolve, Ch. 65](#) *Resolve, Regarding Legislative Review of Portions of Chapter 40: Rule for Medication Administration in Maine Schools, a Major Substantive Rule of the Department of Education*

(L.D. 1556) **Summary:** This resolve provides for legislative review of portions of Chapter 40: Rule for Medication Administration in Maine Schools, a major substantive rule of the Department of Education.

[Resolve, Ch. 83](#) *Resolve, Directing the Department of Health and Human Services To Increase Reimbursement Rates for Home-based and Community-based Services*

(L.D. 886) **Summary:** This resolve directs the Department of Health and Human Services to increase the reimbursement rates for home-based and community-based services.

[Resolve, Ch. 87](#) *An Act To Require the State To Adequately Pay for Emergency Medical Services*

(L.D. 1465) **Summary:** This resolve requires that the Department of Health and Human Services to conduct a rate study of Chapter 101: MaineCare Benefits Manual, Section 5, Ambulance Services no later than January 1, 2017, and to submit a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the department's progress on developing a reimbursement rate for community paramedicine services pursuant to section 1 of this resolve.