

CCSM Legislative Bill Summaries: State of Maine, 127th Legislature 1st Session June 2015

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Name of Bill	Brief Summary	Main Sponsor	CCSM Position	Testimony	Bill/Status/Outcome
<p>LD 440 "An Act To Create a Secure, Therapeutic Mental Health Unit Committee: Criminal Justice</p>	<p>This bill provides for the establishment of a secure, therapeutic mental health unit for defendants undergoing court-ordered assessments to determine their competency to stand trial or their criminal culpability and to provide therapeutic care for forensic patients. The bill establishes the unit as follows.</p> <ol style="list-style-type: none"> 1. It directs the Commissioner of Corrections and the Commissioner of Health and Human Services to enter into an agreement to establish the unit with the sheriff of either Cumberland County or Somerset County. 2. It directs the Department of Corrections to provide security for the unit. Security staff must be dedicated to the unit and trained to provide security in a mental health hospital environment. 3. It directs the Department of Corrections to provide therapeutic mental health care for the unit. The therapeutic mental health care must meet standards established by a national organization on correctional facilities mental health standards. The Department of Health and Human Services may also provide mental health services to the unit upon agreement with the 	<p>Sen. Gerzofsky</p>	<p>Supported with stated concerns</p>	<p>Yes</p>	<p>Tabled</p>

	<p>Department of Corrections and the county jail.</p> <p>4. It requires that the population in a secure, therapeutic mental health unit be separated by sight and sound from the general jail population.</p> <p>5. It specifies that a person under a court order to undergo a mental evaluation by the State Forensic Service must be admitted to the unit unless the Department of Health and Human Services determines that the person's mental health condition contraindicates admittance to the unit, the person is an inmate at a state correctional facility or there is not a suitable bed available.</p>				
<p>LD 477: "Resolve, To Increase Funding To Support Peer Centers Committee: Health and Human Services Committee:</p>	<p>This resolve requires an increase in funding to peer centers, also referred to as social clubs or drop-in centers, of 10% on the fiscal year 2014-15 contract budget amount for each of the 12 peer centers. A one-time payment must be made by October 1, 2015 and then be included in the baseline in the future.</p>	Rep. Stuckey	Supported	Yes	Placed on Appropriations Table
<p>LD 525: "Resolve, To Direct the Department of Health and Human Services To Report on Efforts To Reach in Rural Areas Persons Who Are Elderly, Disabled or Mentally Ill." Committee: Health and Human Services Committee: Health and Human Services</p>	<p>This resolve requires the Department of Health and Human Services to report on department efforts to reach in rural areas persons who are elderly, disabled or mentally ill. This resolve requires the department, in developing its report, to have at least one public meeting in Piscataquis County and to particularly focus on elderly, disabled and mentally ill persons who are not able to use or who have no access to the Internet and other electronic forms of communication</p>	Sen. Davis	Monitored	No	Vetoed by Governor - Overridden

	technology or who have limited contact with the department.				
LD 534: An 'Act To Increase Crisis Intervention Training in the State Committee: Health' and Human Services	This bill requires that, beginning January 2017, at least 20% of law enforcement officers in a municipal police department and in a county sheriff department must complete the so-called Memphis model of crisis intervention team training. Beginning June 2017, officers who have not completed this training must be certified in mental health first aid.	Rep. Malaby	Supported	Yes	Dead
LD 539: "An Act To Increase Utilization of the Dorothea Dix Psychiatric Center" Committee: Health' and Human Services	This bill proposes to enact measures designed to provide greater utilization of the Dorothea Dix Psychiatric Center and to provide funding to maximize the center's ability to fulfill the needs of the State.	Rep. Frey	Monitored	No	Dead
LD 604: "An Act To Encourage Communication Regarding Persons with Mental Illness" Committee: Health' and Human Services	This bill allows a health care practitioner to disclose health care information to the parent or guardian of an individual with a mental health diagnosis who withholds consent because of the individual's compromised view of that individual's mental health. A health care practitioner is not liable for failing to make a disclosure if the practitioner determines in good faith that there is no serious or imminent threat and the disclosure would interfere with providing effective care.	Rep. Malaby	Monitored	No	Dead
LD 657: "An Act To Provide Enhanced Mental Health Services to the County Prison Population" Committee: Criminal Justice	This bill proposes to increase funding for mental health care services for the county prison population, including educating and training prison employees in behavioral health assessment and protocols on an annual basis. It	Rep. Beavers	Supported	Yes	Ought Not to Pass (Maj)

	would also require that every county jail have a mental health worker on site at least 8 hours a day.				
<p>LD 736: “An Act To Allow Access to Certain Death Records” Committee: Health and Human Services</p>	<p>This bill requires that when a physician or clinical psychologist has evaluated a person for the of purpose providing a 2nd opinion on whether the person meets the criteria for emergency admission to a psychiatric hospital and determines that the person does not meet the criteria, the physician or clinical psychologist must destroy the written application for emergency admission. The bill also 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 of Health and Human Services.</p>	Sen. Volk	Supported	Yes	Ought to Pass as Amended
<p>LD 841: “Resolve, Directing the Department of Health and Human Services To Develop a Bus Pass Program” Committee: Health and Human Services</p>	<p>This resolve requires the Department of Health and Human Services to develop and implement a bus pass program by January 1, 2016 to serve individuals who live in areas served by public bus systems and who use those transport systems to attend medical appointments reimbursed by MaineCare under the nonemergency transportation program within the MaineCare program and participate in other programs that are aimed at fostering independence and economic security such as the ASPIRE-TANF program. The department must identify funding sources that could</p>	Rep. Stuckey	Supported	Yes	<p>Ought Not to Pass</p> <p>Rep Stuckey is pulling together a small stakeholders’ group to meet with representaives from MaineCare & Logisticare to investigate the possibility of doing a bus pass pilot program. Further info TBA.</p>

	<p>be leveraged, including funding currently used for the nonemergency transportation program within the MaineCare program and possible Department of Labor and Department of Education resources targeted toward employment. The department must report to the Joint Standing Committee on Health and Human Services by March 1, 2016 on the status of the bus pass program including the number of passes issued and individuals being served and sources of funding.</p>				
<p>LD 842: “An Act To Establish Peer Center Reimbursement” Committee: Health and Human Service</p>	<p>This bill directs the Department of Health and Human Services to establish reimbursement rates for peer centers.</p>	Rep. Stuckey	Monitored	No	Carried Over
<p>LD 966: “An Act To Assist Patients in Need of Psychiatric Services Committee: Health’ and Human Services”</p>	<p>The bill will seek to do the following: 1. Create and fund additional psychiatric beds for geriatric patients; 2. Review and make changes to the bed hold regulations for nursing homes and group homes to create incentives to take difficult mental health patients back after a hospital stay; 3. Review and make changes to the bed hold regulations for nursing homes and group homes to create penalties for facilities that refuse to take difficult mental health patients back after a hospital stay; 4. Provide psychiatric urgent care centers with accompanying medically supervised crisis beds; 5. Create and fund additional</p>	Rep. Malaby	Monitored	No	Carried Over

	<p>psychiatric observation units;</p> <p>6. Create an effective and professional mental health placement rapid response team or ombudsman in the Department of Health and Human Services; and</p> <p>7. Provide additional MaineCare reimbursement for long-stay mental health emergency department patients and patients awaiting placement in psychiatric units.</p>				
<p>LD 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”</p> <p>Committee(s): Health & Human Services & Appropriations</p>	Biennial Budget	Rep Rotundo		Yes w/ concerns	
<p>LD 1030: “An Act To Better Coordinate the Work of Mental Health Crisis Agencies with Law Enforcement Agencies”</p> <p>Committee: Health and Human Services</p>	<p>This bill requires the Department of Health and Human Services to provide assistance to crisis intervention teams and agencies that provide mental health crisis services and to law enforcement agencies to enable them to coordinate mental health crisis services. The bill sets July 1, 2016 as the date by which a crisis intervention team or agency must enter into and sign a memorandum of understanding with each law enforcement agency that provides law enforcement services in the area of the State served by the crisis intervention team or agency. The bill requires the memorandum of understanding to be effective for 3 years and to be renewed for a 3-</p>	Rep. Dion	Monitored	No	Carry Over Requested

	<p>year period upon expiration. The memorandum of understanding must include descriptions of the following: the internal processes that the law enforcement agency uses to identify a person in need of mental health crisis services; the protocol that the law enforcement agency uses to share a contact report with a crisis intervention team or agency; the process the crisis intervention team or agency uses to receive the report; the protocol that the crisis intervention team or agency uses to communicate with a person in need of mental health services or the guardian or family members of that person; and the procedures to be used to convene on a quarterly basis multidisciplinary team meetings to review experiences and discuss opportunities for improvement.</p>				
<p>LD 1145: “An Act to Improve Maine's Involuntary Commitment Processes” Committee: Judiciary</p>	<p>This bill is 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. It amends the laws governing involuntary hospitalization by:</p> <ol style="list-style-type: none"> 1. Authorizing a health care practitioner to administer involuntary treatment to a person being involuntarily held or detained if the person's condition poses a serious, imminent risk to the person's physical or mental health and other conditions are met; 2. Specifying that family members may be the source of history and 	<p>Rep. Malabuy</p>	<p>Supported through LD 1738</p>	<p>Yes Through Workgroup participation</p>	<p>Ought to Pass as Amended</p>

	<p>information that forms the basis of an opinion of a medical practitioner regarding a person for whom an emergency application for admittance to a psychiatric hospital has been filed;</p> <p>3. Creating exceptions to the 24-hour hospital emergency hold period to authorize a hospital to involuntarily detain a mentally ill person meeting certain criteria for emergency psychiatric hospitalization for 2 additional 48-hour periods;</p> <p>4. Limiting the State's costs related to transporting certain patients to reasonable costs;</p> <p>5. Allowing for the discharge of an involuntary petition if the patient subsequently agrees to voluntary commitment;</p> <p>6. Clarifying that orders of involuntary commitment and treatment also transfer with a patient that is transferred from one hospital to another; and</p> <p>7. Permitting medical examinations and consultations required or permitted under involuntary hospitalization laws to be conducted using telemedicine technologies.</p>				
<p>LD 1209: “An Act To Increase the Effectiveness of Peer Supports in the State”</p> <p>Committee: Health and Human Services</p>	<p>This bill establishes a peer support services program in the office of substance abuse and mental health services within the Department of Health and Human Services. The bill requires each assertive community treatment team to include at least one full-time intentional peer support specialist certified by the department.</p> <p>"Intentional peer support specialist"</p>	Rep. Gattine	Supported	Yes w/ an amendment	Carried over as amended

	<p>is defined. The bill requires the department to appoint and convene the Intentional Peer Support Advisory Committee. The bill requires the department to adopt necessary rules and designates the rules as routine technical rules. The bill requires the costs of intentional peer support services and the advisory committee to be met through the transfer of funding from the Mental Health - Community account and the Mental Health - Community Medicaid account and through the discontinuance of 2 full-time positions within the office of substance abuse and mental health services.</p>				
<p>LD 1214: “An Act To Implement the Recommendations of the Mental Health Working Group” Committee: Judiciary</p>	<p>This bill contains the recommendations of the mental health working group pursuant to Resolve 2013, chapter 106. Part A amends Maine's involuntary hospitalization statutes by:</p> <ol style="list-style-type: none"> 1. Creating exceptions to the 24-hour hospital emergency hold period to authorize a hospital to detain on an involuntary basis a mentally ill person meeting criteria for emergency psychiatric hospitalization for up to 2 additional 48-hour periods; 2. Making a non substantive clarification to a section of law; 3. Codifying Maine's common law emergency exception to informed consent to authorize a medical practitioner to administer involuntary treatment to a patient being involuntarily held or detained if the patient's condition poses a serious, 	Rep. Hobbins	Supported	Yes	Carry Over Requested

	<p>imminent risk of harm to the patient or others and other conditions are met;</p> <p>4. Limiting to reasonable costs the State's costs related to transporting certain patients;</p> <p>5. Allowing for the release or discharge of an involuntary patient if the patient subsequently agrees to voluntary commitment;</p> <p>6. Clarifying that orders of involuntary commitment and involuntary treatment transfer with a patient who is transferred to a different hospital; and</p> <p>7. Permitting medical examinations and consultations required or permitted under the State's involuntary hospitalization statutes to be conducted using telemedicine technologies.</p> <p>Part B expands the duties of the State Forensic Service within the Department of Health and Human Services to include performing the duties of an independent examiner at the direction of the District Court in response to applications for involuntary commitment and involuntary treatment</p>				
<p>LD 1240: “An Act To Phase Out the Payment of Subminimum Wages to Workers with Disabilities”</p> <p>Committee: Labor, Commerce, Research and Economic Development (LCRED)</p>	<p>Currently the State Government and Federal Government may issue special certificates permitting an employer to pay an individual with a physical or mental disability a wage less than the State's minimum wage based on the individual's ability to perform the duties required for that employment in comparison to the ability of a person who does not have a physical or mental disability to perform the same duties. This bill</p>	Sen. Katz	Supported	Yes	Carry Over Requested

	<p>prohibits the issuance of such certificates. Existing special certificates authorizing payment of less than the minimum wage remain in effect until the earlier of their expiration date and November 1, 2018. After the expiration of a previously issued certificate, an individual who was covered by such certificate may apply to the Director of the Bureau of Labor Standards within the Department of Labor for a special work permit authorizing the payment of wages at less than the minimum wage rate by a certain employer.</p>				
<p>LD 1368 “An Act To Require the Documentation of the Use of Seclusion and Restraint at Mental Health Institutions in the State” Committee: Health and Human Service</p>	<p>This bill provides for the notice, reporting and documentation of the use of restraint or seclusion of a client of a public or private institution that provides services that fall under the jurisdiction of the Department of Health and Human Services. This bill requires the staff responsible for a client subject to restraint or seclusion to attend a debriefing after an incident of restraint or seclusion and to conduct a meeting after 3 incidents involving a client in a one-year period to determine how to reduce the use of restraint or seclusion with that client. This bill requires the chief administrative officer of each institution under the jurisdiction of the Department of Health and Human Services annually to report the aggregate number of incidents of restraint and seclusion for that institution to the Commissioner of Health and Human Services and for the commissioner to report the aggregate number of</p>	<p>Rep. Sirocki</p>	<p>Supported</p>	<p>Yes</p>	<p>Ought to Pass as Amended</p>

	<p>incidents of restraint and seclusion for all those institutions to the joint standing committee of the Legislature having jurisdiction over health and human services matters and authorizes the joint standing committee to report out legislation based on the report. This bill provides for a complaint process for a client or parent or guardian of a client subject to restraint or seclusion at the institution level and at the department level if the complainant is dissatisfied with the institution's response.</p>				
<p>LD 1391 “An Act Regarding the Treatment of Forensic Patients” Committee: Judiciary</p>	<p>This bill 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. It 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</p>	Rep. Malaby	Neither For Nor Against	Yes Stated Concerns around language and due process	
<p>LD 1412 “An Act To Fund a Training Partnership between Riverview Psychiatric Center and the University of Maine at Augusta” Committee: Health and Human Services</p>	<p>This bill provides a one-time General Fund appropriation of \$500,000 in fiscal years 16 2015-16 and 2016-17 for Riverview Psychiatric Center to contract with the University of 17 Maine at Augusta to provide training and</p>	Speaker Eves	Monitored	No	Ought To Pass As Amended

	educational opportunities for its staff.				
<p>LD 1428 “An Act To Establish the Forensic Treatment Fund To Establish a Behavioral Assessment and Safety Evaluation Unit (Governor's Bill)”</p> <p>Committee: Judiciary</p>	<p>This bill establishes and appropriates funds to the Forensic Treatment Fund in the Department of Health and Human Services. It funds the establishment and operation by the Commissioner of Health and Human Services of a behavioral assessment and safety evaluation unit.</p>	Rep. Martin	Monitored	No	MAJ: Ought Not To Pass, MIN: Ought To Pass As Amended
<p>LD 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 (Governor's Bill)”</p> <p>Committee: Judiciary</p>	<p>This bill provides:</p> <ol style="list-style-type: none"> 1. That if a law enforcement officer transports or causes to be transported to a hospital or mental health facility a person who is in the custody of that law enforcement officer, the hospital or mental health facility may not discharge that person from care unless the person leaves in the custody of a licensed law enforcement officer and the hospital or mental health facility must provide to that law enforcement officer or the relevant law enforcement agency a report that includes, if known, the name, residence, sex and age of the person and the date and time at which the person is scheduled to be discharged; 2. That law enforcement officers be given full access to hospitals and mental health facilities in order to serve defendants with protection from abuse orders; and 3. That a hospital, mental health facility or other person who in good faith makes a report, provides information or cooperates in an investigation in accordance with the 	Rep. Stetkis	Against	Yes	

	Maine Revised Statutes, Title 34-B, section 1207, subsection 10 is immune from civil or criminal liability or professional licensure action arising out of that action or actions.				