



What Happened in 2013 and What's on the Docket in 2014: Legislative Update

Maine Chapter AAP
Fall Educational Conference
November 2, 2013

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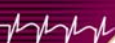



Maine Medical Association

- Voluntary membership association of more than 4,000 Maine physicians, residents, and medical students
- Formed in 1853
- Mission: to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens

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Maine Medical Association

- Activities:
 - Educational Programming/CME Credentialing
 - Peer Review Program
 - Medical Professionals Health Program
 - Manage specialty medical societies
 - Legal services
 - Legislative and regulatory advocacy

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Legislative and Regulatory Advocacy

- Advocates the interests of Maine physicians and their patients before the legislative and executive branches of federal and state government
- Advocacy team includes:
 - Gordon H. Smith, Esq., Executive Vice President
 - Andrew B. MacLean, Esq., Deputy Executive Vice President
 - Jessa Barnard, Esq., Associate General Counsel


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Legislative Advocacy - The Policy Makers

- 186 Legislators
 - 126th Legislature (2013-2014)
 - 19 D, 15 R, 1 U in Senate
 - 89 D, 58 R, 4 U in House
 - If 2/3 vote needed: 24 in Senate, 101 in House
- 151 members of the House of Representatives, each representing 8443 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
- Find your legislators:
<http://www.maine.gov/legis/house/townlist.htm>

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Physicians in 126th Legislature

- Rep. Linda Sanborn, M.D. (D), House District 130, parts of Buxton & Gorham
- Sen. Geoffrey Gratwick, M.D. (D), Senate District 32, Bangor & Hermon
- Rep. Ann Dorney, M.D. (D), House District 86, Madison, Norridgewock, & Solon
- Rep. Jane Pringle, M.D. (D), House District 111, part of Windham


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126th Legislature's Senate Leadership

- Senate President: Sen. Justin Alford (D-Cumberland)
- Senate Majority Leader: Sen. Seth Goodall (D-Sagadahoc) until July
 - Sen. Troy Jackson (D-Aroostook) after July
- Assistant Senate Majority Leader: Sen. Troy Jackson (D-Aroostook)
 - Sen. Anne Haskell (D-Cumberland) after July
- Senate Minority Leader: Sen. Michael Thibodeau (R-Waldo)
- Assistant Senate Minority Leader: Sen. Roger Katz (R-Kennebec)


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126th Legislature's House Leadership

- Speaker of the House: Rep. Mark Eves (D-North Berwick)
- House Majority Leader: Rep. Seth Berry (D-Bowdoinham)
- Assistant House Majority Leader: Rep. Jeff McCabe (D-Skowhegan)
- House Minority Leader: Rep. Kenneth Fredette (R-Newport)
- Assistant House Minority Leader: Rep. Alexander Willette (R-Mapleton)

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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)
- Governor's action (10 days to sign or veto)
- Law (effective 90 days after adjournment, unless emergency or other specified date; citation is "Public Law" or "Resolve")

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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://janus.state.me.us/house/jtcomlst.htm>

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MMA Advocacy Activities

- MMA Legislative Committee
 - Monitor, Support, Oppose
- Committee Hearing & Work Session
 - Staff testifies, members testify, organize other specialty societies to testify, submit written comments, discuss with committee members, participate in work session
- Floor Action
 - Talk with members, draft floor materials, send action alerts to members

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Opportunities for Member Advocacy

- MMA Legislative Committee
 - Lisa D. Ryan, D.O., Chair
- Regular communications through meetings, conference calls, *Maine Medicine*, & *Maine Medicine Weekly Update*
- Testifying in person, submitting written testimony, contact legislators, submit op-eds or letters to the editor
- Doctor of the Day Program
- Physicians' Day at the Legislature

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Tracking Maine Legislation

- Maine legislature's web site:
<http://www.maine.gov/legis>
 - 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>

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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

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House Contact Info.

The Honorable John/Jane Doe
 Maine House of Representatives
 State House Station #2
 Augusta, Maine 04333-0002
 1-800-423-2900 (session only)
 207-287-1400

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Senate Contact Info.

The Honorable John/Jane Doe
 The Maine Senate
 State House Station #3
 Augusta, Maine 04333-0003
 1-800-423-6900 (session only)
 207-287-1540

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Laws Enacted with Day to Day Impact on your Practice

Go into effect Oct. 9, 2013 unless otherwise specified

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Medical Records/Confidentiality

- LD 23/LD 1500: Cost of Medical Records
 - Paper records: \$5 for first page and \$.45 per subsequent page with \$250 ceiling.
 - Electronic records: "Reasonable actual costs of staff time" to create or copy record plus supplies and postage. Cannot include retrieval fee, costs of new technology, maintenance, data access or storage fees. \$150 ceiling.

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Medical Records/ Confidentiality

- LD 882, Law Enforcement
 - Makes Maine law more consistent with federal law, allowing disclosure of health care information if, in good faith, disclosure is made to avert a serious threat to health or safety and is made to someone able to avert or lessen the threat

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Medical Records/ Confidentiality

- LD 534, Mental Health Services
 - Current law: requires pt authorization for disclosure of health info outside of the office/facility if reflects mental health services provided by clinical nurse specialist, psychologist, social worker, LCPC or psychiatrist.
 - New law: allows disclosure without authorization to a health care practitioner, facility or payor for purposes of care management or coordination of care. Disclosure of psychotherapy notes remains governed by HIPAA. Shall make a reasonable effort to notify the individual of the disclosure.

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Health Care Costs

- LD 990, Price list
 - Requires health care practitioners to maintain, inform patients of, and make available a price list (as billed without insurance) of services and procedures that they provided at least 50 times in the past year. Must include codes "listed by diagnosis" (advising to use CPT code and descriptor)
 - Must make information available about cost data on MHDO website
 - Effective 1/1/14

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Scope of Practice/Licensing

- LD 198, Physician Delegation
 - Physician may now delegate activities to support staff (not just employees) and delegate without being present on the premises at the time the activities are performed.
- LD 727, Practitioner Transparency
 - Law requires full disclosure in advertising the license held (MD, DO, NP, etc); requires name badge in any face-to-face patient encounter; requires display of license

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Scope of Practice/Licensing

- LD 1437, BOLIM Clean Up Bill
 - Allows for licensing of dual trained oral & maxillofacial surgeon/MD
 - Allows discipline for: failure to produce documents on request to Board, failure to timely respond to complaint notification
 - Requires PAs to report PAs & physicians to Board for unprof. conduct
 - Allows Board-ordered evaluations to be done by someone other than physician

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Scope of Practice/Licensing

- LD 32, Pharmacist Vaccine Administration
 - A pharmacist may administer vaccines licensed by the FDA that are outside the guidelines recommended by the CDC/ACIP to an adult when stated on prescription (to allow shingles vaccine to those under 60)
- LD 1134, Pharmacist Collaborative Practice
 - Authorizes rulemaking allowing pharmacists to examine, diagnose, and treat under delegation of an "authorized practitioner." The pharmacist must be trained in the area of the collaboration and can only monitor for 3 months before allowing examination, dx or tx under delegation

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Scope of Practice/Licensing

- LD 198, Nurse Practitioners as School Health Advisor
 - Family or pediatric nurse practitioners can fill the role of school physicians
- LD 556, Physician Assistant Licensing
 - The law adds a PA to both the medical and osteopathic Boards; requires joint PA rules by the Boards; authorizes delegation by PAs; repeals the law disallowing PA owned practice; and calls for a single PA license.

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Prescription & Other Drugs

- LD 388, PMP Enrollment
 - Directs Substance Abuse Services Commission to develop a process to increase participation in the PMP & work with licensing boards to develop automatic enrollment at the time of licensing or renewal of a license; effective immediately
- LD 171, Drug Importation
 - A licensed retail pharmacy located in Canada, the UK, Australia or New Zealand that meets its country's statutory and regulatory requirements may export prescription drugs by mail or carrier to a resident of Maine

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Prescription & Other Drugs

- LD 338, Atypical Antipsychotics in Children
 - Requires DHHS to adopt rules regarding use of atypical antipsychotic medications by children under age 17 (covered by MaineCare); rules must require that the prescriber of an atypical beyond the recommended period provide documented justification as to why the child should continue taking the medication and to require that the prescriber perform a timely assessment and ongoing monitoring
 - effective after rules promulgated and adopted

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Prescription & Other Drugs

- LD 1062, Medical Marijuana
 - Adds to list of conditions for which patient may qualify for medical marijuana program:
 - Post-traumatic stress disorder
 - Inflammatory bowel disease
 - Dyskinetic and spastic movement disorders and other diseases causing severe and persistent muscle spasms

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Public Health

- LD 597, Lyme Disease
 - Every health care provider that orders a laboratory test for the presence of Lyme disease shall provide the patient with a copy of the results of the test
 - Requires CDC to include additional information on its website about Lyme disease, including treatment alternatives

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Public Health

- LD 460, Screening for Heart Conditions
 - Requires hospitals, birthing centers and other birthing services to test newborn infants by means of appropriate technology for the presence of critical congenital heart disease; rulemaking may require reporting to DHHS; effective immediately

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Public Health

- LD 253, Fetal Death Certificates
 - This bill allows a fetal death certificate to be filed with the State Registrar of Vital Statistics and requires a hospital or an institution to prepare a fetal death certificate with medical information provided by a physician or other person in attendance.

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Mandatory Reporting

- LD 257, Prenatal Drug Exposure
 - Amends current law on reporting to DHHS by a health care provider involved in the delivery or care of an infant with prenatal exposure to drugs as follows:
 - changes "reports" to the department to "notifications" & repeals the requirement that the department investigate all reports
 - changes "suffering from withdrawal symptoms" to "demonstrating withdrawal symptoms that require medical monitoring or care beyond standard newborn care"
 - defines "fetal alcohol spectrum disorders" and adds it to the conditions of an infant that require notification to the department

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Mandatory Reporting

- LD 1024, Report to Licensing Board
 - DHHS will be required to make a report to the licensing board of a professional who appears to have violated the mandatory reporting law
- LD 1523, Additional Reports Required
 - Requires mandated reporters to report the following in any infant under 6 months or otherwise non ambulatory: fracture of a bone; substantial bruising or multiple bruises; subdural hematoma; burns; poisoning; or injury resulting in substantial bleeding, soft tissue swelling or impairment of an organ

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Insurance Coverage & Practices

- LD 386, Tobacco Cessation Benefit
 - Restores comprehensive tobacco cessation benefit in the MaineCare program - implementation date uncertain; rx products required to be covered under ACA by 1/1/14
- LD 390, Ambulatory Surgical Centers
 - Restores MaineCare reimbursement for services provided in ambulatory surgical centers. Carried over to 2014.

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Insurance Coverage & Practices

- LD 990, Insurance Profiling Programs
 - Requires that any cost metric used by insurance carriers in a provider profiling program be covered by existing transparency provisions in the health plan improvement laws. Also requires carriers to provide copies of the data and methodology used in the metric to affected providers.

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Policy & Fiscal Issues

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Budget

- LD 1509, 2013-2015 State Budget
 - 10% cut to outpatient hospital services
 - Cut in "crossover payments" that cover Medicare Part B deductibles and copayments (still being resolved)
 - Study of equalizing payments to hospital-based and non-hospital based physicians (Part MMMM)
 - Avoided last minute proposal to cut rates to all Medicaid providers
 - Avoided proposed cut to critical access hospitals
 - No increase in the cigarette tax or tax on other tobacco products was included
 - Proposed cuts to Drugs for the Elderly and the Medicare Savings Program were avoided.

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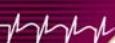



Hospital Debt

- LD 1555
 - Uses future liquor revenue to pay outstanding \$484M settlement debt
 - Attempt to tie to Medicaid coverage not successful

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Tax Policy

- LD 1496, Comprehensive Tax Reform
 - "Gang of 11" proposal for comprehensive tax reform; included new tax on "elective cosmetic medical procedures." Tax Committee voted bill ONTP, sent recommendations to Approps
- Tax on Non-Profits
 - Rs on Appropos proposed tax on large non profits with gross annual receipts of at least \$200,000 and assets greater than \$500,000; has been turned into Non Profit Tax Review Task Force to meet over Fall (Part AA Budget)

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Medicaid Coverage & Reform

- LD 1066, Accepting Federal Funds
 - Bill to accept federal funding to cover approx 70,000 low income Mainers as provided for in ACA. Legislature fails to override veto. 25,000 parents and low income adults will lose coverage 1/1/14.
- LD 1556, Coverage Study
 - Republican proposal to study Medicaid coverage expansion issues; bill tabled

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Medicaid Coverage & Reform

- LD 1487, Managed Care
 - Sen. Roger Katz (R-Kennebec) to implement managed care in the MaineCare program. Carried over to 2014.

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Health Care & Payment Reform

- HP 1136, Health Exchange Implementation
 - Creates the Maine Health Exchange Advisory Committee to evaluate the implementation and operation of any health insurance exchange. Comprised of 5 legislators, insurance carriers, consumers, health providers.
- HP 1123, Commission To Study Transparency, Costs and Accountability of Health Care System Financing
 - 9 Legislators appointed to Commission to review cost and financial data reported by hospitals and other health care facilities in the State and make recommendations for increasing transparency and accessibility of the data

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Health Care & Payment Reform

- **LD 230, Commission on Cost and Quality**
 - Would create a 13 member group to review cost drivers in the health care system; identify specific potential reductions in total health care spending; review and evaluate strategies for payment reform. Carried over to 2014.
- **LD 1345, Single Payer**
 - Bill phases in single payer system by 2017; carried over to 2014

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Mental Health Services

- **LD 1515, Availability of Services**
 - Latest version would have made certain changes to medication and treatment of inmates in mental health unit of correctional facility; required reports on mental health units; carried over to 2014
- **LD 716, Stimulant Medications**
 - Creates a work group to review and make recommendations on appropriate prescribing of certain medications for children with attention deficit hyperactivity disorder
 - Will begin meeting this month (Nov)

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2014

- **Bill titles released**
- **Over 400 submitted; top topics include:**
 - Insurance coverage (expanding federally funded health care)
 - Scope of practice (licensure requirements for advance practice registered nurses)
 - Health insurance mandates and regulation (related to ephinephrine autoinjectors, provider profiling programs, oral health services)
 - Public health measures (motorcycle safety, seat belt use, fireworks restrictions, firearm regulation, toxins in children's products)
 - Mental health services and access (regarding Dorthea Dix, a mental health unit, involuntary medication and commitment)
 - Long term care
- **Plus over 200 carry over bills from 2013**

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2014

- Legislative Council met Oct 30th for preliminary vote on what counts as "emergency" measures
- Legislative Council takes final votes on appeal Nov 21st

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2014

- Other upcoming dates:
 - December 9th, 6-8:30 pm, MMA in-person legislative committee meeting
 - Opening Day January 8th (rally at statehouse regarding MaineCare coverage)

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Questions?

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