



125th MAINE LEGISLATURE

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Legislative Document

No. 1196

H.P. 887

House of Representatives, March 21, 2011

An Act To Clarify Assistance for Persons with Acquired Brain Injury

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in cursive script, reading 'Heather J.R. Priest'.

HEATHER J.R. PRIEST
Clerk

Presented by Representative GOODE of Bangor.
Cosponsored by Senator CRAVEN of Androscoggin and
Representatives: CAIN of Orono, DAMON of Bangor, EVES of North Berwick, PETERSON
of Rumford, SANBORN of Gorham, STEVENS of Bangor, STUCKEY of Portland,
WILLETTE of Mapleton.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §3086, sub-§1**, as repealed and replaced by PL 1989, c. 501,
3 Pt. P, §26, is amended to read:

4 **1. Acquired brain injury.** "~~Head~~ Acquired brain injury" means an insult to the
5 brain resulting directly or indirectly from trauma, anoxia, vascular lesions or infection,
6 which:

- 7 A. Is not of a degenerative or congenital nature;
- 8 B. Can produce a diminished or altered state of consciousness resulting in
9 impairment of cognitive abilities or physical functioning;
- 10 C. Can result in the disturbance of behavioral or emotional functioning;
- 11 D. Can be either temporary or permanent; and
- 12 E. Can cause partial or total functional disability or psychosocial maladjustment.

13 **Sec. 2. 22 MRSA §3087**, as amended by PL 1991, c. 155, is repealed.

14 **Sec. 3. 22 MRSA §3088**, as enacted by PL 1987, c. 494, is repealed and the
15 following enacted in its place:

16 **§3088. Comprehensive neurorehabilitation service system**

17 The department shall, within the limits of its available resources, develop a
18 comprehensive neurorehabilitation service system designed to assist, educate and
19 rehabilitate the person with an acquired brain injury to attain and sustain the highest
20 function and self-sufficiency of the person with an acquired brain injury using
21 home-based and community-based treatments, services and resources to the greatest
22 possible degree. The service programs must include, but are not limited to, care
23 management and coordination, crisis stabilization services, physical therapy, occupational
24 therapy, speech therapy, neuropsychology, neurocognitive retraining, positive
25 neurobehavioral supports and teaching, social skills retraining, counseling, vocational
26 rehabilitation and independent living skills and supports. The department shall develop a
27 posthospital system of nursing, community residential facilities and community
28 residential support programs designed to meet the needs of persons who have sustained
29 an acquired brain injury and assist in the reintegration of those persons into their
30 communities.

31 **Sec. 4. 22 MRSA §3089**, as enacted by PL 2005, c. 229, §1, is amended to read:

32 **§3089. Acquired brain injury services; protection of rights**

33 The department is designated as the official state agency responsible for acquired
34 brain injury services and programs.

35 **1. Services.** In addition to developing the comprehensive neurorehabilitation service
36 system under section 3088, the department shall ensure that the appropriate identification

1 and medical and rehabilitative interventions are provided for persons who sustain
2 acquired brain injuries, including, but not limited to, establishing services:

3 A. To assess the needs of persons who sustain acquired brain injuries and to facilitate
4 effective and efficient medical care, neurorehabilitation planning and reintegration;
5 and

6 B. To improve the knowledge and skills of the medical community, including, but
7 not limited to, emergency room physicians, psychiatrists, neurologists,
8 neurosurgeons, neuropsychologists and other professionals who diagnose, evaluate
9 and treat acquired brain injuries.

10 **2. Protection of rights.** The department shall, within the limits of available
11 resources, seek to ensure the health and safety of persons with acquired brain injuries and
12 protect their rights as citizens of the State and of the United States, except to the extent
13 that these rights have been suspended as the result of court-ordered guardianship.

14 The department shall establish rules consistent with its responsibilities under this
15 section, including, but not limited to, rules concerning the rights and treatment of service
16 recipients, individualized planning and services, positive behavioral interventions and
17 protections, rights to appeal and to have access to advocacy, service quality standards,
18 monitoring and reporting. Rules adopted pursuant to this section are routine technical
19 rules as defined in Title 5, chapter 375, subchapter 2-A.

20 **Sec. 5. Maine Revised Statutes headnote amended; revision clause.** In the
21 Maine Revised Statutes, Title 22, chapter 715-A, in the chapter headnote, the words
22 "assistance for survivors of head injury" are amended to read "assistance for survivors of
23 acquired brain injury" and the Revisor of Statutes shall implement this revision when
24 updating, publishing or republishing the statutes.

25 SUMMARY

26 This bill updates the laws relating to head injury to use the more appropriate term
27 "acquired brain injury." The bill also revises the responsibilities of the Department of
28 Health and Human Services with regard to persons who sustain acquired brain injuries,
29 including the provision of appropriate services and the protection of civil rights.