

## 126th MAINE LEGISLATURE

## **FIRST REGULAR SESSION-2013**

**Legislative Document** 

No. 534

H.P. 353

House of Representatives, February 19, 2013

**An Act To Improve Care Coordination for Persons with Mental Illness** 

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

Millicent M. Macfarland
MILLICENT M. MacFARLAND
Clerk

Presented by Representative PRINGLE of Windham.
Cosponsored by Senator GRATWICK of Penobscot and
Representatives: CASSIDY of Lubec, DION of Portland, MALABY of Hancock, POULIOT of
Augusta, SANBORN of Gorham, SIROCKI of Scarborough, TYLER of Windham, Senator:
CRAVEN of Androscoggin.

## 1 Be it enacted by the People of the State of Maine as follows: 2 **Sec. 1. 22 MRSA §1711-C, sub-§6,** ¶**A,** as amended by PL 2011, c. 347, §6, is 3 further amended to read: 4 A. To another health care practitioner or facility for diagnosis, treatment or care of 5 individuals or to complete the responsibilities of a health care practitioner or facility that provided diagnosis, treatment or care of individuals, as provided in this 6 paragraph. 8 (1) For a disclosure within the office, practice or organizational affiliate of the health care practitioner or facility, no authorization is required. 9 10 (2) For a disclosure outside of the office, practice or organizational affiliate of the health care practitioner or facility, authorization is not required, except that in 11 12 nonemergency circumstances authorization is required for health care information derived from mental health services provided by: 13 14 (a) A clinical nurse specialist licensed under the provisions of Title 32, chapter 31; 15 (b) A psychologist licensed under the provisions of Title 32, chapter 56; 16 17 (c) A social worker licensed under the provisions of Title 32, chapter 83; 18 (d) A counseling professional licensed under the provisions of Title 32, 19 chapter 119; or 20 (e) A physician specializing in psychiatry licensed under the provisions of Title 32, chapter 36 or 48. 21 22 This subparagraph does not prohibit the disclosure of health care information between a licensed pharmacist and a health care practitioner or facility providing 23 24 mental health services for the purpose of dispensing medication to an individual. 25 This subparagraph does not prohibit the disclosure without authorization of health care information covered under this section to a state-designated statewide 26 27 health information exchange that satisfies the requirement in subsection 18, paragraph C of providing a general opt-out provision to an individual at all times 28 and that provides and maintains an individual protection mechanism by which an 29 individual may choose to opt in to allow the state-designated statewide health 30 information exchange to disclose that individual's health care information 31 32 covered under Title 34-B, section 1207; This subparagraph does not prohibit the disclosure without authorization of 33 health care information covered under this section, including health care 34 information derived from mental health services provided by persons described in 35 divisions (a) to (e), to another health care practitioner or facility or to a payor or 36 37 person engaged in the payment for health care under a public program for the 38 payment of health care for purposes of care management and coordination of 39 care;

**Sec. 2. 34-B MRSA §1207, sub-§1, ¶B,** as repealed and replaced by PL 2009, c. 415, Pt. A, §20, is amended to read:

B. Information may be disclosed if necessary to carry out the statutory functions of the department; the hospitalization provisions of chapter 3, subchapter 4; the provisions of section 1931; the purposes of sections 3607-A and 3608; the purposes of Title 5, section 19506; the purposes of United States Public Law 99-319, dealing with the investigatory function of the independent agency designated with advocacy and investigatory functions under United States Public Law 88-164, Title I, Part C or United States Public Law 99-319; or the investigation and hearing pursuant to Title 15, section 393, subsection 4-A; or purposes of care management and coordination of care under Title 22, section 1711-C, subsection 6, paragraph A;

12 SUMMARY

This bill provides an exception to the health care information confidentiality laws that protect mental health information for the purposes of care management and coordination of care.