

§20005. Powers and duties

The department shall: [PL 2011, c. 657, Pt. AA, §16 (AMD).]

1. State Government. Establish the overall plans, policies, objectives and priorities for all state substance use disorder prevention, treatment and recovery functions, except the prevention of drug traffic and the State Employee Assistance Program established pursuant to Title 22, chapter 254-A; [PL 2019, c. 524, §7 (AMD).]

2. Comprehensive plan. Develop and provide for the implementation of a comprehensive state plan for substance use disorder. Any plan developed by the department must be subject to public hearing prior to implementation; [PL 2017, c. 407, Pt. A, §25 (AMD).]

3. Information. Ensure the collection, analysis and dissemination of information for planning and evaluation of substance use disorder services; [PL 2017, c. 407, Pt. A, §25 (AMD).]

4. Coordination; organizational unit. Ensure that substance use disorder assistance and service are delivered in an efficient and coordinated program and, with the oversight of the commission, coordinate all programs and activities authorized by the federal Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970, Public Law 91-616 (1982), as amended, and by the Drug Abuse Office and Treatment Act of 1972, 21 United States Code, Section 1101 et seq. (1982), as amended; and other state or federal programs or laws related to substance use disorder prevention that are not the specific responsibility of another state agency under federal or state law; [PL 2017, c. 407, Pt. A, §25 (AMD).]

5. Budget. Develop and submit to the Legislature by January 15th of the first year of each legislative biennium recommendations for continuing and supplemental allocations, deappropriations or reduced allocations and appropriations from all funding sources for all state substance use disorder programs. The department shall make final recommendations to the Governor before any substance use disorder funds are appropriated or deappropriated in the Governor's proposed budget. The department shall formulate all budgetary recommendations for the Driver Education and Evaluation Programs with the advice, consultation and full participation of the chief executive officer of the Driver Education and Evaluation Programs.

Notwithstanding any other provision of law, funding appropriated and allocated by the Legislature for the department for substance use disorder prevention, treatment and recovery is restricted solely to that use and may not be used for other expenses of the department. By January 15th of each year, the commissioner or the commissioner's designee shall deliver a report of the budget and expenditures of the department for substance use disorder prevention, treatment and recovery to the joint standing committees of the Legislature having jurisdiction over appropriations and financial affairs and human resource matters; [PL 2019, c. 524, §8 (AMD).]

6. Contracts and licensing. Through the commissioner:

A. Administer all contracts with community service providers for the delivery of substance use disorder services; [PL 2017, c. 407, Pt. A, §25 (AMD).]

A-1. Administer all contracts with community service providers for the delivery of gambling addiction counseling services; and [PL 2007, c. 116, §4 (NEW).]

B. Establish operating and treatment standards and inspect and issue certificates of approval for approved treatment facilities, substance use disorder treatment facilities or programs, including residential treatment centers, community-based service providers and facilities that are private

nonmedical institutions pursuant to section 20024 and subchapter 5. [PL 2017, c. 407, Pt. A, §25 (AMD).]

C. [PL 1995, c. 560, Pt. L, §5 (RP); PL 1995, c. 560, Pt. L, §16 (AFF).]

The commissioner may delegate contract and licensing duties under this subsection to the Department of Corrections as long as that delegation ensures that contracting for substance use disorder services provided in community settings is consolidated within the department, that contracting for substance use disorder services delivered within correctional facilities is consolidated within the Department of Corrections and that contracting for substance use disorder services delivered within mental health facilities or as a component of programs serving persons with intellectual disabilities or autism is consolidated within the department.

The commissioner may not delegate contract and licensing duties if that delegation results in increased administrative costs.

The commissioner may not issue requests for proposals for existing contract services until the commissioner has adopted rules in accordance with the Maine Administrative Procedure Act to ensure that the reasons for which existing services are placed out for bid and the performance standards and manner in which compliance is evaluated are specified and that any change in provider is accomplished in a manner that fully protects the consumer of services.

The commissioner shall establish a procedure to obtain assistance and advice from consumers of substance use disorder services regarding the selection of contractors when requests for proposals are issued;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

6-A. Contract award and renewal. Award a new contract through a request-for-proposal procedure. Any contract of \$500,000 per year or more that is renewed must be awarded through a request-for-proposal procedure at least every 8 years, except for the following.

A. A renewal contract with a provider is not subject to the request-for-proposal procedure requirement if the contract granted under this subsection is performance based. [PL 1997, c. 381, §1 (NEW).]

B. Notwithstanding paragraph A, the department shall subject a contract to a request-for-proposal procedure when necessary to comply with paragraph C. [PL 1997, c. 381, §1 (NEW).]

C. A contract under this subsection that is subject to renewal must be awarded through a request-for-proposal procedure if the department determines that:

- (1) The provider has breached the existing contract;
- (2) The provider has failed to correct deficiencies cited by the department;
- (3) The provider is inefficient or ineffective in the delivery of services and is unable to improve its performance within a reasonable time; or
- (4) The provider can not or will not respond to a reconfiguration of service delivery requested by the department; [PL 1997, c. 381, §1 (NEW).]

[PL 1997, c. 381, §1 (NEW).]

6-B. Consumer assistance and advice. Establish a procedure to obtain assistance and advice from consumers of substance use disorder services regarding the selection of contractors when requests-for-proposals are issued.

[PL 2017, c. 407, Pt. A, §25 (AMD).]

7. Uniform requirements. Develop, use and require the use of uniform contracting, information gathering and reporting formats by any state-funded substance use disorder programs. Contracting

standards must include measurable performance-based criteria on which funding allocations are, in part, based;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

8. Reports. By January 15th of each year, report to the Legislature on the accomplishments of the past year's programs, the progress toward obtaining goals and objectives of the comprehensive state plan and other necessary or desirable information;

[PL 1989, c. 934, Pt. A, §3 (NEW).]

9. Funds. Have the authority to seek and receive funds from the Federal Government and private sources to further the purposes of this Act;

[PL 1989, c. 934, Pt. A, §3 (NEW).]

10. Agreements. Enter into agreements necessary or incidental to the purposes of this Act;

[PL 1989, c. 934, Pt. A, §3 (NEW).]

11. Cooperation. Provide support and guidance to individuals, local governments, public organizations and private organizations in their substance use disorder prevention activities;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

12. Rules. Adopt rules, in accordance with the Maine Administrative Procedure Act, necessary to carry out the purposes of this chapter and approve any rules adopted by state agencies for the purpose of implementing substance use disorder prevention, treatment and recovery programs.

All state agencies must comply with rules adopted by the department regarding uniform alcohol and other drug use contracting requirements, formats, schedules, data collection and reporting requirements;

[PL 2019, c. 524, §9 (AMD).]

12-A. Training programs. Provide or assist in the provision of training programs for all persons in the field of treating persons with substance use disorder, persons engaged in the prevention of substance use disorder or any other organization or individual in need of or requesting training or other educational information related to substance use disorder;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

12-B. Motor vehicle operator programs. Administer and oversee the operation of the State's programs related to the use of alcohol by motor vehicle operators;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

13. General authority. Perform other acts or exercise any other powers necessary or convenient to carry out the purposes of this chapter;

[PL 1993, c. 410, Pt. LL, §9 (AMD).]

14. Interdepartmental cooperation. Document to the Legislature's satisfaction active participation and cooperation between the department and the other departments with which it works through the commission;

[PL 2011, c. 657, Pt. AA, §21 (AMD).]

15. Public input. Document an active, aggressive effort to obtain client and public input on its decision-making process through public hearings and other activities conducted by the commission;

[PL 1993, c. 410, Pt. LL, §10 (NEW).]

16. Substance use disorder services plan. Plan for those services funded directly by the department and those additional services determined by the commission to be critical and related;

[PL 2017, c. 407, Pt. A, §25 (AMD).]

17. Program services assessment and implementation. Analyze the existing services system, including the prevention services offered within the State's public school systems, identify gaps,

strengths and weaknesses in the current services, identify priorities for expanding or revising the existing services and develop a specific plan to accomplish the most critical changes that are needed; [PL 1993, c. 410, Pt. LL, §10 (NEW).]

18. Comprehensive training strategy. Establish a comprehensive training strategy designed to develop the capacity of front-line staff in direct human services positions, including appropriate state agency staff, to recognize, assess and refer chemically dependent clients for appropriate treatment; [PL 1993, c. 410, Pt. LL, §10 (NEW).]

19. Fiscal and program accountability. Enhance its current efforts to ensure fiscal and program accountability for the services it purchases and provides; and [PL 2019, c. 398, §1 (AMD).]

20. Review policies. Review the full range of public policies and strategies existing in State Government to identify changes that would strengthen its response, identify policies that might discourage excessive consumption of alcohol and other drugs and generate new funding for alcohol and other drug services; [PL 2019, c. 398, §1 (AMD); PL 2019, c. 524, §10 (AMD).]

21. List of banned performance-enhancing substances. Develop and maintain a list of banned performance-enhancing substances in accordance with Title 20-A, section 6621; [PL 2023, c. 412, Pt. WWW, §1 (AMD).]

22. Certification of recovery residences. Establish by rule criteria for the certification of recovery residences. The criteria for the certification of recovery residences must be based on criteria for recovery residences developed by a nationally recognized organization that supports persons recovering from substance use disorder. Certification of a recovery residence pursuant to this subsection is voluntary. Rules adopted pursuant to this subsection are routine technical rules as defined in chapter 375, subchapter 2-A; and [PL 2023, c. 412, Pt. WWW, §2 (AMD).]

23. Treatment center. Establish one treatment center for substance use disorder treatment that, at a minimum, offers mental health and crisis stabilization services offered by the crisis receiving center in Portland and aligned with United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration standards for crisis care and the standards for crisis care of a national association of state mental health program directors. The treatment center must be located in Kennebec County. The treatment center may have at least 10 beds and offer medically managed withdrawal services. Services offered by the treatment center must be available to all individuals regardless of insurance. The treatment center established pursuant to this subsection shall provide:

A. A receiving center that is open 24 hours per day, 7 days per week to provide low-barrier walk-in access to behavioral health services, including substance use disorder treatment, while a patient waits for access to a higher level of care; [PL 2023, c. 643, Pt. QQQ, §1 (AMD).]

B. [PL 2023, c. 643, Pt. QQQ, §1 (RP).]

C. Access to medication to treat substance use disorder, including medication approved by the United States Food and Drug Administration; and [PL 2023, c. 643, Pt. QQQ, §1 (AMD).]

D. Referral to and coordination with services, including but not limited to local recovery centers, hypodermic apparatus exchange programs and recovery residences. [PL 2023, c. 643, Pt. QQQ, §1 (AMD).]

No later than February 1, 2025 and annually thereafter, the department shall report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the number

of people served, the types of services provided, the attempts made at community outreach and any recommendations relating to the services provided by the treatment center.

[PL 2023, c. 643, Pt. QQQ, §1 (AMD).]

SECTION HISTORY

PL 1989, c. 934, §A3 (NEW). PL 1991, c. 557, §§1,2 (AMD). PL 1991, c. 601, §§6,7 (AMD). PL 1991, c. 792 (AMD). PL 1991, c. 850, §§3,4 (AMD). PL 1993, c. 349, §21 (AMD). PL 1993, c. 410, §§LL7-10 (AMD). PL 1995, c. 560, §§L4,5 (AMD). PL 1995, c. 560, §L16 (AFF). PL 1997, c. 381, §1 (AMD). PL 1997, c. 588, §1 (AMD). PL 2003, c. 673, §V1 (AMD). PL 2003, c. 673, §V29 (AFF). PL 2003, c. 689, §B6 (REV). PL 2005, c. 674, §§1,2 (AMD). PL 2007, c. 116, §§3, 4 (AMD). PL 2011, c. 542, Pt. A, §6 (AMD). PL 2011, c. 657, Pt. AA, §§16-22 (AMD). PL 2017, c. 407, Pt. A, §25 (AMD). PL 2019, c. 398, §1 (AMD). PL 2019, c. 524, §§7-12 (AMD). PL 2023, c. 412, Pt. WWW, §§1-3 (AMD). PL 2023, c. 643, Pt. QQQ, §1 (AMD).

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