



OPLA~Notes

Nonpartisan Quarterly Newsletter

August 2003

Publication of the Office of Policy and Legal Analysis
for the Maine State Legislature

Volume VII, Issue 1

In This Issue

- **Feature Article** 1
Maine Leads with Dirigo Health
- **Did You Know?** 5
Interesting Facts about Maine
- **Pine Tree Development Zones** 5
- **121st Legislature's Budget Challenges** 6
- **Session Statistics** 7
- **Legislative Studies** 7
- **Internet Intersection** 8
- **OPLA Publications** 9



Maine Leads with Dirigo Health

Maine became the first state in the nation to enact legislation providing universal access to health care with the passage of LD 1611, An Act to Provide Affordable Health Insurance to Small Businesses and Individuals and to Control Health Care Costs. The Legislature's Joint Select Committee on Health Care Reform---7 members of the Insurance and Financial Services Committee, 4 members of the Health and Human Services Committee and 4 members of the Appropriations and Financial Affairs Committee--- sent a unanimous committee report to the House and Senate after more than 6 weeks of work sessions and negotiations with the Governor's Office of Health Policy and Finance and other stakeholders, including representatives of health insurance carriers, hospitals, medical providers, businesses and consumers. Referred to as "Dirigo Health," the new law (Public Law 2003, chapter 469) takes effect September 13, 2003. The following is a summary of the provisions of "Dirigo Health."

Dirigo Health to Provide Health Coverage to Individuals and Small Businesses

The cornerstone of the new law is Dirigo Health, an independent state agency that will arrange for the provision of health coverage to small employers, their employees and dependents, and to individuals on a voluntary basis. Dirigo Health will be governed by a 5-member board of directors that must be appointed by the Governor and confirmed by the Legislature. An executive director hired by the board will administer the day-to-day operations of Dirigo Health.

Newsletter Greetings

Welcome to the August 2003 edition of OPLA~Notes. This edition includes articles on the Dirigo Health Plan, the Pine Tree Development Zone economic development program, as well as an article on budget issues that faced the 121st Legislature. The newsletter also includes statistics from the 121st Legislature, First Regular Session, a listing of legislative studies for the interim between the First Regular and Second Regular Session of the 121st Legislature and recent publications by the Office of Policy and Legal Analysis.

Under the law, Dirigo Health must contract with health insurance carriers to offer health insurance to eligible small businesses with 50 or fewer employees and individuals through Dirigo Health Insurance. Coverage through Dirigo Health Insurance must be made available no later than October 1, 2004. The health insurance benefits must be determined by the board and must comply with all statutory requirements of the Maine Insurance Code, including mandated benefits. Employers who participate in Dirigo Health Insurance may be required to contribute up to 60% toward the cost of coverage for employees who work at least 20 hours per week and their dependents. The employer contribution rate for employees who work less than full time must be prorated. Subsidies toward the cost of coverage will be made available to eligible employees and individuals whose earnings are below 300% of the federal poverty level.

In the first year of operation, funding for Dirigo Health is provided through the General Fund. After July 1, 2005, funding for subsidies and the Maine Quality Forum must be provided through savings offset payments paid by health insurance carriers, employee benefit excess insurance carriers and third-party administrators. The Board is required to establish the savings offset amount, not to exceed 4 % of annual premium revenue or its equivalent, on an annual basis and those savings offset payments may not exceed the aggregate cost savings attributable to reductions in bad debt and charity care costs as a result of the operation of Dirigo Health and the expansion in MaineCare.

The law expands MaineCare coverage for children and adults and provides coverage for expansion enrollees who enroll individually and through Dirigo Health as part of an employer group. The expansion of MaineCare eligibility may not become effective until Dirigo Health becomes operational. Monthly reporting of the noncategorical adult MaineCare expansion will be required to monitor enrollment.

Within Dirigo Health, a high-risk pool for persons whose care costs over \$100,000 per year and for those with certain named diagnoses is established. Dirigo Health will develop disease management protocols for persons in the high-risk pool. If after 3 years, Dirigo Health underperforms relative to the trends in average premium rates and average rates of uninsured compared to those trends in states with high-risk pools, Dirigo Health is charged with submitting legislation to create a high-risk pool on January 1, 2008.

Maine Quality Forum

The Maine Quality Forum is established within Dirigo Health to collect and disseminate research, adopt quality and performance measures, coordinate quality data, issue quality reports in conjunction with the Maine Health Data Organization, conduct consumer education and technology assessment reviews, encourage the adoption of electronic technology, make recommendations for the State Health Plan and issue an annual report. To assist the board and the forum, the Maine Quality Forum Advisory Council is created and comprised of representatives of health care providers, consumers and employers.

The law requires the Maine Health Data Organization (MHDO) to adopt rules to collect data on health care quality based on the quality measures adopted by the Maine Quality Forum. The MHDO will also develop user-friendly reports on quality, reports for consumers covering the 15 most common health care services in the State and reports comparing the most common diagnosis-related groups and outpatient procedures in Maine to those in other states. Hospitals and health care practitioners will also be required to publicly disclose information on charges for commonly-offered health care services.

State Health Plan

Under the law, the Governor will issue a biennial State Health Plan beginning in May 2004. The State Health Plan will establish a comprehensive coordinated approach to the development of health care facilities and resources in the State to ensure access to affordable health care, maintain a rational system of health care delivery and promote the development of the health care workforce. The Advisory Council on Health Systems Development will assist in the development of the State Health Plan. The State Health Plan will be used to determine the capital investment fund and to guide decisions on certificate of need application for new and expanded health care facilities and health care services and on health care lending decisions of the Maine Health and Higher Education Facilities Authority.

Cost Containment Measures

To address health care costs, the law makes several changes to the certificate of need (CON) laws. The capital investment fund is established as an annual limit for resources allocated under the certificate of need program. Within the capital investment fund, 12.5% of the total is required to be designated for non-hospital projects for a period of 3 years. The requirements of CON are also applied to the portions of an ambulatory

surgical facility used by patients or to support ambulatory surgical care and to new technology costing over \$1,200,000 in the office of a private practitioner. An automatic adjustment to the CON thresholds will be made annually in an amount based on the Consumer Price Index, medical index. With regard to decisions on individual CON applications, the law expands the criteria on which the Commissioner of Human Services is required to make decisions and requires that those decisions be consistent with the State Health Plan and the limits of the capital investment fund. The law allows the Commissioner of Human Services to receive reports from a panel of experts on CON applications and requires evaluations from the Bureau of Health and the Superintendent of Insurance.

Health care practitioners, hospitals and health insurance carriers will also limit financial growth for a period of one year on a voluntary basis.

Health Insurance Reforms

Health care practitioners will submit claims to health insurance carriers in electronic format beginning October 16, 2003. Until October 16, 2005, health care practitioners with fewer than 10 full-time equivalent employees are not required to submit claims electronically. After that date, those practitioners may apply to the Superintendent of Insurance for an exemption from the electronic claims filing requirement.

Small group health plans (those covering 50 or fewer persons) are required to submit rate filings to the Superintendent of Insurance. Small group rates must be reviewed and approved by the Superintendent and a hearing held before the Superintendent on the proposed rates unless a carrier opts to guarantee a 78% loss ratio or refund excess premiums. Individual and small group health insurance rates must reflect any savings offset payments required to be paid to fund Dirigo Health and also reflect any recovery of those offsets through reduced bad debt and charity care costs in their premium rates. Large group health carriers will annually file a certification to the Superintendent that rating practices and methods meet actuarial principles and that savings offset payments and recovery offsets have been properly included in the filing. The Superintendent of Insurance is also required to adopt rules for the filing of supplements to annual reports by health insurers and health maintenance organizations that contain general, understandable and comparable financial information about the in-state operations and results of those carriers.

The law allows managed care health plans to apply to Superintendent of Insurance for permission to offer health plans with financial incentive provisions to encourage the use of designated providers of specialty and hospital care if the plan does not exceed the Bureau of Insurance Rule 850 travel standards by 100 percent and meets quality criteria adopted by rule. Generally, Bureau of Insurance Rule 850 requires that providers of specialty and hospital care be located within 60 minutes travel time of an enrollee's residence. If approved by the Superintendent, the law would allow a managed care plan to use financial incentives to encourage the use of certain providers located up to 2 hours from an enrollee's residence. The Superintendent of Insurance is required to adopt rules relating to the quality criteria by January 1, 2004 and submit those rules for legislative review before final adoption. Unless continued by the Legislature, this provision relating to flexibility from Rule 850 is repealed on July 1, 2007.

Other Provisions

Other provisions of the law include:

- The restoration of \$500,000 in General Fund money to restore the physician incentive payment program within the MaineCare program;
- A study of MaineCare reimbursement rates for health care providers by the Department of Human Services that must be completed by January 15, 2004;

- The creation of the Commission to Study Maine's Hospitals to assess the role of community hospitals in the State and to make recommendations regarding public policy initiatives to better define the role of community hospitals and equip them to serve Maine residents;
- The creation of the Task Force on Veterans' Health Services to assess the needs of veterans for health care services and the availability, accessibility and quality of those services; and
- A study of the impact of a \$250,000 cap on non-economic damages in medical malpractice lawsuits on the cost of medical malpractice insurance.

Next Steps

The 121st Legislature will play a key role in overseeing the implementation of Dirigo Health and the other provisions of the new law. In the next few months, the Legislature will review the nominations and confirm the 5 members of the Dirigo Health board of directors. When fully implemented, Dirigo Health is expected to provide access to health care for all of Maine's uninsured by July 2009.

Dirigo Health Timeline

September 13, 2003:	<ul style="list-style-type: none"> ➤ Public Law 2003, chapter 469 takes effect
Between September 13, 2003 and July 1, 2004:	<ul style="list-style-type: none"> ➤ Appointments to Dirigo Health Board must be made by Governor ➤ Dirigo Health Board must be reviewed by Insurance and Financial Services Committee and confirmed by Senate ➤ Dirigo Board must hire executive director and appoint other necessary staff; Governor's Office of Health Policy and Finance will also provide initial staffing upon request of Board ➤ Dirigo Health Board must develop benefit package; eligibility requirements; mechanism for subsidies; and other specifications for Dirigo Health Insurance (Board must report to Legislature within 30 days after benefit package determined and subsidy program established) ➤ Dirigo Health must initiate and complete request-for-proposal process for carriers to offer Dirigo Health Insurance product
February 1, 2004:	<ul style="list-style-type: none"> ➤ Dirigo Health Board must submit recommended methodology and implementing legislation relating to savings offset payments of third-party administrators to Insurance and Financial Services Committee
July 1, 2004-October 1, 2004:	<ul style="list-style-type: none"> ➤ Dirigo Health Insurance must begin offering coverage to individuals and small businesses ➤ Expansion of MaineCare eligibility contingent on operation of Dirigo Health
October 1, 2004-January 1, 2005:	<ul style="list-style-type: none"> ➤ Dirigo Health Board must begin quarterly reports to Governor and Legislature concerning operation and enrollment in Dirigo Health
April 2005:	<ul style="list-style-type: none"> ➤ Dirigo Health Board must determine aggregate measurable cost savings in bad debt and charity care costs as a result of the operation of Dirigo Health and expansion of MaineCare as basis for savings offset payments
July 1, 2005:	<ul style="list-style-type: none"> ➤ Dirigo Health Board may establish and begin to collect savings offset payments (maximum of 4% of annual premium revenue or its equivalent) from health insurance carriers, employee benefit excess insurance carriers and third-party administrators
January 1, 2006	<ul style="list-style-type: none"> ➤ Dirigo Health Board must report on disease management protocols, procedures and mechanisms used to provide services to those enrolled in Dirigo's high-risk pool
January 1, 2008:	<ul style="list-style-type: none"> ➤ Dirigo Health Board must submit legislation proposing statewide high-risk pool if Dirigo Health underperforms high-risk pools in other states with regard to trends in average premium rates and average rates of uninsured individuals
By July 1, 2009:	<ul style="list-style-type: none"> ➤ All of Maine's uninsured residents expected to have health coverage through Dirigo Health or other sources of health coverage

o describe Maine comes from early New Englanders. When sailing ships from Boston to ports in Maine (which were to the east of Boston), the wind was at their backs, hence they were sailing down wind or “Down East”.

(Source: *Down East* magazine website: www.downeast.com/faq/html)



The granite used to build the towers of New York City’s Triboro Bridge came from quarries on Vinalhaven Island.

(Source: *Maine Trivia*, John N. Cole, Rutledge Hill Press, 1998)

Pine Tree Development Zones Program

The 121st Legislature enacted the Pine Tree Development Zones program to promote economic development in the State. The original bill, LD 1385, was considered and reported out by the Joint Standing Committee on Business, Research and Economic Development as a unanimous OTP-AM bill. LD 1385 was further amended by the Senate, but died on adjournment. However, the substance of the bill in its amended form was incorporated into the “Part 2 Budget” and signed into law as Public Law 2003, chapter 451, sec. NNN-2.

Maine’s Pine Tree Development Zones program is based upon similar economic development initiatives in Pennsylvania (the “Keystone Opportunity Zones” program) and Michigan (the “Renaissance Zones” program). Minnesota’s Legislature also has enacted a program based on these models in the current legislative session, called the “Job Opportunity Building Zones” program.

The Pine Tree Development Zones program represents an effort to attract new businesses in specific sectors – manufacturing, targeted technology and financial services -- to economically disadvantaged areas of the State. The program, which is to be administered by the Department of Economic and Community Development, offers tax incentives for these new businesses to locate within designated “Pine Tree Development Zones,” including:

- sales tax exemptions for certain building materials and tangible personal property;
- exclusions from certain limitations on municipal tax increment financing districts;

- employment tax increment financing equal to 80% of certain state tax withholdings for a 10-year period; and
- a tax credit for certain state income tax and insurance premiums equal to 100% in the first five years and 50% in the next five years.

The program identifies four regions of the State in which each of four earmarked Pine Tree Development Zones will be located:

- Aroostook County, including some Micmac and Maliseet Indian lands;
- the Androscoggin Valley region, including the federally-designated Lewiston Enterprise Community Zone;
- the Penobscot Valley region, including some Penobscot Nation lands; and
- the Washington County and Downeast region, including some Passamaquoddy Tribal lands.

The program also allows the Commissioner of the Department of Economic and Community Development to award Pine Tree Development Zone status to up to four other areas within the State, based upon a competitive application process. An area seeking the designation will be considered only if it has a greater unemployment rate than the State average, if the average weekly wage of its residents is below the State average or, in some special circumstances, if the area has sustained a 5% loss of population or employed workers within the three-year period leading up to its application.

The commissioner will then choose from the pool of qualified applicants based on a series of selection criteria. These criteria, which are specified within the program’s enacting legislation, include

- the severity of economic distress within the applying area;
- the viability of the area’s development plan, which the area must develop as part of its application;
- the commitment of local and regional financial support;
- partnerships with public and private organizations; and
- the impact that a Pine Tree Development Zone located in the area would have on surrounding regions.

Much of the program’s details will be determined by rule. By January 15, 2004, the enacting legislation requires the commissioner to report to the Legislature on these rules

as well as on the progress of the program, and to continue to report on the program's progress annually.

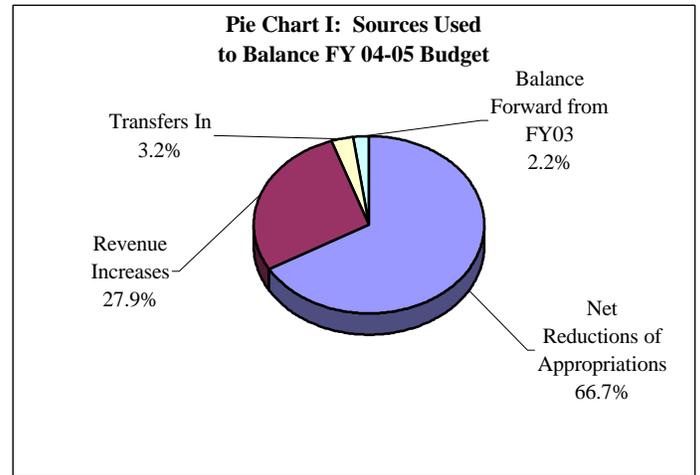


121st Legislature's Budget Challenges

During its First Regular Session, the 121st Legislature faced a General Fund structural gap for the 2004-2005 biennium (the difference between base revenue projections and current services appropriations) that approached the structural gaps faced by the Legislatures of the early 1990s. Initially, the 2004-2005 structural gap was projected to be approximately \$958 million. Then, in March, the Revenue Forecasting Committee lowered revenue projections by an additional \$48 million based on a more pessimistic economic forecast. This increased the final gap estimate to over \$1 billion or nearly 17% of current services appropriations. In addition, the 121st Legislature was confronted with budgetary shortfalls resulting from changes in revenue projections for the last half of the fiscal year ending June 30, 2003 that resulted from revenue revisions totaling \$60.7 million and from expenditure needs that exceeded appropriations in the Department of Corrections (\$5.2 million) and in the Medicaid/MaineCare program (\$13.7 million). These FY 03 shortfalls were in addition to the \$228.6 million shortfall addressed by the 120th Legislature during the November 2002 special session.

The 121st Legislature acted quickly to address the shortfalls, accepting unanimous Appropriations Committee reports and enacting an emergency supplemental budget for fiscal year 2002-03 and a "Current Services" or "Part 1" biennial budget bill by the end of March. A second emergency budget bill and the "Part 2" budget bill for new and expanded state programs were enacted later in the session and were also based on unanimous Appropriations Committee reports. The 2004-2005 \$1,003.0 million General Fund structural gap was offset by a 12.2% reduction from current services appropriations totaling \$724.8 million, an increase of revenue totaling \$303.6 million, and various transfers in totaling \$34.3 million. In addition, the actions to balance the fiscal year 2002-03 budget combined with a federal fiscal relief package to states left a balance forward of \$23.6 million. Overall, the Legislature took actions that increased General Fund balances by \$1.086 million for the 2004-2005 biennium, which was \$83.3 million over what was needed to address the structural gap. Of that amount, the Legislature transferred \$53.0 million for the Dirigo Health Insurance initiative, transferred \$2.8 million to the Maine Rx Plus

program and reserved \$26.7 million for future needs, leaving an undesignated ending General Fund balance of \$0.8 million. In addition, included within the net General Fund appropriations are additional spending initiatives for dairy farm support (\$5.0 million) and the Microenterprise Initiative Fund (\$1.0 million).



Pie Chart I above summarizes the \$1,086.3 million of total General Fund budget savings proposals by major source – appropriations, revenue, transfers or balance forward. Table I below summarizes some of the major initiatives that provided the resources to offset the structural gap and for other budget needs.

Table I: Major General Fund Savings Initiatives (Millions of \$'s)

Federal Fiscal Relief Package	\$107.8
Liquor Sales Privatization	\$104.9
Retirement Amortization - Temporary Change	\$102.5
Transfers from Other Funds	\$90.1
School Subsidy Reductions	\$54.7
Medicaid - Prescription Drug Savings	\$45.7
Medicaid - Health Care Provider Taxes	\$29.6
Medicaid - Eliminating COLA's, CPI and Utilization Increases	\$53.8
Delays in Conformity with Federal Tax Changes	\$49.5
Tax Amnesty and Tax Enforcement Initiatives	\$30.3
Adjustments to Tax Reimbursement Programs	\$36.1
Health Insurance Savings Proposals	\$30.7
Reductions to Higher Education Funding	\$22.4
Debt Service Savings	\$19.5
Children's Mental Health (non-Medicaid) Reductions	\$10.8

Although the budget contains a number of one-time and contingent proposals, the Legislature made structural

changes that will reduce the 2006-2007 structural gap by 50%. The Office of Fiscal and Program Review's current analysis places the 2006-2007 General Fund structural gap in the range of \$550 million to \$575 million.

Highway Fund

At the start of the 121st Legislature, the Highway Fund faced a structural gap of \$46.9 million for the 2004-2005 biennium, although the Highway Fund revenue outlook remained more stable throughout the session. As part of the budgets passed by the Legislature, the Highway Fund helped offset the General Fund shortfall by transfers to the General Fund and to the Local Government Fund that resulted in General Fund savings of \$38.4 million. The Highway Fund benefited from several General Fund budget initiatives that produced statewide Highway Fund savings of \$32 million for the 2004-2005 biennium.

Fund for a Healthy Maine

Allocations from the Fund for a Healthy Maine remained relatively stable for the 2004-2005 biennium and actually increased over current services. The Fund for a Healthy Maine helped address the General Fund budget gap. \$6.7 million of the projected balance at the end of fiscal year 2002-03 was transferred to the General Fund in fiscal year 2003-04.

NOTE: Additional information about the General Fund, Highway Fund and Fund for a Healthy Maine budgets is available from the Office of Fiscal and Program Review web site - <http://www.state.me.us/legis/ofpr/>

■ Private & Special Laws	32	2%
■ Resolves	98	6%
■ Constitutional Resolutions	0	0%
Bills Vetoed or held by the Governor	4	.2%

Committee Actions

	Number of Bills	Percent of Total
Total bills referred to committees	1624	100%
■ Total bills reported out	1464	90%
■ Bills carried over	164	10.0%
Unanimous Committee Reports	1234	84.3%
■ Ought to Pass	112	7.7%
■ Ought to Pass as Amended	431	29.4%
■ Ought to Pass in New Draft	0	0%
■ Ought Not to Pass	691	47.2%
Divided Reports	230	15.7%
Major Substantive Rules Reviewed	15	100%
■ Authorized Without Changes	8	53.3%
■ Authorized With Changes	7	46.7%
■ Not Authorized	0	0%

121st First Regular Session Bill Statistics

A total of 1635 bills were considered in the First Regular of the 121st Legislature. The table below summarizes statistical information about the bills.

	Number of Bills	Percent of Total
Bills and Papers Introduced	1640	100%
Bills Enacted or Finally Passed	641	39.2%
■ Joint Study Orders	5	.3%
■ Public Laws	506	30.9%

	Number of Bills	Percent of Total
--	-----------------	------------------



Legislative Studies During the Interim

The following is a listing of legislative studies that were authorized to be conducted or continued during the interim between the 121st Legislature First Regular Session and Second Regular Session. For more information on a particular study, please contact OPLA at 287-1670 or OFPR at 287-1635.

Study Name	Reporting Date
------------	----------------

Study Name	Reporting Date
Blue-Ribbon Commission to Address Long-term Care Financing	November 6, 2003
Commission to Improve the Sentencing, Supervision, Management and Incarceration of Prisoners, sec. K-2)	December 3, 2003
Commission to Study the Revenue Sources of the Office of Consumer Credit Regulation (P.L. 462)	December 3, 2003
Commission to Recognize Veterans of World War II and the Korean War in the State House Hall of Flags Resolve 77)	November 1, 2003
Commission to Study the Improvement of Community Safety and Sex Offender Accountability (Resolve 75)	December 3, 2003
Commission to Study the Needs of Deaf and Hard-of-Hearing Children and Adolescents (Resolve 84)	December 3, 2003
Commission to Study Workers' Compensation Board Budget Process (P.L. 425)	December 3, 2003
Commission to Study Obesity and Methods to Decrease the Costs of Health Care and Increase the Public Health (Resolve 95)	December 1, 2003
Commission to Study Preparing Maine's Citizens for Active Citizenship (Resolve 85)	December 3, 2003
Committee to Study Compliance with Maine's Freedom of Access Laws (Resolve 83)	December 3, 2003
Committee to Study the Implementation of the Privatization of the State's Wholesale Liquor Business (Joint Order, S.P. 552)	December 3, 2003
Commission to Study the Needs and Opportunities Associated with the Production of Salmonid Sport Fish in Maine (Resolve 89)	No report required
Community Preservation Advisory Committee Study of Issues Pertaining to Barriers to Affordable Housing in the State (Resolve 73)	December 1, 2003
Health Care System and Health Security Board (P.L. 492)	November 1, 2004
Long-term Care Oversight Committee (P.L. 465)	Annually by January 15

Study Name	Reporting Date
Recodification of MRSA Title 7 (Joint Order, S.P. 586)	January 15, 2005
Review of the State's Energy-Related Policy (P.L. 487)	January 31, 2004
Review of Statutory Revisions to Maine Tax Laws Affecting Railroads Operating in Maine	Legislation to be reported out to the Second Regular Session of the 121 st Legislature
Study Group to Examine an Emergency Alert Notification System for Deaf and Hard-of-hearing Individuals (Resolve 78)	November 21, 2003
Study of New Payment Models for the Logging Industry by the Agriculture, Conservation and Forestry Committee Joint Order, H.P. 724)	December 3, 2003
Task Force on Speech-language Pathologists (Resolve 80)	December 3, 2003
Task Force on Veteran's Health Services (P.L. 469, Part G)	January 1, 2005
Task Force to Study Parity and Portability of Retirement Benefits for State Law Enforcement Officers, Municipal and County Law Enforcement Officers and Firefighters (Resolve 76)	December 3, 2003

Internet Intersection

Policy and Government



Regulations.Gov: This Federal government website allows individuals to find, review and comment on Federal documents that are open for comment and published in the *Federal Register*, the Government's legal newspaper.

www.regulations.gov

PolicySite: PolicySite is a non-partisan project to promote greater awareness of U.S. public policy issues by providing summaries of major policy issues, with links to analyses and commentary representing a spectrum of viewpoints on issues

www.policysite.org



OPLA Publications

- **Study Reports** - A listing of study reports of legislative committees and commissions categorized by year beginning in 1973 is available from OPLA. For printed copies of any of these reports, please contact the Office of Policy and Legal Analysis. The first copy of a report is free; additional copies are available at a nominal cost. In addition, many of the recent legislative studies staffed by OPLA are available on the OPLA website at the following web address: www.state.me.us/legis/opla/reports2.htm
- **Enacted Law Digest:** A brief summary of all public laws, private and special laws, resolves and certain joint orders enacted or passed by the 121st Legislature, First Regular Session. The summary of each enacted or passed legislative document includes the chapter number, title, LD number or House or Senate Paper number, a summary of the enacted bill, resolve or order and the effective date of any emergency legislation. The digest is produced in conjunction with the Office of Fiscal and Program Review. The Enacted Law Digest can also be found on the OPLA website at the following web address:
www.state.me.us/legis/opla/enactlaw.htm
- **Bill Summaries of the 121st Legislature, First Regular Session:** Summarizes all legislation considered by the Joint Standing Committees of the Legislature and describes bills, committee amendments, other relevant amendments and the final action taken on each bill. There are also copies of bill summaries for each individual joint standing committee available. Bill summaries can also be found on the OPLA website at the following web address:
www.state.me.us/legis/opla/billsumm.htm

For bill summaries of the Appropriations and Financial Affairs Committee and the Taxation Committee, please contact the Office of Fiscal and Program Review (OFPR) at 287-1635 or visit the OFPR website at the following web address:

www.state.me.us/legis/ofpr/billsumm.htm

Law and Legislative Reference Library: Provides access to the URSUS catalog, collections information, reference information, legislative history instructions, interlibrary loan information and lists of Justices for the Maine Supreme Judicial Court and Maine Attorneys General.

www.state.me.us/legis/lawlib



Science and Technology

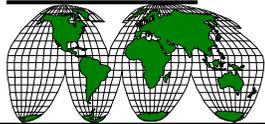
Find Tutorials.com: This website offers tutorials on a plethora of computer related topics, including knowledge about computers, software applications or programming languages. Many of these tutorials are free, but an individual can also choose to pay for a 12-month membership and receive unlimited access to more structured online training courses that provide feedback from a professional teacher.

www.findtutorials.com

Helpweb: This website offers a World Wide Web tutorial, including an overview of the World Wide Web, how to find something on the web, a guide to search engines, Netscape hints and multimedia hints.

www.imagescape.com/helpweb/www/www.html

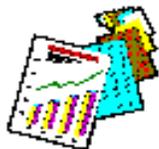
Reference



The World This website provides five minute news bulletins, updated every hour from the British Broadcasting Corporation (BBC). The website is a production of Public Radio International.

www.theworld.org

General Interest



Today's Front Pages: This website offers a daily look of a collection of 134 newspaper front pages from 24 countries. The site includes an archived exhibit of front pages from September 12, 2001, the day after the terrorist attacks on the United States.

www.newseum.org/todaysfrontpages

A Word About OPLA

The Office of Policy and Legal Analysis (OPLA) is one of several nonpartisan offices of the Maine State Legislature. It operates under the auspices of the Legislative Council. The office provides professional staff assistance to the joint standing and select committees and study commissions, including providing policy and legal research and analysis, coordinating the committee process, drafting bills and amendments, analyzing budget bills in cooperation with the Office of Fiscal and Program Review and preparing legislative proposals, reports and recommendations.

OPLA~Notes

Published for the Maine State Legislature by the Office of Policy & Legal Analysis

Director: David C. Elliott

Editor: Darlene Shores Lynch, Senior
Legislative Researcher

Article Contributors: Jim Adolf, Legislative
Analyst, Colleen McCarthy Reid, Legislative
Analyst and Grant Pennoyer, Director, Office of
Fiscal and Program Review

We welcome your comments and suggestions.
Contact the Office of Policy and Legal Analysis by
writing to 13 State House Station, Augusta, Maine
04333; calling 287-1670; or stopping by Room 215
of the Cross Office Building. The newsletter is
available on the Internet at:
www.state.me.us/legis/opla/newslet.htm.

OPLA~Notes

Quarterly Nonpartisan Newsletter
Office of Policy and Legal Analysis
13 State House Station
Augusta, ME 04333