

CHAPTER 271**HEALTH PROGRAMS****SUBCHAPTER 1****ENVIRONMENTAL HEALTH PROGRAMS****§1691. Findings and declaration of purpose**

The Legislature finds that adequate measures must be taken to ensure that any threats to the health of the people of the State posed by natural phenomena or the introduction of potentially toxic substances into the environment are identified, appropriately considered and responded to by those responsible for protecting the public's health and environment. [PL 1981, c. 508, §1 (NEW).]

The purpose of this chapter is to create an Environmental Health Program within the Department of Health and Human Services, Bureau of Health, which would provide the department with the capability it requires to discharge its responsibilities satisfactorily, and to advise other departments and boards charged with similar or related responsibilities regarding the potential health implications of their actions. [PL 1981, c. 508, §1 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

SECTION HISTORY

PL 1981, c. 508, §1 (NEW). PL 2003, c. 689, §B6 (REV).

§1692. Environmental Health Program

The department shall create an Environmental Health Program within the Division of Disease Control of the Bureau of Health, Department of Health and Human Services. This program shall be staffed by individuals with training and experience in environmental medicine, epidemiology, toxicology, statistics and related fields. [PL 1981, c. 508, §1 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

The Environmental Health Program shall: [PL 1981, c. 508, §1 (NEW).]

1. Develop and monitor health status. Develop indicators of health problems in the State, monitor the health status of the people of the State and establish and maintain the necessary data banks for broad surveillance of human health and disease in Maine; [PL 1981, c. 508, §1 (NEW).]

2. Identify health problems. Identify significant health problems in the State, including those which may be related to environmental factors; [PL 1981, c. 508, §1 (NEW).]

3. Investigate. Conduct and contract for investigations as necessary to determine whether particular problems are related to environmental factors; [PL 1981, c. 508, §1 (NEW).]

4. Advise state agencies. Advise the Commissioner of Health and Human Services, as well as other state agencies and boards, such as the Departments of Conservation, Environmental Protection and Agriculture, Food and Rural Resources, regarding the potential health implications of their actions, the nature and extent of identified problems and the steps which can be taken to address them; and [PL 1981, c. 508, §1 (NEW); PL 2003, c. 689, Pt. B, §7 (REV).]

5. Public information. Provide the public with information, and advise them as to preventive and corrective actions in the area of environmental health.

[PL 1981, c. 508, §1 (NEW).]

SECTION HISTORY

PL 1981, c. 508, §1 (NEW). PL 2003, c. 689, §§B6,7 (REV).

§1692-A. Definitions

As used in this chapter, unless the context indicates otherwise, the following terms have the following meanings. [PL 1983, c. 835, §1 (NEW).]

1. Bureau. "Bureau" means the Bureau of Health.
[PL 1983, c. 835, §1 (NEW).]

2. Director. "Director" means the Director of the Bureau of Health or the director's designee.
[RR 2021, c. 2, Pt. B, §102 (COR).]

SECTION HISTORY

PL 1983, c. 835, §1 (NEW). RR 2021, c. 2, Pt. B, §102 (COR).

§1692-B. Investigations

1. Access to reports and records. The Department of Health and Human Services must be given access to all confidential reports and records filed by physicians, hospitals or other private or public sector organizations, with all departments, agencies, commissions or boards of the State for the purpose of conducting investigations or evaluating the completeness or quality of data submitted to the department's disease surveillance programs. The department shall follow the data confidentiality requirements of the departments, agencies, commissions or boards of the State providing this information.

Upon notification by the Department of Health and Human Services, physicians or hospitals shall provide to the department any further information requested for the purpose of conducting investigations or evaluating the completeness or quality of data submitted to the department's disease surveillance programs.

[PL 1989, c. 844, §2 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

2. Limited immunity. A physician, hospital, or employee of a physician or hospital is not liable for any civil damages as a result of the department's use of information gathered under this section. This immunity is limited to legitimate activities pursued in good faith under this section.

[PL 1989, c. 844, §2 (NEW).]

3. Adoption of rules. The department shall adopt rules governing the conditions under which and purposes for which the department may use identifying information under this section. The rules must ensure that:

A. Identifying information is used only to gain access to medical records and other medical information pertaining to an investigation designed to accomplish public health research of substantial public importance; [PL 1989, c. 844, §2 (NEW).]

B. Medical information about an identified patient is not sought from any person without the consent of that patient except when the information sought pertains solely to verification or comparison of health data that the department is otherwise authorized by law to collect and the department finds that confidentiality can be adequately protected without patient consent; [PL 1989, c. 844, §2 (NEW).]

C. Those persons conducting the investigation do not disclose medical information about an identified patient to any other person except a health care practitioner responsible for treating the patient; [PL 1989, c. 844, §2 (NEW).]

D. Those persons gaining access to medical information about an identified patient use that information to the minimum extent necessary to accomplish the purposes of the investigation; [PL 1989, c. 844, §2 (NEW).]

E. The protocol for any investigation is designed to preserve the confidentiality of all medical information that can be associated with identified patients, to specify the manner in which contact is made with patients, and to maintain public confidence in the protection of confidential information; [PL 1989, c. 844, §2 (NEW).]

F. An advisory body, independent from the department, is established and charged with responsibility for approving the protocol of the investigation, overseeing the conduct of the investigation to assure consistency with the protocol and the department's rules, and assessing both the scientific validity of the investigation and its effects upon patients; [PL 1989, c. 844, §2 (NEW).]

G. The department does not seek information under this section if the proposed identification of or contact with patients or health care practitioners would diminish the confidentiality of medical information or the public's confidence in the protection of that information in a manner that outweighs the expected benefit to the public of the proposed investigation; and [PL 1989, c. 844, §2 (NEW).]

H. Whenever a physician or hospital furnishes patient information requested by the department in accordance with this section, the department reimburses the physician or hospital for the reasonable costs incurred in providing the information. [PL 1989, c. 844, §2 (NEW).]

[PL 1989, c. 844, §2 (NEW).]

SECTION HISTORY

PL 1989, c. 844, §2 (NEW). PL 2003, c. 689, §B6 (REV).

§1693. Environmental Health Advisory Committee

(REPEALED)

SECTION HISTORY

PL 1981, c. 508, §1 (NEW). PL 1983, c. 812, §121 (AMD). PL 1989, c. 503, §B84 (AMD). PL 1991, c. 622, §S26 (RP).

§1693-A. Scientific Advisory Panel

(REPEALED)

SECTION HISTORY

PL 1983, c. 835, §1 (NEW). PL 1983, c. 862, §§69,70 (AMD). PL 1989, c. 503, §§B85,B86 (AMD). PL 1991, c. 622, §S27 (RP).

§1694. Contracts with educational, research and eleemosynary institutions

The Environmental Health Program shall, to the maximum extent feasible, and within the amounts appropriated for these purposes, contract with educational, research and eleemosynary institutions within the State for research and investigation activities which can be carried out more economically, expeditiously or conveniently by those nonstate institutions. [PL 1981, c. 508, §1 (NEW).]

SECTION HISTORY

PL 1981, c. 508, §1 (NEW).

§1695. Acceptance of funds

The department is authorized to accept any public or private funds which may be available for carrying out the purposes of this chapter. [PL 1981, c. 508, §1 (NEW).]

SECTION HISTORY

PL 1981, c. 508, §1 (NEW).

§1696. Hazardous air pollutants

1. Findings and declaration of purpose. The Legislature finds that:

A. Pure scientific considerations must govern the review and evaluation of potential health risks associated with chemical pollutants; [PL 1983, c. 835, §1 (NEW).]

B. Scientific review and evaluation of potential health risks associated with potential hazardous air pollutants is an integral component of a successful hazardous air pollutant control program; and [PL 1983, c. 835, §1 (NEW).]

C. The scientific review and evaluation is the responsibility of the Department of Health and Human Services which is charged with the protection of the public health and welfare and has the professional expertise to assess potential public health risks from chemical hazards. [PL 1983, c. 835, §1 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

[PL 1983, c. 835, §1 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

2. Duties. The Department of Health and Human Services, through the Environmental Health Program in the Bureau of Health, with the advice of and peer review by the Scientific Advisory Panel, shall:

A. Collect and consider the health data for substances or classes of substances which are under consideration for regulation as hazardous air pollutants by the Board of Environmental Protection; [PL 1983, c. 835, §1 (NEW).]

B. Establish a protocol for the health risk review and evaluation of potentially hazardous air pollutants for the following parameters: Carcinogenicity; in vivo and in vitro mutagenicity; teratogenicity; reproductive effects; neurotoxicity; acute and chronic reversible and irreversible effects; pharmacokinetics and pharmacodynamics; high-risk groups; bioaccumulation; and atmospheric fate; [PL 1983, c. 835, §1 (NEW).]

C. Report the health consequences of exposure to various ambient air concentrations indicating a range of risk levels for cancer-causing substances and the health consequences of exposure to various ambient air concentrations of noncancer-causing substances, after considering the adequacy of the data base, animal to human extrapolation, high-risk groups and any other health-based considerations; and [PL 1983, c. 835, §1 (NEW).]

D. Report whether exposure to the substance should be considered for regulation by the Board of Environmental Protection to protect public health. [PL 1983, c. 835, §1 (NEW).]

[PL 1983, c. 835, §1 (NEW); PL 2003, c. 689, Pt. B, §6 (REV).]

3. Requests for review. Requests for review shall be as follows.

A. The bureau shall review or evaluate the potential health risks associated with potentially hazardous air pollutants at the request of:

(1) The director;

(2) The chair of the Science Advisory Panel;

(3) Four or more members of the Science Advisory Panel; or

(4) The Commissioner of Environmental Protection following notice to the director of the bureau. [RR 2021, c. 2, Pt. B, §103 (COR).]

B. Requests from parties other than those listed in this subsection shall be reviewed by the Director of the Bureau of Health and, if justified, shall be pursued. The director may assess any reasonable costs to the party making those requests. [PL 1983, c. 835, §1 (NEW).]

[RR 2021, c. 2, Pt. B, §103 (COR).]

4. Reporting. The director shall compile all available information and prepare a report for each substance, class of substances or pollutants evaluated and submit this report to the commissioner, director or chair of the group that requested the health risk review and evaluation.

[RR 2021, c. 2, Pt. B, §104 (COR).]

SECTION HISTORY

PL 1983, c. 835, §1 (NEW). PL 2003, c. 689, §B6 (REV). RR 2021, c. 2, Pt. B, §§103, 104 (COR).

SUBCHAPTER 2

COMMUNITY HEALTH INVESTIGATION AND INFORMATION

§1696-A. Findings and intent

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 2015, c. 250, Pt. C, §1 (RP).

§1696-B. Short title

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 2015, c. 250, Pt. C, §1 (RP).

§1696-C. Community health information project

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 2015, c. 250, Pt. C, §1 (RP).

§1696-D. Response to requests

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 1999, c. 57, §B3 (AMD). PL 2015, c. 250, Pt. C, §1 (RP).

§1696-E. Cooperation with state agencies

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 2015, c. 250, Pt. C, §1 (RP).

§1696-F. Provision of information; trade secrets

(REPEALED)

SECTION HISTORY

PL 1985, c. 494, §2 (NEW). PL 1999, c. 57, §B4 (AMD). PL 2015, c. 250, Pt. C, §1 (RP).

SUBCHAPTER 3

EMERGENCY RESPONSE PLANNING**§1696-G. Findings; purpose****(REPEALED)**

SECTION HISTORY

PL 1987, c. 763, §2 (NEW). PL 1989, c. 464, §2 (RP).

§1696-H. State Emergency Response Commission**(REPEALED)**

SECTION HISTORY

PL 1987, c. 763, §2 (NEW). PL 1989, c. 464, §2 (RP). PL 1989, c. 503, §B87 (AMD). PL 1999, c. 790, §A24 (RP).

SUBCHAPTER 4**HEALTH ADVISORIES****§1696-I. Noncommercial fishing and public health**

The Director of the Bureau of Health shall assess regularly whether any health threats exist for persons consuming freshwater and anadromous fish caught in state waters by noncommercial anglers. The assessment must be based on appropriate technical and scientific data and public health analyses and must include, but is not limited to, the risk of carcinogenic, mutagenic, teratogenic and reproductive effects and infectious disease. In preparing the assessment, the director shall consult with the Commissioner of Marine Resources, the Commissioner of Environmental Protection and the Commissioner of Inland Fisheries and Wildlife. [PL 1993, c. 280, §1 (NEW).]

If, in the professional judgment of the Director of the Bureau of Health, conditions exist in which consumption of fish caught in state waters poses a threat to public health, the director shall prepare an advisory of the public health threat. The advisory must be in a form suitable for posting in places frequented by noncommercial anglers. The director has final authority regarding the content of the advisory, including the exact language used in the advisory. The Commissioner of Inland Fisheries and Wildlife is responsible for printing and posting verbatim copies of the advisory and for incorporating the verbatim health advisory in the abstract of fish and wildlife laws. [PL 2007, c. 539, Pt. E, §5 (AMD).]

SECTION HISTORY

PL 1993, c. 280, §1 (NEW). PL 2003, c. 414, §B35 (AMD). PL 2003, c. 414, §D7 (AFF). PL 2003, c. 614, §9 (AFF). PL 2007, c. 539, Pt. E, §5 (AMD).

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