

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND THIRTIETH LEGISLATURE

FIRST REGULAR SESSION
December 2, 2020 to March 30, 2021

FIRST SPECIAL SESSION
April 28, 2021 to July 19, 2021

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
JUNE 29, 2021

THE GENERAL EFFECTIVE DATE FOR
FIRST SPECIAL SESSION
NON-EMERGENCY LAWS IS
OCTOBER 18, 2021

PUBLISHED BY THE REVISOR OF STATUTES
IN ACCORDANCE WITH THE MAINE REVISED STATUTES ANNOTATED,
TITLE 3, SECTION 163-A, SUBSECTION 4.

Augusta, Maine
2021

J. An emergency medical services representative, appointed by the Commissioner of Public Safety;

K. An expert in harm reduction strategies, appointed by the Governor;

L. An academic research professor with experience in reviewing drug overdose deaths, appointed by the Attorney General;

M. A representative of families affected by drug overdose deaths, appointed by the Governor;

N. A person in recovery from substance use disorder, appointed by the Governor; and

O. The director of opioid response within the Governor's Office of Policy Innovation and the Future, ex officio, who shall chair the panel.

In making appointments to the panel, the appointing authorities shall take into consideration the racial and ethnic diversity of the State.

2. Designees; terms of office. An ex officio member may appoint a designee to represent the ex officio member on the panel. A designee, once appointed, qualifies as a full voting member of the panel and may hold office and enjoy all the other rights and privileges of full membership on the panel. Appointed members of the panel shall serve for a term of 3 years. Any vacancy on the panel must be filled in the same manner as the original appointment but for the unexpired term.

3. Meetings. The panel shall meet at such time or times as may be reasonably necessary to carry out its duties, but it shall meet at least twice per year. The panel's chair shall call the first meeting before July 1, 2021.

4. Powers and duties. The panel shall examine a subset of the deaths associated with accidental drug overdoses, taking into consideration the racial and ethnic composition of the population of individuals whose deaths are associated with an accidental drug overdose. The deaths selected for review must be recommended by the Chief Medical Examiner or the Chief Medical Examiner's designee or by an individual with whom the Office of the Attorney General contracts for services. Notwithstanding any provision of law to the contrary, the panel may review information surrounding an accidental drug overdose that was not fatal, as long as review of such a case promotes the purpose of the panel under this section. The panel shall recommend to state, county and local agencies methods of preventing deaths as the result of accidental drug overdoses including modification or enactment of laws, rules, policies and procedures.

5. Access to information, records and materials. In any case subject to review by the panel, upon oral or written request of the panel, notwithstanding any provision of law to the contrary, any person that possesses information or records that are necessary and relevant

to a panel review shall as soon as practicable provide the panel with the information and records. Persons disclosing or providing information or records upon request of the panel are not criminally or civilly liable for disclosing or providing information or records in compliance with this subsection.

6. Confidentiality. The proceedings and records of the panel are confidential and are not subject to subpoena, discovery or introduction into evidence in a civil or criminal action. The Office of the Attorney General shall disclose conclusions of the panel upon request, but may not disclose information, records or data that are otherwise classified as confidential.

7. Noninterference. A review by the panel under this section is subject to and may not interfere with the authority and responsibility of the Attorney General to investigate and prosecute homicides pursuant to Title 5, section 200-A.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.

Effective June 21, 2021.

**CHAPTER 293
H.P. 1279 - L.D. 1730**

**An Act To Correct
Inconsistencies, Conflicts and
Errors in the Laws of Maine**

Emergency preamble. **Whereas,** acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, acts of this and previous Legislatures have resulted in certain technical errors, conflicts and inconsistencies in the laws of Maine; and

Whereas, these errors, conflicts and inconsistencies create uncertainties and confusion in interpreting legislative intent; and

Whereas, it is vitally necessary that these uncertainties and this confusion be resolved in order to prevent any injustice or hardship to the citizens of Maine; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

PART A

Sec. A-1. 4 MRSA §1051, as amended by PL 2019, c. 59, §1 and c. 475, §49, is repealed and the following enacted in its place:

§1051. Legal holidays

Court may not be held on Sunday or any day designated for the annual Thanksgiving; New Year's Day, January 1st; Martin Luther King, Jr., Day, the 3rd Monday in January; Washington's Birthday, the 3rd Monday in February; Patriot's Day, the 3rd Monday in April; Memorial Day, the last Monday in May, but if the Federal Government designates May 30th as the date for observance of Memorial Day, the 30th of May; the 4th of July; Labor Day, the first Monday of September; Indigenous Peoples Day, the 2nd Monday in October; Veterans Day, November 11th; or Christmas Day. The Chief Justice of the Supreme Judicial Court may order that court be held on a legal holiday when the Chief Justice finds that the interests of justice and judicial economy in any particular case will be served. The public offices in county buildings may be closed to business on the holidays named in this section. When any one of the holidays named in this section falls on Sunday, the Monday following must be observed as a holiday, with all the privileges applying to any of the days named in this section.

Sec. A-2. 5 MRSA §1531, sub-§2, as amended by PL 2019, c. 343, Pt. D, §2 and Pt. IIII, §1, is repealed and the following enacted in its place:

2. Average personal income growth. "Average personal income growth" means the average for the prior 10 calendar years, ending with the most recent calendar year for which data is available, of the percent change in personal income in this State, as estimated by the United States Department of Commerce, Bureau of Economic Analysis. The average personal income growth is determined by October 1st, annually, by the State Economist.

Sec. A-3. 5 MRSA §1710-D, as amended by PL 2019, c. 343, Pt. D, §4 and Pt. IIII, §2, is repealed and the following enacted in its place:

§1710-D. Staffing

The commission may receive staff support from the Department of Administrative and Financial Services and the Department of Labor.

Sec. A-4. 5 MRSA §1710-I, as amended by PL 2019, c. 343, Pt. D, §5 and Pt. IIII, §3, is repealed and the following enacted in its place:

§1710-I. Staffing

The committee may receive staff assistance from the Department of Administrative and Financial Services and, at the discretion of the Legislature, the Office of Fiscal and Program Review. The committee may also utilize other professionals having revenue forecasting, economic and fiscal expertise.

Sec. A-5. 5 MRSA c. 167, as enacted by 2019, c. 471, §1 and c. 472, §1, is repealed and the following enacted in its place:

CHAPTER 167

MAINE PRESCRIPTION DRUG AFFORDABILITY BOARD

§2041. Maine Prescription Drug Affordability Board established

1. Board established. The Maine Prescription Drug Affordability Board, as established in section 12004-G, subsection 14-I and referred to in this chapter as "the board," shall carry out the purposes of this chapter.

2. Membership. The board has 5 members with expertise in health care economics or clinical medicine, who may not be affiliated with or represent the interests of a public payor, as that term is defined in section 2042, and who are appointed as follows:

A. Two members by the President of the Senate. The President of the Senate shall also appoint one alternate board member who will participate in deliberations of the board in the event a member appointed by the President of the Senate elects to be recused as provided in subsection 7, paragraph B;

B. Two members by the Speaker of the House of Representatives. The Speaker of the House of Representatives shall also appoint one alternate board member who will participate in deliberations of the board in the event a member appointed by the Speaker of the House of Representatives elects to be recused as provided in subsection 7, paragraph B; and

C. One member by the Governor. The Governor shall also appoint one alternate board member who will participate in deliberations of the board in the event the member appointed by the Governor elects to be recused as provided in subsection 7, paragraph B.

3. Terms. Members are appointed to 5-year terms. Of the initial appointees, the member appointed by the Governor serves an initial term of 5 years, one member appointed by the President of the Senate and one member appointed by the Speaker of the House of Representatives serve an initial term of 4 years and one member appointed by the President of the Senate and one member appointed by the Speaker of the House of Representatives serve an initial term of 3 years.

4. Quorum. A majority of board members constitutes a quorum.

5. Chair. The Governor shall name the chair.

6. Meetings. Beginning no later than March 1, 2020, the board shall meet in public session at least

every 12 weeks to review prescription drug information and to make recommendations pursuant to section 2042. Meetings may be cancelled or postponed at the discretion of the chair.

A. Each public meeting must be announced 2 weeks in advance, and materials for the meeting must be made public at least one week in advance.

B. Each public meeting must provide opportunity for comment from the public in attendance at the meeting, and the board shall provide the opportunity for the public to submit written comments on pending decisions.

C. The board may allow expert testimony at public meetings and any meeting conducted in executive session as permitted by paragraph D.

D. Notwithstanding the requirements of Title 1, section 405, the board may meet in executive session, except that any decision of the board must be made in public.

7. Conflicts of interest. The following provisions govern any conflict of interest for a member of the board, a member of the advisory council established pursuant to subsection 10 or any staff member or contractor of the board.

A. When appointing a member of the board or the advisory council established pursuant to subsection 10, the appointing authority shall consider any conflict of interest disclosed by the prospective member. A member shall elect to be recused from any board activity in the case in which the member or an immediate family member of the member has a conflict of interest. For the purposes of this paragraph, "conflict of interest" means an association, including a financial or personal association, that has the potential to bias or have the appearance of biasing an individual's decisions in matters related to the board or the conduct of the board's activities.

B. A board member or staff or contractor of the board with a conflict of interest shall elect to be recused. For purposes of this paragraph, "conflict of interest" means any instance in which a member of the board or an immediate family member of the member has received or could receive either of the following:

(1) A direct financial benefit of any amount deriving from the results or findings of a study or determination by or for the board; or

(2) A financial benefit from individuals or companies that own or manufacture prescription drugs, services or items to be studied by the board that in the aggregate exceeds \$5,000 per year. For purposes of this subparagraph, "financial benefit" includes honoraria, fees, stock or other financial benefit and the current value of the member's or immediate family

member's already existing stock holdings, in addition to any direct financial benefit deriving from the results or findings conducted under this section.

C. A conflict of interest must be disclosed in the following manner:

(1) By the board in the employment of board senior staff;

(2) By the Governor, President of the Senate or Speaker of the House of Representatives when appointing members to the board and advisory council established pursuant to subsection 10;

(3) By the board, describing any recusals as part of any final decision relating to a prescription drug; and

(4) By the 5th day after a conflict is identified or, if a public meeting of the board will occur within that 5-day period, in advance of the public meeting.

D. Conflicts of interest must be publicly posted on the website of the board. The information disclosed must include the type, nature and magnitude of the interests of the individual involved, except to the extent that the individual elects to be recused from participation in any activity with respect to which the potential conflict exists.

E. The board, the advisory council established pursuant to subsection 10, a member of the board or staff or a contractor of the board may not accept gifts, bequests or donations of services or property that suggest a conflict of interest or have the appearance of creating bias in the work of the board or advisory council.

F. A member of the advisory council established pursuant to subsection 10 who accepts a gift, bequest or donation of services or property that suggests a conflict of interest or has the appearance of creating bias in the work of the advisory council shall disclose the gift, bequest or donation publicly.

8. Staff. The board may employ an executive director, whose salary, to the extent feasible, must comport with state personnel rules and requirements.

9. Compensation. A member of the board and a member of the advisory council appointed pursuant to subsection 10, paragraph L are entitled to legislative per diem and reimbursement for expenses as provided in section 12004-G, subsection 14-1.

10. Advisory council. A 12-member advisory council is established to advise the board on establishing annual spending targets pursuant to section 2042, subsection 1 and determining methods for meeting those spending targets pursuant to section 2042, subsection 3. The advisory council consists of:

- A. The Governor or the governor's designee;
- B. The Commissioner of Administrative and Financial Services or the commissioner's designee;
- C. The Commissioner of Corrections or the commissioner's designee;
- D. The Commissioner of Health and Human Services or the commissioner's designee;
- E. The Attorney General or the Attorney General's designee;
- F. The Executive Director of Employee Health and Benefits, within the Department of Administrative and Financial Services, Bureau of Human Resources, or the executive director's designee;
- G. A representative from the Maine State Employees Association, appointed by the Governor, based on a nomination by the association;
- H. A representative from the Maine Education Association, appointed by the Governor, based on a nomination by the association;
- I. A representative from the Maine Municipal Association, appointed by the Governor, based on a nomination by the association;
- J. A representative from the University of Maine System, appointed by the Governor, based on a nomination by the system;
- K. A representative from the Maine Community College System, appointed by the Governor, based on a nomination by the system; and
- L. A representative of consumer interests, appointed by the Governor, who serves a 3-year term.

11. Funds and grants. The board may apply for and receive funds, grants or contracts from public and private sources.

12. Assessment. The board may recommend that a public payor, as defined in section 2042, subsection 1, pay an annual assessment to support the administrative costs of the board.

§2042. Powers and duties of the board

1. Prescription drug spending targets. The board has the following powers and duties. For the purposes of this section, the term "public payor" means any division of state, county or municipal government that administers a health plan for employees of that division of state, county or municipal government or an association of state, county or municipal employers that administers a health plan for its employees, except for the MaineCare program. The board shall:

- A. Beginning for the year 2021 and in consultation with the advisory council established under section 2041, subsection 10, determine annual spending targets for prescription drugs purchased by public

payors based upon a 10-year rolling average of the medical care services component of the United States Department of Labor, Bureau of Labor Statistics Consumer Price Index medical care services index plus a reasonable percentage for inflation and minus a spending target determined by the board for pharmacy savings;

B. Determine spending targets on specific prescription drugs that may cause affordability challenges to enrollees in a public payor health plan; and

C. Determine which public payors are likely to exceed the spending targets determined under paragraph A.

2. Prescription drug spending data. The board may consider the following data to accomplish its duties under this section:

A. A public payor's prescription drug spending data, which the 3rd-party administrator or insurer for the public payor's health plan shall provide to the board on behalf of the public payor upon request notwithstanding any provision of law to the contrary, including:

- (1) Expenditures and utilization data for prescription drugs for each plan offered by a public payor;
- (2) The formulary for each plan offered by a public payor and prescription drugs common to each formulary;
- (3) Pharmacy benefit management services and other administrative expenses of the prescription drug benefit for each plan offered by a public payor; and
- (4) Enrollee cost sharing for each plan offered by a public payor; and

B. Data compiled by the Maine Health Data Organization under Title 22, chapter 1683.

Prescription drug spending data provided to the board under this subsection is confidential to the same extent it is confidential while in the custody of the entity that provided the data to the board.

3. Recommendations. Based upon the prescription drug spending data received under subsection 2, the board, in consultation with a representative of each public payor identified under subsection 1, paragraph A, shall determine methods for the public payor to meet the spending targets established under subsection 1. The board shall determine whether the following methods reduce costs to individuals purchasing prescription drugs through a public payor and allow public payors to meet the spending targets established under subsection 1:

- A. Negotiating specific rebate amounts on the prescription drugs that contribute most to spending that exceeds the spending targets;
- B. Changing a formulary when sufficient rebates cannot be secured under paragraph A;
- C. Changing a formulary with respect to all of the prescription drugs of a manufacturer within a formulary when sufficient rebates cannot be secured under paragraph A;
- D. Establishing a common prescription drug formulary for all public payors;
- E. Prohibiting health insurance carriers in the State from offering on their formularies a prescription drug or any of the prescription drugs manufactured by a particular manufacturer when the methods described in paragraph B or C are implemented;
- F. Purchasing prescription drugs in bulk or through a single purchasing agreement for use among public payors;
- G. Collaborating with other states and state prescription drug purchasing consortia to purchase prescription drugs in bulk or to jointly negotiate rebates;
- H. Allowing health insurance carriers providing coverage to small businesses and individuals in the State to participate in the public payor prescription drug benefit for a fee;
- I. Procuring common expert services for public payors, including but not limited to pharmacy benefit management services and actuarial services; and
- J. Any other method the board may determine.

4. Report. The board shall report its recommendations, including prescription drug spending targets, and the progress of implementing those recommendations to the joint standing committee of the Legislature having jurisdiction over health coverage and insurance matters no later than October 1, 2020 and on January 30th annually thereafter. The joint standing committee may report out legislation based upon the report.

Sec. A-6. 5 MRSA c. 168 is enacted to read:

CHAPTER 168

WHOLESALE PRESCRIPTION DRUG IMPORTATION PROGRAM

§2045. Authorization

The Wholesale Prescription Drug Importation Program, referred to in this chapter as "the program," is established to provide for the wholesale importation of prescription drugs from Canada by or on behalf of the State. The program must be designed in accordance with the requirements of this chapter. The program may not be implemented unless the State obtains approval

and certification, pursuant to section 2046, subsection 3, from the United States Department of Health and Human Services.

§2046. Design of program

1. Design requirements. The Department of Health and Human Services, in consultation with appropriate federal and other state agencies, other states and interested parties, shall design the program to comply with the applicable requirements of 21 United States Code, Section 384, including requirements regarding safety and cost savings. The program design must:

- A. Designate a state agency to become a licensed drug wholesaler or to contract with a licensed drug wholesaler in order to seek federal certification and approval, pursuant to subsection 3, to import safe prescription drugs and provide cost savings to consumers in the State;
- B. Use prescription drug suppliers in Canada regulated under the laws of Canada or of one or more Canadian provinces, or both;
- C. Ensure that only prescription drugs meeting the federal Food and Drug Administration's safety, effectiveness and other standards are imported by or on behalf of the State;
- D. Import only those prescription drugs expected to generate substantial cost savings for consumers in the State;
- E. Ensure that the program complies with the transaction and tracing requirements of 21 United States Code, Sections 360eee and 360eee-1 to the extent feasible and practical prior to imported prescription drugs coming into the possession of the licensed drug wholesaler and that the program complies fully with those federal requirements after imported prescription drugs are in the possession of the licensed drug wholesaler;
- F. Consider whether the program may be developed on a multistate basis through collaboration with other states;
- G. Prohibit the distribution, dispensing or sale of imported prescription drugs outside of the State;
- H. Recommend a charge per prescription or another method of financing to ensure that the program is adequately funded in a manner that does not jeopardize significant cost savings to consumers, including adequate funding for the initial start-up costs of the program;
- I. Apply for and receive funds, grants or contracts from public and private sources; and
- J. Include an audit function.

2. Rules. The Department of Health and Human Services shall adopt rules to design the program in accordance with the requirements of subsection 1 no

later than January 1, 2020. Rules adopted pursuant to this subsection are major substantive rules as defined in chapter 375, subchapter 2-A.

3. Request for federal approval and certification. The Department of Health and Human Services shall submit a request for approval and certification of the program to the United States Department of Health and Human Services no later than May 1, 2020.

§2047. Implementation

1. Implementation; operation. Upon receipt of federal approval and certification under section 2046, subsection 3, the state agency designated to oversee the program pursuant to this chapter shall implement the program as required in subsection 2. The program must begin operating no later than 6 months following receipt of federal approval and certification.

2. Requirements. Prior to operating the program, the state agency designated to oversee the program pursuant to this chapter shall:

- A. Become a licensed drug wholesaler or enter into a contract with a licensed drug wholesaler in the State;
- B. Contract with one or more distributors licensed in the State;
- C. Contract with one or more licensed and regulated prescription drug suppliers in Canada;
- D. Consult with health insurance carriers, employers, pharmacies, pharmacists, health care providers and consumers;
- E. Develop a registration process for health insurance carriers, pharmacies and health care providers authorized to prescribe and administer prescription drugs that are willing to participate in the program;
- F. Create a publicly accessible website for listing the prices of prescription drugs to be imported under the program;
- G. Create an outreach and marketing plan to generate public awareness of the program;
- H. Provide a telephone hotline to answer questions and address needs of consumers, employers, health insurance carriers, pharmacies, health care providers and others affected by the program;
- I. Develop a 2-year audit work plan; and
- J. Conduct any other activity determined necessary to successfully implement and operate the program.

§2048. Annual reporting

Beginning January 2021, and annually thereafter, the Department of Health and Human Services, or other state agency designated to oversee the program pursuant to this chapter, shall report to the joint standing committee of the Legislature having jurisdiction over health coverage and prescription drugs regarding the implementation and operation of the program during the previous calendar year, including:

ant to this chapter, shall report to the joint standing committee of the Legislature having jurisdiction over health coverage and prescription drugs regarding the implementation and operation of the program during the previous calendar year, including:

1. Prescription drugs included. The prescription drugs included in the program;

2. Participation. The number of participating pharmacies, health care providers and health insurance carriers;

3. Prescriptions dispensed. The number of prescription drugs dispensed through the program;

4. Estimated savings. The estimated cost savings to consumers, health insurance carriers, employers and the State during the previous calendar year and to date;

5. Audit findings. Information regarding implementation of the audit work plan and audit findings; and

6. Other relevant information. Any other information the Department of Health and Human Services, or other state agency designated to oversee the program pursuant to this chapter, considers relevant.

Sec. A-7. 5 MRSA §3101, sub-§1, as amended by PL 2019, c. 343, Pt. D, §6 and c. 383, §1, is repealed and the following enacted in its place:

1. Director. "Director" means the Director of the Office of Policy Innovation and the Future established by section 3102.

Sec. A-8. 5 MRSA §3101, sub-§2, as amended by PL 2019, c. 343, Pt. D, §6 and c. 383, §1, is repealed and the following enacted in its place:

2. Office. "Office" means the Office of Policy Innovation and the Future established by section 3102.

Sec. A-9. 5 MRSA §3102, as amended by PL 2019, c. 343, Pt. D, §7 and repealed and replaced by c. 383, §2, is repealed and the following enacted in its place:

§3102. Office established; purpose

The Office of Policy Innovation and the Future is established in the Executive Department to: support the creation of a coherent system of policy planning and coordinated implementation as one function and responsibility of the executive branch; serve the Governor as a research, advisory, consultative, coordinating and administrative agency; and advance policies that support a sustainable future for the State's people, communities, natural resources, physical infrastructure, industries, businesses and institutions by:

1. Assistance; data; policy. Providing technical assistance and data to the Governor by undertaking special studies and plans as directed and preparing policy;

2. Coordination. Facilitating general intergovernmental coordination;

3. Innovation. Supporting state efforts to encourage innovation and policy that facilitates innovation in the public and private sectors;

4. Technology. Supporting improved technology use for government programs and advancing responsible state data policies;

5. Resources. Supporting the development of the State's economy and energy resources with the conservation of its natural resources; and

6. Analysis. Conducting ongoing demographic, economic, workforce and other needed analyses to support state policy makers.

Sec. A-10. 5 MRSA §3103, as amended by PL 2019, c. 343, Pt. D, §8 and c. 383, §3, is repealed and the following enacted in its place:

§3103. Director

The Director of the Office of Policy Innovation and the Future is appointed by the Governor and serves at the pleasure of the Governor.

Sec. A-11. 5 MRSA §12004-C, sub-§7, as enacted by PL 1995, c. 676, §1 and affected by c. 676, §13, is amended to read:

7.

School Board of the Maine Educational Center for the Deaf and Hard of Hearing and the Governor Baxter School for the Deaf	Legislative Per Diem and Expenses	20-A MRSA §7406
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Sec. A-12. 5 MRSA §13056, sub-§3, as amended by PL 2019, c. 343, Pt. D, §9 and Pt. IIII, §4, is repealed and the following enacted in its place:

3. Conduct planning and research. Conduct planning, research and analysis for department needs, but not macroeconomic forecasting, which is the responsibility of the Department of Administrative and Financial Services. The department shall gather and maintain and must have access to all economic and other information necessary to the performance of its duties;

Sec. A-13. 5 MRSA §13056, sub-§6, ¶B, as amended by PL 2003, c. 159, §2, is further amended to read:

B. Other community planning and development assistance programs of the former State Planning Office;

Sec. A-14. 9-A MRSA §14-105, sub-§5, as enacted by PL 2019, c. 431, §2 and affected by §4, is repealed.

Sec. A-15. 10 MRSA §363, sub-§2-A, as amended by PL 2019, c. 343, Pt. D, §11 and Pt. IIII, §5, is repealed and the following enacted in its place:

2-A. Recommendation of Governor and issuers.

At any time action of the Legislature under subsection 1-A is necessary or desirable, the Governor shall recommend to the appropriate committee of the Legislature a proposed allocation or reallocation of all or part of the state ceiling. To assist the Governor in making a recommendation of proposed allocations of the state ceiling on private activity bonds, the group of 7 representatives described in subsection 1-A shall make a recommendation regarding allocation or reallocation of the state ceiling. In order to assist the group in making its recommendation and to assist the Governor and the Legislature, the Department of Administrative and Financial Services shall prepare an annual analysis of the State's economic outlook, prevailing interest rate forecasts related to tax-exempt financing by the issuers specifically identified in subsections 4 to 8, the availability to those issuers of alternative financing from sources that do not require an allocation of the state ceiling and the relationship of these factors and various public policy considerations to the allocation or reallocation of the state ceiling. In recommending any allocation or reallocation of the state ceiling to the Legislature, the Governor shall consider the requests and recommendations of those issuers of bonds within the State designated in this section, the recommendations of the group of representatives described in subsection 1-A and the annual analysis of the Department of Administrative and Financial Services.

Sec. A-16. 10 MRSA §1310-H, sub-§3, as amended by PL 2019, c. 77, §1 and c. 407, §2, is repealed and the following enacted in its place:

3. Nonliability. A person may not be held liable for any violation of this section if the person shows by a preponderance of the evidence that at the time of the alleged violation the person maintained reasonable procedures to ensure compliance with the provisions of subsections 1, 2, 2-A and 4.

Sec. A-17. 10 MRSA §9722, sub-§6, ¶G, as amended by PL 2019, c. 391, §4, is further amended to read:

G. In accordance with section 9723, ensure that training and certification regarding the Maine Uniform Building and Energy Code is readily available, affordable and accessible to municipal building officials; ~~and~~

Sec. A-18. 10 MRSA §9722, sub-§6, ¶I, as amended by PL 2019, c. 391, §4, is further amended to read:

I. Approve methods of energy performance rating for use in generating any consumer information labels that may be required in the marketing and sale of residential and commercial buildings or units within buildings; and

Sec. A-19. 10 MRSA §9722, sub-§6, ¶M, as repealed by PL 2019, c. 391, §4 and amended by c. 392, §1, is repealed.

Sec. A-20. 10 MRSA §9722, sub-§6, ¶N, as repealed by PL 2019, c. 391, §4 and amended by c. 392, §2, is repealed.

Sec. A-21. 12 MRSA §8876, sub-§2, as amended by PL 2019, c. 343, Pt. D, §12 and Pt. IIII, §6, is repealed and the following enacted in its place:

2. Future demand. Project future demand for forest resources based on a common economic forecast developed by the Consensus Economic Forecasting Commission and on other appropriate economic projections;

Sec. A-22. 19-A MRSA §4012, sub-§5, as amended by PL 2019, c. 412, §9, is further amended to read:

5. Arrest in certain situations. When a law enforcement officer has probable cause to believe that there has been a criminal violation under section 4011 of a court-approved consent agreement or a protection order issued pursuant to this chapter or Title 15, chapter 12-A, or that a violation of Title 17-A, section 208-D, 208-E, or 208-F has occurred, that enforcement officer shall arrest and take into custody the alleged offender.

Sec. A-23. 20-A MRSA §10, sub-§2, ¶G, as amended by PL 2019, c. 450, §12, is further amended to read:

G. The Maine Municipal Association; ~~and~~

Sec. A-24. 20-A MRSA §10, sub-§2, ¶H, as amended by PL 2019, c. 450, §13, is further amended to read:

H. The Maine Principals Association; ~~and~~

Sec. A-25. 22 MRSA §2422, sub-§4-N, as enacted by PL 2019, c. 331, §2 and c. 528, §16, is repealed and the following enacted in its place:

4-N. Immature marijuana plant. "Immature marijuana plant" means a nonflowering marijuana plant that measures more than 24 inches from the base of the main plant stalk to the most distant point of the plant's leaf stems or branches. "Immature marijuana plant" does not include hemp as defined in Title 7, section 2231, subsection 1-A, paragraph D.

Sec. A-26. 22 MRSA §2422, sub-§4-S, as enacted by PL 2019, c. 331, §2 and c. 528, §16, is repealed and the following enacted in its place:

4-S. Marijuana concentrate. "Marijuana concentrate" means the resin extracted from any part of a marijuana plant and every compound, manufacture, salt, derivative, mixture or preparation from such resin, including, but not limited to, hashish. "Marijuana concentrate" does not include resin extracted from hemp as

defined in Title 7, section 2231, subsection 1-A, paragraph D or any compound, manufacture, salt, derivative, mixture or preparation therefrom.

Sec. A-27. 22 MRSA §2428, sub-§1-A, ¶F, as repealed and replaced by PL 2019, c. 331, §24 and c. 354, §7, is repealed and the following enacted in its place:

F. Except as provided in section 2426:

(1) Transfer marijuana plants and harvested marijuana to a qualifying patient and to a caregiver on behalf of a qualifying patient in a retail sale for reasonable compensation;

(2) Transfer marijuana plants and harvested marijuana to a qualifying patient, caregiver or dispensary for no remuneration;

(3) Acquire marijuana plants and harvested marijuana from another dispensary for no remuneration;

(4) Transfer to and accept from a registered caregiver or another dispensary marijuana plants and harvested marijuana in a wholesale transaction in accordance with this paragraph. A dispensary may transfer in wholesale transactions for reasonable compensation or for no remuneration up to 75% of the mature marijuana plants grown by the dispensary over the course of a calendar year, including any marijuana products or marijuana concentrate manufactured from that 75% of the mature marijuana plants grown by the dispensary. A dispensary may transfer to or accept from registered caregivers and dispensaries in wholesale transactions an unlimited amount of immature marijuana plants and seedlings. A dispensary that acquires mature marijuana plants, marijuana products or marijuana concentrate in a wholesale transaction under this subparagraph may not resell the mature marijuana plants, marijuana products or marijuana concentrate except to a qualifying patient or to a caregiver or dispensary to assist a qualifying patient;

(5) Transfer harvested marijuana to a manufacturing facility and accept marijuana products and marijuana concentrate from the manufacturing facility that are produced from the harvested marijuana the dispensary provided to the manufacturing facility; and

(6) Provide samples to a marijuana testing facility for testing and research purposes;

Sec. A-28. 22 MRSA §3739, sub-§2, ¶G, as repealed by PL 2019, c. 450, §16 and amended by c. 524, §16, is repealed.

Sec. A-29. 24-A MRSA §4316, sub-§4, ¶C, as enacted by PL 2019, c. 289, §2, is amended to read:

C. The enrollee is cognitively and physically capable of operating the mobile health devices or the enrollee has a caregiver willing and able to assist with the mobile health devices; and

Sec. A-30. 25 MRSA §1542-A, sub-§1, ¶R, as amended by PL 2019, c. 343, Pt. G, §5; c. 399, §3; c. 402, §3; and c. 416, §3, is repealed and the following enacted in its place:

R. Who is required to have a criminal background check under Title 22, section 8302-A or 8302-B.

Sec. A-31. 25 MRSA §1542-A, sub-§1, ¶S, as enacted by PL 2019, c. 399, §4 and c. 402, §4 and reallocated by c. 343, Pt. G, §4 and c. 416, §2, is repealed and the following enacted in its place:

S. Who is required to have a criminal history record check under Title 22, section 2425-A, subsection 3-A.

Sec. A-32. 25 MRSA §1542-A, sub-§1, ¶T, as enacted by PL 2019, c. 399, §4; c. 402, §4; and c. 416, §4, is repealed and the following enacted in its place:

T. Who is required to have a criminal history record check under Title 22, section 8110.

Sec. A-33. 25 MRSA §1542-A, sub-§1, ¶U, as enacted by PL 2019, c. 616, Pt. S, §2, is reallocated to 25 MRSA §1542-A, sub-§1, ¶X.

Sec. A-34. 25 MRSA §1542-A, sub-§1, ¶V is enacted to read:

V. Who is employed or may be offered employment by the Office of the State Auditor as required under Title 5, section 247.

Sec. A-35. 25 MRSA §1542-A, sub-§1, ¶W is enacted to read:

W. Who is required to have a criminal history record check under Title 19-A, section 2111.

Sec. A-36. 25 MRSA §1542-A, sub-§3, ¶O, as repealed by PL 2019, c. 343, Pt. G, §8 and c. 416, §5 and repealed and replaced by c. 399, §5 and c. 402, §5, is repealed and the following enacted in its place:

O. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph P at the request of that person and upon payment of the expenses by that person as required by Title 32, section 2571-A.

Sec. A-37. 25 MRSA §1542-A, sub-§3, ¶S, as enacted by PL 2019, c. 399, §6; c. 402, §6; and c. 416, §7, is repealed and the following enacted in its place:

S. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph T at the request of that person or the Department of Health and Human Services pursuant to Title 22, section 8110.

Sec. A-38. 25 MRSA §1542-A, sub-§3, ¶T, as enacted by PL 2019, c. 616, Pt. S, §3 and c. 644, §2, is repealed and the following enacted in its place:

T. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph U at the request of that person and upon payment of the expenses by the Department of Labor, Bureau of Unemployment Compensation as specified under Title 26, section 1085, subsection 3.

Sec. A-39. 25 MRSA §1542-A, sub-§3, ¶U is enacted to read:

U. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph V at the request of that person or the Office of the State Auditor and upon payment by the Office of the State Auditor of the fee established in Title 5, section 247, subsection 3.

Sec. A-40. 25 MRSA §1542-A, sub-§3, ¶V is enacted to read:

V. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph W at the request of that person or the Department of Health and Human Services pursuant to Title 19-A, section 2111.

Sec. A-41. 25 MRSA §1542-A, sub-§3, ¶W is enacted to read:

W. The State Police shall take or cause to be taken the fingerprints of the person named in subsection 1, paragraph X at the request of that person or the Department of Administrative and Financial Services, Office of Information Technology and upon payment of the fee as provided under Title 5, section 1986.

Sec. A-42. 25 MRSA §1542-A, sub-§4, as repealed and replaced by PL 2019, c. 343, Pt. G, §10; c. 399, §7; c. 402, §7; and c. 416, §8, is repealed and the following enacted in its place:

4. Duty to submit to State Bureau of Identification. It is the duty of the law enforcement agency taking the fingerprints as required by subsection 3, paragraphs A, B and G to transmit immediately to the State Bureau of Identification the criminal fingerprint record. Fingerprints taken pursuant to subsection 1, paragraph C, D, E or F or pursuant to subsection 5 may not be submitted to the State Bureau of Identification unless an express request is made by the commanding officer of the State Bureau of Identification. Fingerprints taken

pursuant to subsection 1, paragraph G must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Department of Education. The bureau may not use the fingerprints for any purpose other than that provided for under Title 20-A, section 6103. The bureau shall retain the fingerprints, except as provided under Title 20-A, section 6103, subsection 9. Fingerprints taken pursuant to subsection 1, paragraph I and subsection 3, paragraph I must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the court and the Department of Public Safety, Gambling Control Board, respectively. Fingerprints taken pursuant to subsection 1, paragraph J or S must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Department of Administrative and Financial Services. Fingerprints taken pursuant to subsection 1, paragraph P must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Board of Osteopathic Licensure, established in Title 32, chapter 36. Fingerprints taken pursuant to subsection 1, paragraph N must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Board of Licensure in Medicine, established in Title 32, chapter 48. Fingerprints taken pursuant to subsection 1, paragraph Q must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the State Board of Nursing, established in Title 32, chapter 31. Fingerprints taken pursuant to subsection 1, paragraph O must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks under Title 28-B, section 204. Fingerprints taken pursuant to subsection 1, paragraph R, T or W must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Department of Health and Human Services. Fingerprints taken pursuant to subsection 1, paragraph V must be transmitted immediately to the State Bureau of Identification to enable the bureau to conduct state and national criminal history record checks for the Office of the State Auditor.

Sec. A-43. 26 MRSA §3, sub-§3, ¶B, as amended by PL 2019, c. 343, Pt. D, §13 and Pt. III, §7, is repealed and the following enacted in its place:

B. Information and records pertaining to the workforce, employment patterns, wage rates, poverty and low-income patterns, economically distressed communities and regions and other similar information and data to the Department of Administrative and Financial Services and the Department of

Economic and Community Development for the purposes of analysis and evaluation, measuring and monitoring poverty and economic and social conditions throughout the State, and promoting economic development.

Sec. A-44. 30-A MRSA §4312, sub-§3, ¶K, as amended by PL 2019, c. 38, §3; c. 145, §3; and c. 153, §2, is further amended to read:

K. To encourage municipalities to develop policies that assess community needs and environmental effects of municipal regulations, lessen the effect of excessive parking requirements for buildings in downtowns and on main streets and provide for alternative approaches for compliance relating to the reuse of upper floors of buildings in downtowns and on main streets; and

Sec. A-45. 30-A MRSA §4312, sub-§3, ¶M, as enacted by PL 2019, c. 145, §4 and reallocated by RR 2019, c. 1, Pt. A, §38, is amended to read:

M. To encourage municipalities to develop policies that provide for accessory dwelling units; and

Sec. A-46. 30-A MRSA §5903, sub-§6-A, as amended by PL 2019, c. 343, Pt. D, §14 and Pt. III, §9, is repealed and the following enacted in its place:

6-A. Median household income. "Median household income" means the income computed based on the most current census information available, as provided by the State Economist.

Sec. A-47. 35-A MRSA §3454, first ¶, as amended by PL 2019, c. 343, Pt. D, §15 and Pt. III, §10, is repealed and the following enacted in its place:

In making findings pursuant to Title 38, section 484, subsection 3, the primary siting authority shall presume that an expedited wind energy development provides energy and emissions-related benefits described in section 3402 and shall make additional findings regarding other tangible benefits provided by the development. The Department of Labor, the Governor's Energy Office and the Public Utilities Commission shall provide review comments if requested by the primary siting authority.

Sec. A-48. 35-A MRSA §10110, sub-§1, ¶C, as amended by PL 2019, c. 306, §4 and c. 365, §2, is repealed and the following enacted in its place:

C. "Conservation programs" means programs developed by the trust pursuant to this section designed to increase the efficiency of electricity use.

Sec. A-49. 36 MRSA §1817, sub-§5, as repealed by PL 2017, c. 409, Pt. D, §3 and amended by c. 452, §30, is repealed.

Sec. A-50. 37-B MRSA §111, as enacted by PL 1983, c. 460, §3, is repealed.

Sec. A-51. 38 MRSA §484, sub-§10, as amended by PL 2019, c. 343, Pt. D, §17 and Pt. III, §12, is repealed and the following enacted in its place:

10. Special provisions; wind energy development or offshore wind power project. In the case of a grid-scale wind energy development, or an offshore wind power project with an aggregate generating capacity of 3 megawatts or more, the proposed generating facilities, as defined in Title 35-A, section 3451, subsection 5:

A. Will be designed and sited to avoid unreasonable adverse shadow flicker effects;

B. Will be constructed with setbacks adequate to protect public safety. In making a finding pursuant to this paragraph, the department shall consider the recommendation of a professional, licensed civil engineer as well as any applicable setback recommended by a manufacturer of the generating facilities; and

C. Will provide significant tangible benefits as determined pursuant to Title 35-A, section 3454, if the development is an expedited wind energy development.

The Department of Labor, the Governor's Energy Office and the Public Utilities Commission shall provide review comments if requested by the primary siting authority.

For purposes of this subsection, "grid-scale wind energy development," "primary siting authority," "significant tangible benefits" and "expedited wind energy development" have the same meanings as in Title 35-A, section 3451.

Sec. A-52. PL 2019, c. 343, Pt. D, §18 is amended to read:

Sec. D-18. Maine Revised Statutes amended; revision clause. Wherever in the Maine Revised Statutes the words "Governor's Office of Policy and Management" appear or reference is made to that entity or those words, those words are amended to read or mean, as appropriate, "~~Governor's~~ Office of Policy Innovation and the Future" and the Revisor of Statutes shall implement this revision when updating, publishing or republishing the statutes.

PART B

Sec. B-1. 3 MRSA §312-A, sub-§11-A, as amended by PL 2019, c. 587, §5 and c. 599, §2, is repealed and the following enacted in its place:

11-A. Original source. "Original source" means any person who pays \$1,000 or more in any lobbying year directly or indirectly to any employer of a lobbyist for purposes of lobbying or grassroots lobbying or to any other person for purposes of grassroots lobbying, except that payments of membership dues to nonprofit

corporations formed under Title 13-B, under any equivalent state law or by legislative enactment are not considered payments by an original source.

Sec. B-2. 5 MRSA §4572, sub-§1, ¶D, as amended by PL 2005, c. 10, §12, is further amended by amending subparagraph (2) to read:

(2) Make or keep a record of race or color, sex, sexual orientation, physical or mental disability, religion, age, ancestry or national origin, any previous assertion of a claim or right under former Title 39 or Title 39-A or any previous actions that are protected under Title 26, chapter 7, subchapter 5-B, except ~~under that, in relation to~~ physical or mental disability, when an employer requires a physical or mental examination prior to employment, a privileged record of that examination is permissible if made and kept in compliance with this Act;

Sec. B-3. 5 MRSA §17851-A, sub-§6-B, as enacted by PL 2019, c. 541, §10, is amended to read:

6-B. Consequences of participation in retirement plan under section 17851, subsection 14. A member in the capacity specified in subsection 1, paragraph ~~N~~ Q who, prior to July 1, 2020, elected the retirement option provided in section 17851, subsection 14 is treated as follows under the 1998 Special Plan.

A. A member who made the election at the time of first employment in a position covered under section 17851, subsection 14 is considered to be a member under the 1998 Special Plan as of the date of hire. Beginning July 1, 2020, a member covered by this paragraph shall contribute to the State Employee and Teacher Retirement Program or have pick-up contributions made at a rate of 8.65% of earnable compensation until completion of 25 years of creditable service and shall contribute at a rate of 7.65% thereafter.

B. A member who was serving in a position covered under section 17851, subsection 14 at the time of the election and who elected to participate in the retirement option prospectively from the time of election is considered to be a member under the 1998 Special Plan as of the effective date of the election. Beginning July 1, 2020, a member covered by this paragraph shall contribute to the State Employee and Teacher Retirement Program or have pick-up contributions made at a rate of 8.65% of earnable compensation until completion of 25 years of creditable service and shall contribute at a rate of 7.65% thereafter.

C. A member who was serving in a position covered under section 17851, subsection 14 at the time of the election and who elected to participate in the retirement option prospectively from the time of election and also elected to purchase credit for service earned while serving in the same capacity

before exercising the election is considered to be a member under the 1998 Special Plan as of the beginning date of the service for which credit is purchased, as long as all of the payments required under section 17852, subsection 15 are made before retirement. If all the required payments are not made before retirement, that member is considered to be a member under the 1998 Special Plan as of the effective date of the election. Beginning July 1, 2020, for employees identified in subsection 1, paragraph ~~N~~ Q, a member covered by this paragraph shall contribute to the State Employee and Teacher Retirement Program or have pick-up contributions made at a rate of 8.65% of earnable compensation until completion of 25 years of creditable service and shall contribute at a rate of 7.65% thereafter.

Employee contributions and actuarial and administrative costs paid to the State Employee and Teacher Retirement Program by a member covered by this subsection may not be returned to that member, except that these employee contributions may be refunded to a member who terminates service and requests a refund under section 17705-A.

Sec. B-4. 16 MRSA §707, sub-§1, as amended by PL 2015, c. 354, §2, is further amended to read:

1. Offense. A person is guilty of unlawful dissemination of confidential criminal history record information if the person intentionally disseminates confidential criminal history record information knowing it to be in violation of any of the provisions of this chapter ~~or if the person intentionally disseminates criminal history record information relating to a criminal conviction in violation of Title 15, section 2255 knowing it to be in violation.~~

Sec. B-5. 29-A MRSA §2081, sub-§2-B, as amended by PL 2019, c. 577, §3, is further amended to read:

2-B. Children 2 years of age or older and weighing less than 55 pounds. When a child who is 2 years of age or older and who weighs less than 55 pounds is being transported in a motor vehicle that is required by the United States Department of Transportation to be equipped with seat belts, the operator shall ensure that the child is properly secured in a child restraint system with an internal harness in accordance with the child restraint system manufacturer's instructions and the vehicle manufacturer's instructions except that, if the child exceeds the child restraint system manufacturer's recommended height limit for the child restraint system, the operator shall ensure that the child is properly secured in a federally approved belt positioning seat. Violation of this subsection is a traffic infraction for which a fine of \$50 for the first offense, \$125 for the 2nd offense and \$250 for the 3rd and subsequent offenses must be imposed. A fine imposed under this subsection may not be suspended by the court.

Sec. B-6. 30-A MRSA §5225, sub-§1, ¶C, as amended by PL 2019, c. 604, §3 and c. 625, §3, is repealed and the following enacted in its place:

C. Costs related to economic development, environmental improvements, fisheries and wildlife or marine resources projects, recreational trails, broadband service development, expansion or improvement, including connecting to broadband service outside the tax increment financing district, employment training or the promotion of workforce development and retention within the municipality or plantation, including, but not limited to:

(1) Costs of funding economic development programs or events developed by the municipality or plantation or funding the marketing of the municipality or plantation as a business or arts location;

(2) Costs of funding environmental improvement projects developed by the municipality or plantation for commercial or arts district use or related to such activities;

(3) Funding to establish permanent economic development revolving loan funds, investment funds and grants;

(4) Costs of services and equipment to provide skills development and training, including scholarships to in-state educational institutions or to online learning entities when in-state options are not available, for jobs created or retained in the municipality or plantation. These costs must be designated as training funds in the development program;

(5) Costs associated with quality child care facilities and adult care facilities, including finance costs and construction, staffing, training, certification and accreditation costs related to child care and adult care;

(6) Costs associated with new or existing recreational trails determined by the department to have significant potential to promote economic development, including, but not limited to, costs for multiple projects and project phases that may include planning, design, construction, maintenance, grooming and improvements with respect to new or existing recreational trails, which may include bridges that are part of the trail corridor, used all or in part for all-terrain vehicles, snowmobiles, hiking, bicycling, cross-country skiing or other related multiple uses;

(7) Costs associated with a new or expanded transit service, limited to:

(a) Transit service capital costs, including but not limited to: transit vehicles such as buses, ferries, vans, rail conveyances and

related equipment; bus shelters and other transit-related structures; and benches, signs and other transit-related infrastructure; and

(b) In the case of transit-oriented development districts, ongoing costs of adding to an existing transit system or creating a new transit service and limited strictly to transit operator salaries, transit vehicle fuel and transit vehicle parts replacements;

(8) Costs associated with the development of fisheries and wildlife or marine resources projects;

(9) Costs related to the construction or operation of municipal or plantation public safety facilities, the need for which is related to general economic development within the municipality or plantation, not to exceed 15% of the captured assessed value of the development district; and

(10) Costs associated with broadband and fiber optics expansion projects, including preparation, planning, engineering and other related costs in addition to the construction costs of those projects. If an area within a municipality or plantation is unserved with respect to broadband service, as defined by the ConnectMaine Authority as provided in Title 35-A, section 9204-A, subsection 1, broadband and fiber optics expansion projects may serve residential or other nonbusiness or non-commercial areas in addition to business or commercial areas within the municipality or plantation; and

Sec. B-7. 32 MRSA §3300-D, as enacted by PL 2015, c. 137, §1, is amended to read:

§3300-D. Interstate practice of ~~telemedicine~~ telehealth

1. Definition. For the purposes of this section, "~~telemedicine telehealth~~" has the same meaning as in Title 24-A, section 4316, subsection 1.

2. Requirements. A physician not licensed to practice medicine in this State may provide consultative services through interstate ~~telemedicine telehealth~~ to a patient located in this State if the physician is registered in accordance with subsection 3. A physician intending to provide consultative services in this State through interstate ~~telemedicine telehealth~~ shall provide any information requested by the board and complete information on:

A. All states and jurisdictions in which the physician is currently licensed;

B. All states and jurisdictions in which the physician was previously licensed; and

C. All negative licensing actions taken previously against the physician in any state or jurisdiction.

3. Registration. The board may register a physician to practice medicine in this State through interstate ~~telemedicine telehealth~~ if the following conditions are met:

A. The physician is fully licensed without restriction to practice medicine in the state from which the physician provides ~~telemedicine telehealth~~ services;

B. The physician has not had a license to practice medicine revoked or restricted in any state or jurisdiction;

C. The physician does not open an office in this State, does not meet with patients in this State, does not receive calls in this State from patients and agrees to provide only consultative services as requested by a physician, advanced practice registered nurse or physician assistant licensed in this State and the physician, advanced practice registered nurse or physician assistant licensed in this State retains ultimate authority over the diagnosis, care and treatment of the patient;

D. The physician registers with the board every 2 years, on a form provided by the board; and

E. The physician pays a registration fee not to exceed \$500.

4. Notification of restrictions. A physician registered to provide interstate ~~telemedicine telehealth~~ services under this section shall immediately notify the board of restrictions placed on the physician's license to practice medicine in any state or jurisdiction.

5. Jurisdiction. In registering to provide interstate ~~telemedicine telehealth~~ services to residents of this State under this section, a physician agrees to be subject to the laws and judicial system of this State and board rules with respect to providing medical services to residents of this State.

6. Notification to other states. The board shall obtain confirmation of licensure from all states and jurisdictions in which a physician applying for registration has ever been licensed prior to registering the physician pursuant to subsection 3. The board shall request notification from a state or jurisdiction if future adverse action is taken against the physician's license in that state or jurisdiction.

Sec. B-8. 32 MRSA c. 113-B, sub-c. 5, head-note, as enacted by PL 2019, c. 265, §1, is amended to read:

SUBCHAPTER 5 6

COMPLEMENTARY AND ALTERNATIVE HEALTH CARE

Sec. B-9. 34-B MRSA §3874, as enacted by PL 2015, c. 309, §10, is amended to read:

§3874. Medical examinations conducted via telemedicine telehealth technologies

Notwithstanding any other provision in this subchapter, any medical examination or consultation required or permitted to be conducted under this subchapter may be conducted using telemedicine telehealth or other similar technologies that enable the medical examination or consultation to be conducted in accordance with applicable standards of care. As used in this section, "telemedicine telehealth" has the same meaning as in Title 24-A, section 4316, subsection 1.

Sec. B-10. 35-A MRSA §9203, sub-§1, ¶F, as enacted by PL 2015, c. 284, §4, is amended to read:

F. One member with significant knowledge of telemedicine telehealth as defined in Title 24-A, section 4316, subsection 1, appointed by the Governor.

Sec. B-11. 35-A MRSA §9211-A, sub-§3, ¶B, as enacted by PL 2015, c. 323, §1, is amended to read:

B. Provide expanded health care services by facilitating access to telemedicine telehealth, as defined in Title 24-A, section 4316, subsection 1, and state and local services for senior citizens and persons with disabilities;

Sec. B-12. 38 MRSA §546, sub-§6, as amended by PL 1991, c. 698, §6, is further amended to read:

6. Vessel response plans. Every tank vessel, as defined under ~~56~~ 46 United States Code, Section 2101, entering state waters shall have available for inspection by the commissioner or an agent of the commissioner a copy of any oil discharge response plan required to be submitted to the President of the United States under the federal Oil Pollution Act of 1990, Public Law 101-380, Section 4202, 104 Stat. 484.

Sec. B-13. 38 MRSA §1154, as amended by PL 1983, c. 444, is repealed and the following enacted in its place:

§1154. Appeal

If a person sustaining damages by any taking by a sanitary district under section 1153 does not agree with the district upon the sum to be paid therefor, either party, upon petition to the county commissioners of the county in which the property is located, may have the damages assessed by them; the procedure and all subsequent proceedings and right of appeal thereon must be had under the same restrictions, conditions and limitations as are or may be by law prescribed in the case of

damages by the laying out of highways by the county commissioners, except only:

1. Title not vested until payment. Title to the lands, real estate, easements or interests therein and other property and rights to be taken do not vest in the district until payment to the owner of the amount awarded therefor or, if such payment is refused upon tender, until tender thereof to the treasurer of the county in which lands and interests are located, for escrow at interest for the benefit of the owner pending final determination of the amount to which the owner is entitled; and

2. Appeal. In the event of an appeal of the amount awarded as damages for such a taking:

A. The petition for assessment of damages must be filed with the clerk of the county commissioners, by either party, within 30 days following the filing and recording of plans of the location of all the property, facilities and rights taken; and

B. If the return of the county commissioners has not been made within 120 days following the filing of the petition for assessment, the county commissioners must be conclusively presumed to have confirmed the award of damages by the district and either party may, within 30 days following that 120-day period, appeal the amount of the damages awarded by the district to the Superior Court.

Sec. B-14. PL 2019, c. 574, §1, amending clause is amended to read:

Sec. 1. 19-A MRSA §4007, sub-§1, as amended by PL 2019, c. 176, §2 and c. 407, §4, is further amended to read:

PART C

Sec. C-1. 3 MRSA §312-A, sub-§11-A, as amended by PL 2019, c. 587, §5 and affected by §18 and amended by c. 599, §2 and affected by §5, is repealed and the following enacted in its place:

11-A. Original source. "Original source" means any person who pays \$1,000 or more in any lobbying year directly or indirectly to any employer of a lobbyist for purposes of lobbying or grassroots lobbying or to any other person for purposes of grassroots lobbying, except that payments of membership dues to nonprofit corporations formed under Title 13-B, under any equivalent state law or by legislative enactment are not considered payments by an original source.

Sec. C-2. 3 MRSA §317, sub-§4, ¶B, as amended by PL 2019, c. 587, §16 and affected by §18, is further amended to read:

B. If the lobbyist or lobbyist associate is engaged in lobbying, if the lobbyist, lobbyist associate or employer conducts ~~indirect~~ grassroots lobbying or if the employer makes any expenditures directly to

or on behalf of a covered official or a covered official's immediate family member in any of those months, a monthly report in the manner prescribed in subsection 1 even if compensation or reimbursement for expenses has not been received for the month.

Sec. C-3. 5 MRSA §7-B, as amended by PL 2019, c. 578, §2, is further amended to read:

§7-B. Use of state vehicles for commuting

A Notwithstanding section 7-A, a state-owned or state-leased vehicle may not be used by any employee to commute between home and work, except for those vehicles authorized and assigned to employees of the Baxter State Park Authority and of the Department of Defense, Veterans and Emergency Management, Military Bureau as designated by the Commissioner of Defense, Veterans and Emergency Management and to law enforcement officials within the following organizational units: Bureau of State Police; Maine Drug Enforcement Agency; Office of the State Fire Marshal; the division within the Department of Public Safety designated by the Commissioner of Public Safety to enforce the law relating to the manufacture, importation, storage, transportation and sale of all liquor and to administer those laws relating to licensing and collection of taxes on malt liquor and wine; Bureau of Motor Vehicles; Bureau of Marine Patrol; the forest protection unit within the Bureau of Forestry; Bureau of Warden Service; Bureau of Parks and Lands; and the Office of Chief Medical Examiner, the investigation division and the Medicaid fraud control unit within the Office of the Attorney General.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.

Effective June 21, 2021.

CHAPTER 294

H.P. 119 - L.D. 163

**An Act Concerning the
Regulation of Air Emissions at
Petroleum Storage Facilities**

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

Sec. 1. 38 MRSA §590, sub-§1, as amended by PL 2001, c. 626, §16, is repealed and the following enacted in its place:

1. License required; rules. After ambient air quality standards and emission standards have been established within a region, the board may by rule provide that a person may not operate, maintain or modify in that region any air contamination source or emit any

air contaminants in that region without an air emission license from the department.

A. As a condition of licensure under this chapter for any petroleum storage facility with an above-ground petroleum storage tank, the facility shall:

(1) Ensure that any new aboveground petroleum storage tank with a storage capacity greater than 39,000 gallons used for the storage of distillate fuel products is equipped with a floating roof;

(2) Maintain a record of any additives or materials added to any heated, aboveground petroleum storage tank;

(3) Ensure that any heated, fixed-roof aboveground petroleum storage tank is fully insulated in a manner that minimizes temperature fluctuation and resulting breathing losses and that the temperature of the petroleum product stored in the tank is continuously monitored;

(4) Implement forward-looking infrared technology for the monitoring of vapor leaks around any aboveground petroleum storage tank with a storage capacity greater than 39,000 gallons, as well as around the piping and fittings associated with the tank. The facility shall conduct such monitoring on at least a quarterly basis, and the results of that monitoring and any resulting repairs made as a result of detected leaks must be properly documented and provided to the department upon request;

(5) Collect site-specific air emission test data semiannually during the most active time of operations for any existing, new or modified heated, aboveground petroleum storage tank with a storage capacity greater than 39,000 gallons, and the collected data must be used to establish site-specific air emission factors. A facility that operates in a similar manner multiple tanks of the same construction storing the same product may, upon approval by the department, collect site-specific air emission test data from a representative tank in lieu of testing all similarly operating tanks. The test data collected by the facility must be used for the purposes of annual air emissions reporting and by the department when determining compliance with licensed air emission limits;

(6) Conduct on a monthly basis a visual inspection of the internal, floating roof of any aboveground petroleum storage tank equipped with such a roof; conduct on a monthly basis an external leak inspection of that roof using photo ionization detection technology or flame ionization detection technology; and conduct a complete inspection of the cover and seal