MAINE STATE LEGISLATURE

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LAWS

OF THE

STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND THIRTY-SECOND LEGISLATURE

FIRST REGULAR SESSION December 4, 2024 to March 21, 2025

FIRST SPECIAL SESSION March 25, 2025 to June 25, 2025

THE GENERAL EFFECTIVE DATE FOR FIRST REGULAR SESSION NONEMERGENCY LAWS IS JUNE 20, 2025

THE GENERAL EFFECTIVE DATE FOR FIRST SPECIAL SESSION NONEMERGENCY LAWS IS SEPTEMBER 24, 2025

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

Augusta, Maine 2025

grantee that will provide management and oversight of the delivery of family planning services.

See title page for effective date.

CHAPTER 444 S.P. 82 - L.D. 146

An Act to Increase the Maximum Amount of the Historic Property Rehabilitation Tax Credit That May be Taken in a Year

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

- Sec. 1. 36 MRSA §5219-BB, sub-§4, as repealed and replaced by PL 2013, c. 550, §1 and affected by §2, is amended to read:
- **4. Maximum credit.** The For tax years beginning before January 1, 2025, the credit allowed pursuant to this section and section 2534 may not exceed the greater of:
 - A. Five million dollars for the portion of a certified rehabilitation as defined by the Code, Section 47(c)(2)(C) placed in service in the State in the taxable year; and
 - B. Five million dollars for each building that is a component of a certified historic structure for which a credit is claimed under this section.
- Sec. 2. 36 MRSA §5219-BB, sub-§4-A is enacted to read:
- **4-A.** Maximum credit; beginning 2025. For tax years beginning on or after January 1, 2025, the credit allowed pursuant to this section and section 2534:
 - A. In the first year in which the credit may be claimed, may not exceed the greater of:
 - (1) Ten million dollars for the portion of a certified rehabilitation as defined by the Code, Section 47(c)(2)(C) placed in service in the State in the taxable year; and
 - (2) Ten million dollars for each building that is a component of a certified historic structure for which a credit is claimed under this section;
 - B. In the 2nd year in which the credit may be claimed, may not exceed the greater of:
 - (1) Ten million dollars minus the credit allowed under paragraph A, subparagraph (1) for the portion of a certified rehabilitation as defined by the Code, Section 47(c)(2)(C) placed in service in the State in the taxable year; and

- (2) Ten million dollars minus the credit allowed under paragraph A, subparagraph (2) for each building that is a component of a certified historic structure for which a credit is claimed under this section; and
- C. In the 3rd and subsequent years in which the credit may be claimed, may not exceed the greater of:
 - (1) Five million dollars for the portion of a certified rehabilitation as defined by the Code, Section 47(c)(2)(C) placed in service in the State in the taxable year; and
 - (2) Five million dollars for each building that is a component of a certified historic structure for which a credit is claimed under this section.

See title page for effective date.

CHAPTER 445 H.P. 96 - L.D. 163

An Act to Require Health
Insurance Coverage for
Federally Approved
Nonprescription Oral
Hormonal Contraceptives and
Nonprescription Emergency
Contraceptives

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

- **Sec. 1. 24 MRSA §2332-J, sub-§1,** as enacted by PL 1999, c. 341, §1 and affected by §5, is amended to read:
- 1. Coverage requirements. All individual and group nonprofit hospital and medical services plan policies and contracts and all nonprofit health care plan policies and contracts that provide coverage for prescription drugs or outpatient medical services must provide coverage for all prescription contraceptives, nonprescription oral hormonal contraceptives and nonprescription emergency contraceptives approved by the federal Food and Drug Administration or for outpatient contraceptive services, respectively, to the same extent that coverage is provided for other prescription drugs or outpatient medical services in accordance with the requirements of this section. For purposes of this section, the term "outpatient contraceptive services" means consultations, examinations, procedures and medical services provided on an outpatient basis and related to the use of contraceptive methods to prevent an unintended pregnancy. This section may not be construed to apply to prescription drugs or devices that are designed to terminate a pregnancy.