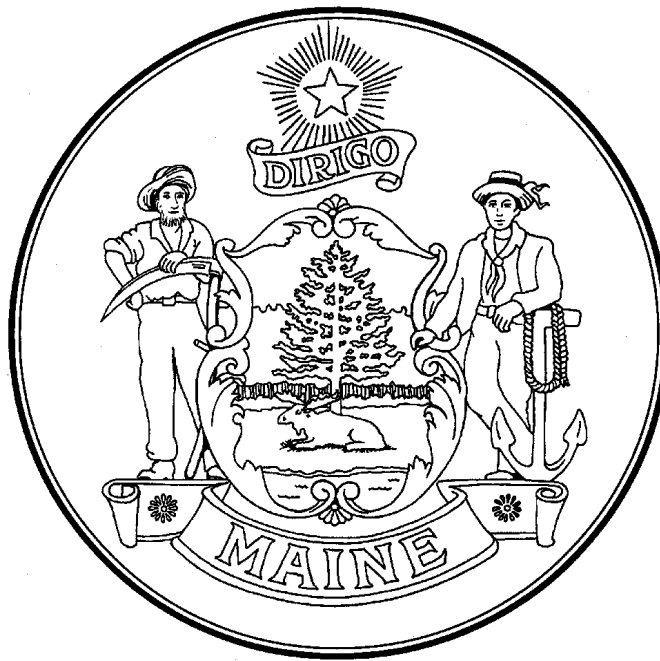


MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND THIRTY-SECOND LEGISLATURE

SECOND REGULAR SESSION
JANUARY 7, 2026 to APRIL 29, 2026

THE GENERAL EFFECTIVE DATE FOR
SECOND REGULAR SESSION
NONEMERGENCY LAWS IS
JULY 29, 2026

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

Augusta, Maine
2026

Initiative: Provides one-time funds for the initial start-up costs associated with implementing the grant program.

GENERAL FUND	2025-26	2026-27
All Other	\$50,000	\$0
GENERAL FUND TOTAL	\$50,000	\$0

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

Effective January 11, 2026.

CHAPTER 520

S.P. 111 - L.D. 245

An Act to Implement the Recommendations of the Blue Ribbon Commission to Study Emergency Medical Services in the State

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

Whereas, Resolve 2023, chapter 99 reestablished the Blue Ribbon Commission to Study Emergency Medical Services in the State, which was directed to examine and make recommendations on the structure, support and delivery of emergency medical services in the State; and

Whereas, the commission included in its published final report critical recommendations to ensure appropriate funding to cover the cost of sustaining emergency medical services in the State, to provide for necessary regulation and oversight of the emergency medical services system and to better support the resilience and sustainability of that system; and

Whereas, the expedient and efficient implementation of the commission's recommendations is necessary to support the short-term and long-term future of the emergency medical services system at a time when many emergency medical services entities are at immediate or future risk of failing and leaving their service areas without adequate access to emergency medical services; 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:

Sec. 1. 5 MRSA §12004-J, sub-§22 is enacted to read:

22.

Emergency Medical Services	Maine Emergency Medical Services Commission	Legislative Per Diem and Expenses	32 MRSA §99
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Sec. 2. 30-A MRSA c. 154 is enacted to read:

CHAPTER 154

MUNICIPAL EMERGENCY MEDICAL SERVICES

§3171. Definitions

As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.

1. Ambulance service. "Ambulance service" has the same meaning as in Title 32, section 83, subsection 5.

2. Transporting emergency medical services. "Transporting emergency medical services" means emergency medical services provided by an ambulance service.

§3172. Municipal emergency medical services

1. Adoption of plan. The municipal officers of a municipality shall adopt a plan stipulating the method by which transporting emergency medical services will be delivered within the municipality. A municipality is not required under this subsection to directly or indirectly provide or fund the delivery of transporting emergency medical services within the municipality. The municipal officers may as necessary amend a plan adopted pursuant to this subsection.

2. Posting and submission of plan. When a municipality adopts or amends a plan pursuant to subsection 1, the municipal officers shall ensure that the plan is posted in the same manner as ordinances are posted and shall submit the plan or amended plan for the purpose of collecting data to the Department of Public Safety, Maine Emergency Medical Services and the Maine Emergency Medical Services Commission established in Title 32, section 99, subsection 1.

Sec. 3. 32 MRSA §99 is enacted to read:

§99. Maine Emergency Medical Services Commission

1. Commission established. The Maine Emergency Medical Services Commission, referred to in this section as "the commission," is established pursuant to Title 5, section 12004-J, subsection 22 to monitor and evaluate the State's emergency medical services system and to provide recommendations to the appropriate state

agencies and to the Legislature regarding necessary changes in the emergency medical services system.

2. Members. The commission consists of 18 members as follows:

A. Two members of the Senate, including one member of the party holding the largest number of seats in the Legislature and one member of the party holding the 2nd largest number of seats in the Legislature, appointed by the President of the Senate;

B. Two members of the House of Representatives, including one member of the party holding the largest number of seats in the Legislature and one member of the party holding the 2nd largest number of seats in the Legislature, appointed by the Speaker of the House of Representatives;

C. The director or the director's designee;

D. The chair of the board or the chair's designee;

E. The following 6 members, appointed by the President of the Senate:

(1) A member who represents an organization that is primarily engaged in the provision of nonemergency medical transportation services;

(2) A member who is a practicing emergency medical services person;

(3) A member who represents a nonmunicipal ambulance service;

(4) A member who represents a municipal ambulance service;

(5) A representative of a statewide association representing hospitals; and

(6) A representative of a statewide association representing municipalities; and

F. The following 6 members, appointed by the Speaker of the House of Representatives:

(1) A member representing an emergency medical services training center;

(2) A member who is a practicing emergency medical dispatcher primarily working in an emergency medical dispatch center;

(3) A member who represents an air ambulance service;

(4) A representative of a statewide association representing ambulance services;

(5) A member who is a physician with expertise or a background in emergency medical services; and

(6) A representative of a statewide association representing fire chiefs.

3. Terms. Members of the commission are appointed for 3-year terms, except that the terms of appointment for legislative members appointed pursuant to subsection 2, paragraphs A and B coincide with their respective legislative terms of office. Members of the commission may serve beyond their designated terms until their successors are appointed.

4. Vacancies. In the event of a vacancy on the commission, the member's unexpired term must be filled through an appointment by the appointing authority for the vacant seat.

5. Quorum. A quorum of the commission consists of 10 members.

6. First meeting; officers. The director shall call the first meeting of the commission as soon as all appointments are made and to the extent resources are available. At the first meeting, the commission shall select a chair, a vice-chair, a secretary and a treasurer from among its members. The commission may select new officers annually.

7. Meetings. The commission may meet as often as necessary but shall meet at least quarterly. A meeting may be called by the chair or by any 4 members. The commission shall take and maintain minutes of all meetings.

8. Staffing. To the extent resources are available, the commission may employ staff as needed.

9. Funding. The commission may seek, accept and expend outside funding to carry out its duties.

10. Duties. The commission shall:

A. Regularly advise the Governor and officers of executive departments, the Legislature, Maine Emergency Medical Services, licensed emergency medical service and emergency medical services persons and any other parties affected by the commission's recommendations regarding emergency medical services;

B. Submit a report containing the results of the commission's studies, findings and recommendations to the Governor and to the joint standing committee of the Legislature having jurisdiction over public safety matters by January 1, 2026 and annually thereafter. As resources permit, the report must include, but is not limited to:

(1) An assessment of existing and needed resources and expected resource needs within the State's emergency medical services system and recommendations for funding those needs;

(2) An evaluation of existing emergency medical services programs, initiatives and resources, including recommendations for improvements, new programs and initiatives and

funding options for oversight and administration of the State's emergency medical services system;

(3) Recommendations regarding effective management of resources within the State's emergency medical services system, enhancing the collection and distribution of emergency medical services data, methods to evaluate the State's emergency medical services system and recruitment and retention of emergency medical services persons, both paid and volunteer; and

(4) The status of municipal emergency medical services plans adopted and submitted pursuant to Title 30-A, section 3172 and an analysis of those plans.

After reviewing the report submitted under this paragraph, the committee may report out legislation relating to the report;

C. Adopt rules of procedure necessary to carry out the commission's duties. Rules adopted pursuant to this paragraph are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A; and

D. Conduct public hearings, conferences, workshops and other meetings to obtain information about and discuss and publicize the needs of and solutions to problems concerning the State's emergency medical services system.

Sec. 4. Staggered terms. Notwithstanding the Maine Revised Statutes, Title 32, section 99, subsection 3, of the initial appointments made to the Maine Emergency Medical Services Commission under Title 32, section 99, subsection 2, paragraphs E and F, each appointing authority shall appoint 2 members for terms of 3 years, 2 members for terms of 2 years and the remaining members for a term of one year.

Sec. 5. Maine Emergency Medical Services funding needs analysis; report. The Department of Public Safety, Maine Emergency Medical Services shall conduct a funding needs analysis of communities seeking to engage in regional collaboration or the adoption of a regional model in the delivery of emergency medical services.

On or before December 3, 2025, Maine Emergency Medical Services shall submit a report describing the findings of its analysis and including recommendations and any proposed legislation to the Joint Standing Committee on Criminal Justice and Public Safety. After reviewing the report, the committee may report out legislation relating to the report to the Second Regular Session of the 132nd Legislature.

Sec. 6. Maine Emergency Medical Services structural reorganization proposal. By December 3, 2025, the Department of Public Safety, Maine Emergency Medical Services shall submit to the Joint

Standing Committee on Criminal Justice and Public Safety a report, including proposed draft legislation, for the reorganization of the Emergency Medical Services' Board, established in the Maine Revised Statutes, Title 5, section 12004-A, subsection 15, consistent with the document titled "Maine EMS: Two-Year Action Plan" published by Maine Emergency Medical Services on October 27, 2023. The report must include, but is not limited to, identification of the necessary statutory changes and funding needs associated with the reorganization of the Emergency Medical Services' Board and any associated structural and organizational changes within Maine Emergency Medical Services and within the state and regional governance system for the emergency medical services program, as outlined in the document titled "Maine EMS: Two-Year Action Plan." After reviewing the report, the committee may report out legislation relating to the report to the Second Regular Session of the 132nd Legislature.

Sec. 7. Maine Emergency Medical Services public information campaign; report. The Department of Public Safety, Maine Emergency Medical Services shall, as resources allow, develop and, not later than July 1, 2026, implement a public information campaign designed to enhance the public's understanding and appreciation of the delivery of emergency medical services, the design and funding of the emergency medical services system in the State and the essentiality of the services provided by emergency medical services entities.

On or before December 3, 2025, Maine Emergency Medical Services shall submit a report to the Joint Standing Committee on Criminal Justice and Public Safety regarding its development and anticipated implementation of the public information campaign required under this section. The report must include, but is not limited to, an assessment of the resource needs associated with the public information campaign and identification of any anticipated resource needs not currently available within the existing budgeted resources of Maine Emergency Medical Services necessary for successful implementation of the campaign. After reviewing the report, the committee may report out legislation relating to the report to the Second Regular Session of the 132nd Legislature.

Sec. 8. Appropriations and allocations. The following appropriations and allocations are made.

LEGISLATURE

Legislature 0081

Initiative: Appropriates funds for the costs of Legislators serving on the Blue Ribbon Commission to Study Emergency Medical Services in the State.

GENERAL FUND	2025-26	2026-27
Personal Services	\$440	\$440
All Other	\$1,920	\$1,920

GENERAL FUND TOTAL	\$2,360	\$2,360
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Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.

Effective January 11, 2026.

CHAPTER 521
S.P. 472 - L.D. 1141

**An Act to Increase the
Procurement of Maine Foods
by Certain State Institutions**

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

Whereas, the people of Maine take enormous pride in the local food producers that support their communities and keep alive time-honored traditions that make Maine a unique place to live; and

Whereas, state agencies are some of the largest customers of local food producers, and state purchasing practices have an enormous impact on the communities that rely on local food producers; and

Whereas, many local food producers have developed strong and long-standing relationships with state agencies to sell high-quality food and food products at a significant discount, supporting local Maine businesses and families in the process; and

Whereas, it is critically important that the state agencies are able to continue and expand such procurement practices as soon as practicable and in perpetuity to support the people of Maine and protect the viability of the local food-producing communities; 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:

Sec. 1. 7 MRSA §211, as amended by PL 2019, c. 677, §1, is repealed and the following enacted in its place:

§211. Statement of policy

It is the policy of the State to encourage food self-sufficiency for the State. All state institutions must purchase Maine food and food products in accordance with this subchapter to increase the viability of Maine farms

and food businesses, enhance rural economic development and increase the environmental and social wealth of rural communities.

Sec. 2. 7 MRSA §212, sub-§4 is enacted to read:

4. Opportunity buying. "Opportunity buying" means the purchasing of food and food products from Maine food producers that are only available for a short period of time before the food or food products become unavailable for purchase.

Sec. 3. 7 MRSA §212, sub-§5 is enacted to read:

5. State institutions. "State institutions" means the Department of Corrections; the Dorothea Dix Psychiatric Center and the Riverview Psychiatric Center within the Department of Health and Human Services; and the Maine Veterans' Homes.

Sec. 4. 7 MRSA §214-A, as enacted by PL 2019, c. 677, §7, is repealed and the following enacted in its place:

§214-A. Maine food and food products procurement program

In accordance with this section, the commissioner shall implement and promote a Maine food and food products procurement program. State institutions may not be prohibited from procuring food and food products directly from Maine food producers, taking advantage of opportunity buying, coordinating dietary requirements and establishing healthy menus consistently throughout state institutions. The program must measurably improve the quality of food and food products for state institutions with the goal that, no later than 2030, at least 30% of all food and food products procured by state institutions are Maine food or food products.

1. Institutional food procurement coordinator. The commissioner shall designate an employee of the department as an institutional food procurement coordinator, referred to in this section as "the coordinator," to assist in the coordination of food procurement for all state institutions. In order to achieve the procurement goal set forth in this section, the coordinator shall:

A. Implement and oversee a strategy to strengthen connections between Maine food producers, distributors and state institutions for off-contract purchase agreements pursuant to subsection 2;

B. Assist the Department of Administrative and Financial Services, Bureau of General Services in the solicitation and review of bids from distributors and Maine food producers throughout the procurement process;