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

4. Report. The board shall report ~~its~~ any recommendations~~, including prescription drug spending targets, and the progress of implementing those recommendations~~ regarding strategies to reduce the cost of prescription drugs, other states' experiences and prescription drug spending data 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.

5. Rulemaking. The board may adopt rules to carry out the purposes of this chapter. Rules adopted pursuant to this subsection are routine technical rules as defined by chapter 375, subchapter 2-A.

Sec. 6. 22 MRSA §8712, sub-§6, as enacted by PL 2019, c. 471, §3, is amended to read:

6. Data shared with Maine Prescription Drug Affordability Board. The organization may share data collected under this chapter with the Maine Prescription Drug Affordability Board, established under Title 5, section 12004-G, subsection 14-I, and its staff as long as any data shared pursuant to this subsection is not further disseminated.

Sec. 7. Affordability program. The Maine Prescription Drug Affordability Board established under the Maine Revised Statutes, Title 5, section 2041, referred to in this section as "the board," in consultation with its advisory council established under Title 5, section 2041, subsection 10 and any technical committees the board may establish, shall develop a program to reduce the impact of prescription drug costs on the State's health care system, stem the rate of growth in prescription drug spending and reduce cost barriers for consumers. The program must be based on the prescription drug spending data received under Title 5, section 2042, subsection 2 and the assessment conducted under Title 5, section 2042, subsections 1-A and 1-B, include recommended implementation and enforcement strategies and identify necessary funding and regulatory and legislative authority.

1. The board shall adopt and submit a preliminary plan for a prescription drug affordability program in its annual report due by January 30, 2026 pursuant to the Maine Revised Statutes, Title 5, section 2042, subsection 4 to the Joint Standing Committee on Health Coverage, Insurance and Financial Services. The preliminary plan must include any proposals for legislative action needed to implement the program. The joint standing committee may report out legislation based upon the report to the 133rd Legislature in 2027.

2. The board shall adopt and submit its final plan for a prescription drug affordability program in a report to the joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters by October 1, 2027. The final plan must include any proposals for legislative action needed to implement the program. The joint standing committee may report out legislation based upon the report to the Second Regular Session of the 133rd Legislature.

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

OFFICE OF AFFORDABLE HEALTH CARE

Office of Affordable Health Care Z320

Initiative: Establishes and provides funding for one Public Service Manager III position to support the Maine Prescription Drug Affordability Board with strategic direction, government and stakeholder relations, research, writing and administrative work effective October 1, 2025.

GENERAL FUND	2025-26	2026-27
POSITIONS - LEGISLATIVE COUNT	1.000	1.000
Personal Services	$105,855	$147,099
All Other	$1,962	$2,019
GENERAL FUND TOTAL	$107,817	$149,118

See title page for effective date.

CHAPTER 531

S.P. 343 - L.D. 784

An Act to Create a Rebuttable Presumption Related to Specialized Risk Screening for First Responders

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

Sec. 1. 24-A MRSA §4301-A, sub-§5-B is enacted to read:

5-B. First responder. "First responder" means an employee or occasional employee of a state, county or municipal government entity or volunteer of a state, county or municipal government entity that provides or has the authority to provide fire, emergency medical, emergency communications, correctional or police services.

Sec. 2. 24-A MRSA §4301-A, sub-§19-A is enacted to read:

19-A. Specialized risk screening. "Specialized risk screening" means any of the following standard, medically accepted tests:

A. Tests for evidence of any cancer with a known employment-related risk of exposure for a first responder;

B. Blood tests, including tests conducted for a complete blood count, comprehensive metabolic panel, renal panel and hepatic panel;

C. Mammography, colonoscopy or prostate examinations regardless of the age of the person who is the subject of the examination;

D. Tests of any measure of serum activity of lipoprotein-associated phospholipase enzyme A2, oxidized low-density lipoprotein or additional indicators of endovascular inflammation; or

E. Tests to measure vitamin deficiencies, nutritional deficits and mineral levels.

Sec. 3. 24-A MRSA §4313, sub-§15 is enacted to read:

15. Rebuttable presumption. In a cause of action under this section or under Title 18-C, section 2-807 as permitted under subsection 14, there is a rebuttable presumption that a carrier has failed to exercise ordinary care when making an adverse health care treatment decision to deny coverage under a health plan for covered specialized risk screening for an enrollee who is a first responder and whose provider has determined the enrollee's receipt of specialized risk screening is medically appropriate and has meaningful potential for preventive clinical benefit to the enrollee.

Sec. 4. Application. This Act applies to an adverse health care treatment decision made by a carrier, as defined in the Maine Revised Statutes, Title 24-A, section 4301-A, subsection 3, on or after the effective date of this Act.

See title page for effective date.

CHAPTER 532

S.P. 372 - L.D. 839

An Act to Create the Net Energy Billing Cost Stabilization Fund

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

Sec. 1. 35-A MRSA §3209-F is enacted to read:

§3209-F. Net Energy Billing Cost Stabilization Fund

1. Fund established. There is established the Net Energy Billing Cost Stabilization Fund, referred to in this section as "the fund," as an account within the commission. The fund is a nonlapsing, revolving fund administered by the commission for the purpose of offsetting the costs to ratepayers associated with the net energy billing program under section 3209-A and section 3209-B.

2. Sources for fund. The commission may receive and deposit in the fund funds from the following sources:

A. Federal funds and awards that may be used for the purposes specified in this section;

B. Appropriations and transfers authorized by the Legislature; and

C. Any other funds from public or private sources received for the purposes of this section.

3. Use of funds. To the extent that funds are available, the commission shall use the fund exclusively to make payments to reimburse transmission and distribution utilities for any costs incurred as a result of the net energy billing program under section 3209-A and section 3209-B that would have otherwise been paid by ratepayers.

4. Rules. The commission may adopt rules to implement this section. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

5. Report. By February 1st of any year in which the commission has paid a reimbursement from the fund to a transmission and distribution utility in the prior calendar year, the commission shall provide a report to the joint standing committee of the Legislature having jurisdiction over electricity matters that includes the amount of the reimbursement paid in the prior calendar year, the source of any funds received by the fund in the prior calendar year and any other relevant information as determined by the commission. The committee may report out a bill related to the commission's report.

Sec. 2. Appropriations and allocations. The following appropriations and allocations are made.

PUBLIC UTILITIES COMMISSION

Net Energy Billing Cost Stabilization Fund N540

Initiative: Provides one-time funding for the purpose of making payments to transmission and distribution utilities that would have otherwise been paid by ratepayers.

GENERAL FUND	2025-26	2026-27
All Other	$500	$0
GENERAL FUND TOTAL	$500	$0

See title page for effective date.