

STATE OF MAINE 130th Legislature Second Regular Session



Disposition of bills and summaries of all laws enacted or finally passed

JOINT STANDING COMMITTEE ON HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

July 2022

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JOINT STANDING COMMITTEE ON HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

LD 1815 An Act To Revise Certain Financial Regulatory Provisions of the Maine Insurance Code To Be Consistent with Model Laws from the National Association of Insurance Commissioners

ENACTED LAW SUMMARY

Public Law 2021, chapter 521 amends the Maine Revised Statutes, Title 24-A, section 222 to enact the most recent revisions to the National Association of Insurance Commissioners Holding Company Model Act, which establish the group capital calculation and liquidity stress test framework and provide additional safeguards to ensure the performance of contracts between a domestic insurer and its noninsurer affiliates. The law also provides a uniform definition of "National Association of Insurance Commissioners" or "NAIC" throughout Title 24-A and a unified framework for controlling access to confidential information when the Department of Professional and Financial Regulation, Bureau of Insurance engages outside contractors.

Public Law 2021, chapter 521 was enacted as an emergency measure effective March 29, 2022.

LD 1822 An Act To Improve Access to Behavioral Health Services by Limiting Cost Sharing by Insurers

ENACTED LAW SUMMARY

Public Law 2021, chapter 638 does the following.

With respect to individual and small group health plans with an effective date on or after January 1, 2023, the law requires that, following the first visit provided without cost sharing, the copayment amount for a behavioral health office visit not be greater than the copayment amount for a primary care office visit and that any copayments for a primary care office visit and a behavioral health office visit count toward the deductible.

With respect to a group health plan other than a small group health plan with an effective date on or after January 1, 2023, the law requires that coverage be provided without cost sharing for the first primary care office visit and first behavioral health office visit in each plan year and that, following the first visit, the copayment amount for a behavioral health office visit not be greater than the copayment amount for a primary care office visit.

The law also requires carriers to demonstrate compliance with federal mental health parity laws and directs the Superintendent of Insurance to take certain actions, including examination and reporting requirements, related to enforcement of mental health parity laws. These requirements are repealed on April 30, 2028.

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