

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
132<sup>ND</sup> 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**

May 2026

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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. The law also clarifies that the rebuttable presumption applies if an enrollee files a wrongful death action instead of an action under the Maine Revised Statutes, Title 24-A, section 4313.

Public Law 2025, chapter 531 was finally enacted in both the House and the Senate prior to the adjournment sine die of the First Special Session in 2025 but was not signed by the Governor. Pursuant to the Constitution of Maine, Public Law 2025, chapter 530 became law without the Governor's signature on January 11, 2026.

**LD 961 An Act to Address Maine's Health Care Workforce Shortage and Improve Access to Care**

Public Law 2025, chapter 540 provides that, once rules are adopted by the State Board of Nursing to establish practice standards, a certified nurse practitioner who qualifies as an advanced practice registered nurse is no longer required to practice for at least 24 months under the supervision of a licensed physician or supervising nurse practitioner or be employed by a clinic or hospital that has a medical director who is a licensed physician. The law directs the board to establish practice standards by rule for a certified nurse practitioner related to the length of time a certified nurse practitioner must practice as an advanced practice registered nurse; the minimum amount of time a certified nurse practitioner must practice with a supervising nurse practitioner as a mentor; the practice setting for a certified nurse practitioner, including any requirements for employment by a clinic or hospital that has a supervising nurse practitioner within the clinic or hospital serving in a mentorship role to a certified nurse practitioner; and any other factors determined necessary by the board.

The law directs the board to submit the proposed practice standards for certified nurse practitioners to the Joint Standing Committee on Health Coverage, Insurance and Financial Services for review no later than March 15, 2026 and authorizes the committee to report out a bill to the Second Regular Session of the 132nd Legislature relating to the practice standards for certified nurse practitioners. The law prohibits the board from adopting rules relating to the practice standards for certified nurse practitioners before May 1, 2026.

Public Law 2025, chapter 540 was enacted as an emergency measure effective February 17, 2026.

**LD 1502 An Act to Update the Requirements for Health Insurance Coverage of Prostate Cancer Screening**

Under prior law, health insurance coverage was required for annual prostate cancer screening, if recommended by a physician, to men 50 years of age or older until attaining 72 years of age. Public Law 2025, chapter 712 updates the annual screening requirements for prostate cancer to require coverage of these services at any age, if recommended by a physician, when supported by

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medical and scientific evidence according to the most recently published nationally recognized clinical practice guideline.

The requirements apply to individual and group health insurance policies and health maintenance organization contracts issued or renewed on or after January 1, 2027.

**LD 1890 An Act to Facilitate the Development of Ambulatory Surgical Facilities by Increasing the Monetary Threshold for Certain Facilities Under the Requirement to Obtain a Certificate of Need and to Index the Threshold Annually Thereafter**

Under prior law, a new health care facility other than a nursing facility was required to obtain a certificate of need before it was established if it required a capital expenditure of more than \$3 million. Public Law 2025, chapter 599 increases that threshold amount to \$7.5 million and also requires that, beginning January 1, 2027 and annually thereafter, the Commissioner of Health and Human Services update the threshold amount for review to reflect the change in the United States Department of Labor, Bureau of Labor Statistics Consumer Price Index medical care services index, with an effective date of January 1st each year.

**LD 1901 An Act to Regulate Shared Appreciation Agreements Relating to Residential Property**

Public Law 2025, chapter 653 defines “shared appreciation mortgage loan” and imposes on such a loan similar requirements and limitations to those imposed on other mortgage loans issued in the State. The law requires the Department of Professional and Financial Regulation, Bureau of Consumer Credit Protection to report on compliance with these provisions to the 134th Legislature and authorizes the submission of legislation in response to the report.

Public Law 2025, chapter 653 also enacts into law the advisory ruling of the Superintendent of Consumer Credit Protection, which took effect October 29, 2025, stating that a shared appreciation mortgage loan is a “consumer credit transaction” and providers of these products are “supervised lenders” under the Maine Consumer Credit Code and provides that any shared appreciation mortgage loan entered into with a consumer that is secured by a dwelling or residential real estate in this State between October 29, 2025 and April 13, 2026 that does not comply with the provisions of that ruling is void and unenforceable.

Public Law 2025, chapter 653 was enacted as an emergency measure effective April 13, 2026.

**LD 1970 An Act to Amend the Laws Regarding Consent for HIV Testing and Disclosure of Related Medical Information for Insurance Purposes**

Public Law 2025, chapter 559 clarifies that an HIV test may be undertaken only with a patient's informed consent. The law also removes the requirement that a patient's authorization of disclosure of confidential HIV test results to a designated health care provider must be in writing