

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE
ONE HUNDRED AND FOURTEENTH LEGISLATURE
FIRST SPECIAL SESSION

August 21, 1989 to August 22, 1989

and

SECOND REGULAR SESSION

January 3, 1990 to April 14, 1990

THE GENERAL EFFECTIVE DATE FOR
NON-EMERGENCY LAWS IS
July 14, 1990

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

J.S. McCarthy Company
Augusta, Maine
1990

PUBLIC LAWS
OF THE
STATE OF MAINE

AS PASSED AT THE
SECOND REGULAR SESSION

of the
ONE HUNDRED AND FOURTEENTH LEGISLATURE

January 3, 1990 to April 14, 1990

1. Establishment. The State Employee Health Commission is established to serve as trustees of the group ~~accident and sickness~~ or health insurance plan in this subchapter and to advise the director of the state employee health insurance program on health insurance issues and the Director of the Bureau of State Employee Health on issues concerning employee health and wellness, the State Employee Assistance Program and the use of the State Employee Health Internal Service Fund Account, section 956.

Sec. 3. 5 MRSA §286, as repealed and replaced by PL 1987, c. 731, §7, is amended by adding at the end 2 new paragraphs to read:

A reserve fund, administered by the director of the state employees health insurance program with approval of the Commissioner of Administration, is created to protect the program from unexpected losses and self-insured losses and related expenses incurred in the provision of health and dental benefits for the eligible participants. The fund is a continuing fund and may not lapse. The Treasurer of State shall invest the fund. All proceeds of these investments accrue to the fund.

The reserve fund is capitalized by money from premium payments and by legislative appropriation, payments from state departments and agencies and by such other means as the Legislature may approve. All money in the fund is deemed to be the commingled assets of all the covered employees and must be used only for the purposes of this section.

See title page for effective date.

CHAPTER 777

H.P. 1521 - L.D. 2106

An Act to Authorize the Department of Human Services to Impose Civil Penalties on Vendors Who Violate the Requirements of the Women, Infants and Children Special Supplemental Food Program

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

22 MRSA §3107 is enacted to read:

§3107. Women, Infants and Children Special Supplemental Food Program vendor penalties

The department may assess a penalty against a vendor under the Women, Infants and Children Special Supplemental Food Program of the federal Child Nutrition Act of 1966 who the department determines, after an opportunity for a hearing in accordance with Title 5, chapter 375, subchapter IV, has violated the rules of the department that apply to that program. The amount of the penalty may not exceed the amount that may be

assessed against a vendor under the food stamp program pursuant to 7 Code of Federal Regulations, Section 278.6(f) and (g).

See title page for effective date.

CHAPTER 778

H.P. 1540 - L.D. 2125

An Act to Clarify the Laws Regarding Recovery of Medicaid Payments from Liable Third Parties

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

Sec. 1. 22 MRSA §14, sub-§1, as amended by PL 1981, c. 698, §92, is repealed and the following enacted in its place:

1. Recovery procedures. When benefits are provided or will be provided to a beneficiary under the Medicaid program administered by the department pursuant to the United States Social Security Act, Title XIX, for the medical costs of injury, disease, disability or similar occurrence for which a 3rd party is, or may be, liable, the commissioner shall have the right to recover from that party the reasonable value of the benefits provided. The Medicaid program is the payor of last resort and should provide medical coverage only when there are no other available resources. The Attorney General, or counsel for any fiscal intermediary with the permission of the Attorney General, may, to enforce this right, institute and prosecute legal proceedings against the 3rd party or, pursuant to this subsection, against the recipient, in the appropriate court, either in the name of the commissioner or in the name of the injured person, beneficiary, guardian, personal representative, estate or survivor.

If a recipient of medical assistance receives a settlement or award from a 3rd party, the settlement or award is subject to disbursement as provided in subsection 2-F.

The commissioner may compromise, or settle and execute a release of, any claim or waive any claim, in whole or in part, if the commissioner determines the collection will not be cost-effective.

In any case in which 3rd-party liability is found under this section, the commissioner shall be subrogated to the rights of the individual for whom medical assistance was made available.

Sec. 2. 22 MRSA §14, sub-§2-F, as enacted by PL 1987, c. 621, is amended to read:

2-F. Disbursement. No A disbursement of any award, judgment or settlement may not be made to a recipient without the recipient or the recipient's attorney first providing at least 10 days' written notice to the department of the award, judgment or settlement or obtaining from the department a release of any obligation