

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND FIFTEENTH LEGISLATURE

FIRST REGULAR SESSION

December 5, 1990 to July 10, 1991

Chapters 1 - 590

THE GENERAL EFFECTIVE DATE FOR
NON-EMERGENCY LAWS IS
OCTOBER 9, 1991

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
1991

PUBLIC LAWS
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the superintendent, except as to group subscriber and membership contracts; other than group Medicare supplement contracts as defined in Title 24-A, chapter 67 and group nursing home or long-term care contracts as defined in Title 24-A, chapter 68, every rate, rating formula and every modification of any of the foregoing ~~which~~ that it proposes to use. Every ~~such~~ filing ~~shall~~ under this subsection must state the effective date ~~thereof~~ of the filing. Every ~~such~~ filing ~~shall~~ under this subsection must be made not less than ~~60~~ 90 days in advance of the stated effective date unless ~~such~~ ~~60-day~~ the 90-day requirement is waived by the superintendent and the effective date may be suspended by the superintendent for a period of time not to exceed 30 days. In the case of nursing home and long-term contracts, rates filed prior to August 1, 1986, ~~shall be~~ are effective until no later than August 1, 1989. Rates filed on or after August 1, 1986, for these types of contracts ~~shall be~~ are effective for no more than 3 years, except that rates for contracts with guaranteed level premiums ~~shall be~~ are effective for the duration of the contract.

Sec. 2. 24 MRSA §2321, sub-§3 is enacted to read:

3. Three-year review. Every organization must submit the rate filings for contracts set forth in subsection 1 at least every 3 years.

Sec. 3. 24-A MRSA §5002, sub-§3 is enacted to read:

3. Open enrollment. All nonprofit hospital and medical service organizations that offer supplemental coverage to Medicare shall provide open enrollment for subscribers to Medicare supplemental coverage during the month of the subscriber's 65th birthday, for the 3 months preceding and the 3 months after the month of the birthday and during a one-month open enrollment period each calendar year, the month to be set by the nonprofit hospital and medical service organization. Nothing in this subsection precludes additional periods of open enrollment for subscribers to Medicare supplemental coverage.

See title page for effective date.

CHAPTER 49

H.P. 273 - L.D. 393

An Act to Prohibit Tie-in Sales in Insurance

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

24-A MRSA §2168-A is enacted to read:

§2168-A. Tie-in sales of insurance

1. Definition. As used in this section, "tie-in sales" means the practice of tying the sale of one product to another.

2. Prohibited tie-in sales. In the purchase of insurance, tie-in sales are an unfair trade practice when:

A. The consumer is required to place additional coverage with an insurer not of the consumer's choice in order to obtain a desired coverage; and

B. The consumer's alternative opportunities to purchase the desired coverage are severely limited or nonexistent.

3. Penalties. An insurance contract sold in violation of the provisions of this section is voidable at the option of the consumer. Violations of this section are enforceable through section 12-A.

See title page for effective date.

CHAPTER 50

H.P. 281 - L.D. 401

An Act to Increase the Availability of Funding for Health Care

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

Sec. 1. 22 MRSA §2052, as amended by PL 1979, c. 680, §2, is further amended to read:

§2052. Declaration of necessity

It is declared that for the benefit of the people of the State, the increase of their commerce, welfare and prosperity and the improvement of their health and living conditions, it is essential that hospitals, community mental health facilities and nursing homes within the State be provided with appropriate additional means to expand, enlarge and establish health care, hospital, community mental health, nursing home and other related facilities; that this and future generations of students be given the fullest opportunity to learn and to develop their intellectual capacities; and that it is the purpose of this chapter to provide a measure of assistance and an alternative method to enable hospitals, community mental health facilities, nursing homes and institutions for higher education in the State to provide the facilities and structures which are sorely needed to accomplish the purposes of this chapter, all to the public benefit and good, and the exercise of the powers, to the extent and manner provided in this chapter, is declared the exercise of an essential governmental function.

Sec. 2. 22 MRSA §2053, sub-§2, as amended by PL 1979, c. 680, §3, is further amended to read: