

# MAINE STATE LEGISLATURE

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**LAWS**  
**OF THE**  
**STATE OF MAINE**

AS PASSED BY THE

ONE HUNDRED AND FIFTEENTH LEGISLATURE

**SECOND SPECIAL SESSION**

December 12, 1991 to January 7, 1992

**SECOND REGULAR SESSION**

January 8, 1992 to March 31, 1992

THE GENERAL EFFECTIVE DATE FOR  
SECOND REGULAR SESSION  
NON-EMERGENCY LAWS IS  
JUNE 30, 1992

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

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J.S. McCarthy Company  
Augusta, Maine  
1992

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**PUBLIC LAWS**  
**OF THE**  
**STATE OF MAINE**

**AS PASSED AT THE**  
**SECOND REGULAR SESSION**

**of the**  
**ONE HUNDRED AND FIFTEENTH LEGISLATURE**

**1991**

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**§4682. Violations of constitutional rights; civil actions by aggrieved persons**

Whenever any person, whether or not acting under color of law, intentionally interferes by physical force or violence or the threat of physical force or violence or attempts to intentionally interfere by physical force or violence or the threat of physical force or violence with the exercise or enjoyment by any other person of rights secured by the United States Constitution or the laws of the United States or of rights secured by the Constitution of Maine or laws of the State, the person whose exercise or enjoyment of these rights has been interfered with, or attempted to be interfered with, may institute and prosecute in that person's own name and on that person's own behalf a civil action for legal or equitable relief.

**Sec. 3. 5 MRSA §§4684 and 4685** are enacted to read:

**§4684. Application includes interference by private parties**

For the purposes of this chapter and Title 17, section 2931, rights secured by the Constitution of the United States and the laws of the United States and by the Constitution of Maine and the laws of the State include rights that would be protected from interference by governmental actors regardless of whether the specific interference complained of is performed or attempted by private parties.

**§4685. Short title**

This chapter may be known and cited as the "Maine Civil Rights Act."

See title page for effective date.

**CHAPTER 822****H.P. 1617 - L.D. 2278****An Act to Require Group Insurance Companies to Notify Covered Employees of Nonpayment of Premiums by Employers**

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

**Sec. 1. 24 MRSA §2330, sub-§1**, as enacted by PL 1981, c. 606, §1, is amended to read:

**1. Conversion provision required.** A group hospital, medical or health care service contract issued for delivery in this State by a nonprofit hospital, medical or health service organization, other than a contract ~~which~~ that provides benefits for specific diseases or accidental

injuries only, ~~shall~~ must contain a provision that if the health coverage on an employee or member ceases because of termination of employment or termination of the contract or any portion thereof, and the person has been continuously insured for a period of at least 3 months under the group contract or under the group contract and any prior group contract or policy providing similar benefits ~~which~~ that it replaces, that person ~~shall be~~ is entitled to have issued to ~~him~~ that person by the nonprofit service corporation, without evidence of insurability, a nongroup health care contract or, at the option of the nonprofit service corporation, a group certificate, provided that application ~~shall be~~ is made and the first subscription charge paid to the nonprofit service corporation within ~~31~~ 90 days after that termination. At the option of the employee or member, the converted contract may cover the employee or member, the employee or member and ~~his~~ the dependents of the employee or member or the dependents of the employee or member; provided that, in the latter 2 cases, the dependents had been covered for a period of at least 3 months under the group contract, unless the dependent persons were not eligible for coverage until after the beginning of the 3-month period. The nonprofit service corporation ~~shall have~~ has the option to provide the required coverage upon conversion through either a group or nongroup health care contract, and may issue a separate converted contract to cover any dependent. A nonprofit service corporation ~~shall~~ may not be required to provide a conversion privilege if termination of coverage under the group contract occurred because the employee or member failed to pay any required contribution or if any discontinued group coverage is replaced by continuous and substantially similar group coverage within 31 days.

**Sec. 2. 24 MRSA §2330, sub-§1-A** is enacted to read:

**1-A. Notification of cancellation.** A nonprofit hospital, medical or health service organization must provide by first class mail notification of cancellation for nonpayment of subscription charges according to this section. The notice must include the date of cancellation of coverage and the time period for exercising contract conversion rights. Notification is not required when the nonprofit hospital, medical or service organization has received written notice from the group contract holder or subgroup sponsor that replacement coverage has been obtained.

A. Notice must be mailed to the group contract holder or subgroup sponsor;

B. At the time of notification under paragraph A, notice must be mailed to the certificate holder at:

(1) The last address provided by the subgroup sponsor or the group contract holder to the nonprofit hospital, medical or health service organization; or

(2) The office of the subgroup sponsor, if any, or the group contract holder; and

C. Notice must be mailed to the Bureau of Insurance and to the Bureau of Labor Standards.

**Sec. 3. 24-A MRSA §2809-A, sub-§1**, as enacted by PL 1981, c. 606, §2, is amended to read:

1. A group policy ~~which that~~ provides hospital, surgical or major medical expense insurance or any combination thereof, other than a policy ~~which that~~ provides benefits for specific diseases or accidental injuries only, ~~shall~~ must contain a provision that if the insurance on an employee or member ceases because of termination of employment or termination of the policy or any portion thereof, and the person has been continuously insured for a period of at least 3 months under the group policy or under the group policy and any prior group policy or contract providing similar benefits ~~which that~~ it replaces, that person ~~shall be~~ is entitled to have issued to ~~him~~ that person by the insurer, without evidence of insurability, an individual policy or, at the insurer's option, a group certificate of health insurance, provided that application ~~shall be~~ is made and the first premium paid to the insurer within ~~31~~ 90 days after that termination. At the option of the employee or member, the converted policy may cover the employee or member, the employee or member and ~~his~~ the employee or member's dependents or the dependents of the employee or member; provided that, in the latter 2 cases, the dependents have been covered for a period of at least 3 months under the group policy, unless the dependent persons were not eligible for coverage until after the beginning of the 3-month period. The insurer ~~shall have~~ has the option to provide the required coverage upon conversion through either a group or individual policy, and may issue a separate converted policy to cover any dependent. An insurer ~~shall~~ is not be required to provide a conversion privilege if termination of insurance under the group policy occurred because the employee or member failed to pay any required contribution or if any discontinued group coverage is replaced by continuous and substantially similar group coverage within 31 days.

**Sec. 4. 24-A MRSA §2809-A, sub-§1-A** is enacted to read:

**1-A. Notification of cancellation.** An insurer must provide by first class mail notification of cancellation for nonpayment of premium for hospital, surgical or major medical expense insurance according to this section. The notice must include the date of cancellation of coverage and the time period for exercising policy conversion rights. Notification is not required when the insurer has received written notice from the group policyholder that replacement coverage has been obtained.

A. Notice must be mailed to the group policyholder or subgroup sponsor.

B. At the time of notification under paragraph A, notice must be mailed to the certificate holder at:

(1) The last address provided by the subgroup sponsor or the group policyholder to the insurer; or

(2) The office of the subgroup sponsor, if any, or the group policyholder.

C. Notice must be mailed to the Bureau of Insurance and to the Bureau of Labor Standards.

**Sec. 5. Allocation.** The following funds are allocated from Other Special Revenue to carry out the purposes of this Act.

1992-93

**PROFESSIONAL AND FINANCIAL REGULATION, DEPARTMENT OF**

**Bureau of Insurance**

All Other \$1,400

Provides for the allocation of funds to revise rules on the conversion rights of group insurance members.

**Sec. 6. Effective date; application.** Sections 1 and 3 of this Act apply to all group certificates and group policies executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1993; all group certificates and group policies are deemed to be renewed no later than the next yearly anniversary of the policy contract date.

See title page for effective date, unless otherwise indicated.

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**CHAPTER 823**

**S.P. 900 - L.D. 2319**

**An Act Concerning Anatomical Gifts Under the Motor Vehicle Laws**

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

**Sec. 1. 22 MRSA §2906, sub-§2**, as enacted by PL 1969, c. 193, is amended to read:

**2. Revocation.** Any Except as provided in subsection 4, any document of gift which that has not been delivered to the donee may be revoked by the donor in the manner set out in subsection 1 or by destruction,