

# MAINE STATE LEGISLATURE

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

**AS PASSED BY THE**

**ONE HUNDRED AND TWENTY-SECOND LEGISLATURE**

**FIRST REGULAR SESSION**  
**December 1, 2004 to March 30, 2005**

**FIRST SPECIAL SESSION**  
**April 4, 2005 to June 18, 2005**

**THE GENERAL EFFECTIVE DATE FOR**  
**FIRST REGULAR SESSION**  
**NON-EMERGENCY LAWS IS**  
**JUNE 29, 2005**

**THE GENERAL EFFECTIVE DATE FOR**  
**FIRST SPECIAL SESSION**  
**NON-EMERGENCY LAWS IS**  
**SEPTEMBER 17, 2005**

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

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**Penmor Lithographers**  
**Lewiston, Maine**  
**2005**

**CHAPTER 125**

**H.P. 544 - L.D. 767**

**An Act To Improve the Affordability of Health Insurance**

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

**Sec. 1. 24-A MRSA §2752, sub-§3, ¶B,** as amended by PL 2001, c. 258, Pt. I, §1, is further amended to read:

B. The financial impact of mandating the benefit, including:

- (1) The extent to which the proposed insurance coverage would increase or decrease the cost of the treatment or service over the next 5 years;
- (2) The extent to which the proposed coverage might increase the appropriate or inappropriate use of the treatment or service over the next 5 years;
- (3) The extent to which the mandated treatment or service might serve as an alternative for more expensive or less expensive treatment or service;
- (4) The methods that will be instituted to manage the utilization and costs of the proposed mandate;
- (5) The extent to which the insurance coverage may affect the number and types of providers of the mandated treatment or service over the next 5 years;
- (6) The extent to which insurance coverage of the health care service or provider may be reasonably expected to increase or decrease the insurance premium and administrative expenses of policyholders;
- (7) The impact of indirect costs, which are costs other than premiums and administrative costs, on the question of the costs and benefits of coverage;
- (8) The impact of this coverage on the total cost of health care, including potential benefits and savings to insurers and employers because the proposed mandated treatment or service prevents disease or illness or leads to the early detection and treatment of disease or illness that is less costly than treatment or service for later stages of a disease or illness;

(9) The effects of mandating the benefit on the cost of health care, particularly the premium and administrative expenses and indirect costs, to employers and employees, including the financial impact on small employers, medium-sized employers and large employers; and

(10) The effect of the proposed mandate on cost-shifting between private and public payors of health care coverage and on the overall cost of the health care delivery system in this State;

In order to enable the committee to assess the financial impact of the benefit, the report must include a comparison of the rate of increase in the Consumer Price Index for medical care services to the rate of increase in the Consumer Price Index for the previous year and the current year as reported by the United States Department of Labor, Bureau of Labor Statistics;

See title page for effective date.

**CHAPTER 126**

**S.P. 398 - L.D. 1170**

**An Act To Exempt Fire Departments from Biweekly Pay Requirements for Volunteer Firefighters**

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

**Sec. 1. 26 MRSA §621-A, sub-§6** is enacted to read:

**6. Volunteer firefighters.** Notwithstanding subsection 1, a municipal fire department may make payments owed to a volunteer firefighter at regular intervals not to exceed 6 months. For purposes of this subsection, "municipal fire department" has the same meaning as in Title 30-A, section 3151, subsection 1 and "volunteer firefighter" has the same meaning as in Title 30-A, section 3151, subsection 4.

See title page for effective date.

**CHAPTER 127**

**H.P. 676 - L.D. 966**

**An Act To Conform the Insurance Information and Privacy Protection Act to Federal Privacy Rules**

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

**Sec. 1. 24-A MRSA §2215, sub-§1, ¶P**, as amended by PL 2001, c. 457, §21, is further amended to read:

P. To an affiliate whose only use of the information will be in connection with an audit of the regulated insurance entity or the marketing of a product or service of the affiliate, if the information disclosed for marketing purposes does not include health care information and if the affiliate agrees not to disclose the information for any other purpose or to unaffiliated persons; or

**Sec. 2. 24-A MRSA §2215, sub-§1, ¶Q**, as enacted by PL 2001, c. 457, §22, is amended to read:

Q. In order to protect the public health and welfare, to state governmental entities only insofar as necessary to enable those entities to perform their duties when reporting is required or authorized by law; or

**Sec. 3. 24-A MRSA §2215, sub-§1, ¶R** is enacted to read:

R. By a regulated insurance entity that is also a covered entity or is a business associate of a covered entity under the standards for privacy of individually identifiable health information, 45 Code of Federal Regulations, Parts 160 and 164 (2004), if the disclosure is made for purposes of treatment, payment or health care operations of the disclosing or receiving entity and is made in full compliance with the requirements of the standards for privacy of individually identifiable health information and any applicable business associate agreement.

See title page for effective date.

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## CHAPTER 128

H.P. 429 - L.D. 596

### An Act To Make Insurance Coverage Available for Medically Necessary Breast Reduction and Symptomatic Varicose Vein Surgery

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

**Sec. 1. 24 MRSA §2332-N** is enacted to read:

#### **§2332-N. Offer of coverage for breast reduction surgery and symptomatic varicose vein surgery**

All individual and group nonprofit hospital and medical services plan policies, contracts and certificates and all nonprofit health care plan policies, contracts and certificates must make available coverage for breast reduction surgery and symptomatic varicose vein surgery determined to be medically necessary health care as defined in Title 24-A, section 4301-A, subsection 10-A.

**Sec. 2. 24-A MRSA §2761** is enacted to read:

#### **§2761. Offer of coverage for breast reduction surgery and symptomatic varicose vein surgery**

All individual health insurance policies, contracts and certificates must make available coverage for breast reduction surgery and symptomatic varicose vein surgery determined to be medically necessary health care as defined in section 4301-A, subsection 10-A.

**Sec. 3. 24-A MRSA §2847-L** is enacted to read:

#### **§2847-L. Offer of coverage for breast reduction surgery and symptomatic varicose vein surgery**

All group health insurance policies, contracts and certificates must make available coverage for breast reduction surgery and symptomatic varicose vein surgery determined to be medically necessary health care as defined in section 4301-A, subsection 10-A.

**Sec. 4. 24-A MRSA §4252** is enacted to read:

#### **§4252. Offer of coverage for breast reduction surgery and symptomatic varicose vein surgery**

All health maintenance organization individual and group health insurance policies, contracts and certificates must make available coverage for breast reduction surgery and symptomatic varicose vein surgery determined to be medically necessary health care as defined in section 4301-A, subsection 10-A.

**Sec. 5. Application.** This Act applies to health insurance policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2006.

See title page for effective date.

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