

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SIXTH LEGISLATURE

FIRST REGULAR SESSION
December 5, 2012 to July 10, 2013

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
OCTOBER 9, 2013

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

Augusta, Maine
2013

5. Staff support. Designate an employee of the department to oversee the Maine Agricultural and Internship Training Program; ~~and.~~

Sec. 3. 7 MRSA §222, sub-§6, as enacted by PL 2001, c. 168, §3, is repealed.

Sec. 4. 7 MRSA §4213, as enacted by PL 1999, c. 530, §7 and amended by PL 2011, c. 657, Pt. W, §5, is repealed.

See title page for effective date.

**CHAPTER 30
S.P. 13 - L.D. 21**

An Act To Amend the Motor Vehicle Laws Governing Requisite Tire Size and Frame Height

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

Sec. 1. 29-A MRSA §1917, sub-§2, as amended by PL 2009, c. 251, §8, is further amended to read:

2. Safe tires required. A motor vehicle may not be operated on a public way unless it is equipped with tires in safe operating condition. A tire mounted on a motor vehicle is not considered to be in safe operating condition unless it meets the visual and tread depth requirements set forth in subsections 3 and 4, ~~the overall diameter of the properly mounted and inflated tire is within 2 inches of the range of sizes recommended by the manufacturer for the model vehicle and the vehicle is in compliance with the frame height requirements provided in section 1920.~~

Sec. 2. 29-A MRSA §1920, sub-§1, as amended by PL 2005, c. 276, §2, is further amended to read:

1. Minimum and maximum frame end heights. A motor vehicle may not be operated on a public way or receive a certificate of inspection with a frame end height of less than 10 inches or with the frame end height lower than the vehicle was originally manufactured if originally manufactured to be less than 10 inches. A motor vehicle may not be operated on a public way or receive a certificate of inspection with a maximum frame end height based on the manufacturer's gross vehicle weight rating that is greater than:

B. For a vehicle of 4,500 pounds and less, 24 inches in the front and 26 inches in the rear;

C. For a vehicle of 4,501 pounds to 7,500 pounds, 27 inches in the front and 29 inches in the rear; ~~and~~

D. For a vehicle of 7,501 pounds to 10,000 pounds, 28 inches in the front and 30 inches in the rear; ~~and~~

E. For a vehicle of 10,001 pounds to 11,500 pounds, 29 inches in the front and 31 inches in the rear.

Measurements must be taken from a level surface to the bottom of the frame end. For the purposes of this subsection, "frame end" means the point at which the frame rail terminates at the bumper assembly.

See title page for effective date.

**CHAPTER 31
S.P. 88 - L.D. 252**

An Act Regarding Registration and Correction of Death Information on Death Certificates

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

Sec. 1. 22 MRSA §2842, sub-§§3 and 4, as amended by PL 2009, c. 601, §25, are further amended to read:

3. Medical certificate by medical examiner or the Office of the Chief Medical Examiner. When a death occurs under circumstances that make it a medical examiner case as defined in section 3025, or when inquiry as to the cause of death is required by law, the medical examiner or the Office of the Chief Medical Examiner shall complete the medical certification of the cause of death as specified by department rule and sign the death certificate. A certification need not be completed before the remains are ready for release.

The medical examiner or the Office of the Chief Medical Examiner is responsible for the identity of the deceased and the time, date, place, cause, manner and circumstances of death on the death certificate. Entries may be left "pending" if further study is needed; or, at the specific direction of the Attorney General relative to cases under investigation by the Attorney General's office, entries must be left "withheld" until such time as the Attorney General, in the Attorney General's sole discretion, determines that any criminal investigation and prosecution will not be harmed by public disclosure of such information. Notwithstanding section 2706, subsection 4, unless directed otherwise by the Attorney General as specified in this subsection, this information for which the medical examiner is responsible may be made available to the general public by the Office of the Chief Medical Examiner.

4. Correction of errors on death statistic records filed under chapter 711. Certificates of death in medical examiner cases, as defined in section 3025, may be completed or amended at any time by means described in rule by the department to the Office of the Chief Medical Examiner. Either the Chief Medical Examiner or the medical examiner assigned to the case may sign the forms or submit an electronic amendment or file a certificate using the electronic death registration system in accordance with section 2847. A person authorized by the Chief Medical Examiner may amend a certificate of death with respect to the time, date, place and circumstances of death. The medical examiner assigned shall submit the form or electronic amendment to the Office of the Chief Medical Examiner for filing with the State Registrar of Vital Statistics. These forms or electronic amendments may be filed at any time after death and need not include a summary description of the evidence in support of the completion or amendment.

See title page for effective date.

**CHAPTER 32
S.P. 15 - L.D. 23**

**An Act To Lower the Cost of
Copies of Medical Records**

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

Sec. 1. 22 MRSA §1711, 5th ¶, as amended by PL 2003, c. 418, §1, is further amended to read:

Reasonable costs incurred by the hospital in making and providing copies of medical records and additions to medical records must be borne by the requesting person and the hospital may require payment prior to responding to the request. The charge for copies of records may not exceed ~~\$10~~ \$5 for the first page and 35¢ for each additional page.

Sec. 2. 22 MRSA §1711-A, as amended by PL 2003, c. 418, §2, is further amended to read:

§1711-A. Fees charged for records

Whenever a health care practitioner defined in section 1711-B furnishes requested copies of a patient's treatment record or a medical report or an addition to a treatment record or medical report to the patient or the patient's authorized representative, the charge for the copies or the report may not exceed the reasonable costs incurred by the health care practitioner in making and providing the copies or the report. The charge for copies of records may not exceed \$5 for the first page and 35¢ for each additional page.

See title page for effective date.

**CHAPTER 33
H.P. 159 - L.D. 198**

**An Act To Clarify Physicians'
Delegation of Medical Care**

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

Sec. 1. 32 MRSA §2594-A, first ¶, as amended by PL 1993, c. 600, Pt. A, §184, is further amended to read:

Nothing contained in this chapter may be construed to prohibit an individual from rendering medical services; if these services are rendered under the supervision and control of a physician; and if the individual has satisfactorily completed a training program approved by the Board of Osteopathic Licensure. Supervision and control may not be construed as requiring the personal presence of the supervising and controlling physician at the place where these services are rendered, unless a physical presence is necessary to provide patient care of the same quality as provided by the physician. Nothing in this chapter may be construed as prohibiting a physician from delegating to the physician's employees or support staff certain activities relating to medical care and treatment carried out by custom and usage when these activities are under the direct control of ~~and in the personal presence of~~ the physician. The physician delegating these activities to employees or support staff, to program graduates or to participants in an approved training program is legally liable for the activities of those individuals, and any individual in this relationship is considered the physician's agent. Nothing contained in this section may be construed to apply to registered nurses acting pursuant to chapter 31.

Sec. 2. 32 MRSA §3270-A, first ¶, as amended by PL 1999, c. 159, §1, is further amended to read:

This chapter may not be construed to prohibit an individual from rendering medical services if these services are rendered under the supervision and control of a physician or surgeon and if that individual has satisfactorily completed a training program approved by the Board of Licensure in Medicine and a competency examination determined by this board. Supervision and control may not be construed as requiring the personal presence of the supervising and controlling physician at the place where these services are rendered, unless a physical presence is necessary to provide patient care of the same quality as provided by the physician. This chapter may not be construed as prohibiting a physician or surgeon from delegating to the physician's or surgeon's employees or support staff certain activities relating to medical care and treatment carried out by custom and usage when the activities are under the control of the physician or surgeon ~~who~~