

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

Whereas, current law requires health insurance carriers to enroll individuals at any time in individual health plans not offered through the health insurance exchange; and

Whereas, this legislation would make enrollment periods under state law consistent with federal law related to individual health plans offered without regard to whether the health plans are purchased on the health insurance exchange; and

Whereas, if the law is not changed to be consistent with federal law, those health insurance carriers not offering coverage through the health insurance exchange are likely to experience adverse selection; and

Whereas, this legislation must be enacted before October 1, 2013, which is the date open enrollment for health insurance exchanges begins; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

Sec. 1. 24-A MRSA §2736-C, sub-§11 is enacted to read:

11. Open enrollment. Notwithstanding subsection 3, on or after January 1, 2014, a carrier may restrict enrollment in individual health plans to open enrollment periods and special enrollment periods consistent with requirements of the federal Affordable Care Act.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.

Effective June 15, 2013.

CHAPTER 272

S.P. 171 - L.D. 439

An Act To Improve Maine's Charter School Laws

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

Sec. 1. 20-A MRSA §2407, sub-§5, as enacted by PL 2011, c. 414, §5, is amended to read:

5. Approval; denial. No later than 90 days after the deadline set by the authorizer for the filing of an application applications, an authorizer shall ~~decide to approve or deny the~~ render a decision on each applica-

tion. The authorizer shall make and announce all charter ~~approval or denial~~ decisions in a meeting open to the public.

A. An approval decision may include, if appropriate, reasonable conditions that the applicant must meet before a charter contract may be executed.

B. If the authorizer denies an application, the authorizer shall clearly state, for public record, its reasons for denial. An applicant may subsequently reapply to that authorizer or apply to any other authorizer in the State.

C. Within 10 days of ~~taking action to approve or deny~~ rendering a decision on an application, the authorizer shall report to the commissioner the action it has taken. The authorizer shall provide a copy of the report to the applicant at the same time that the report is submitted to the commissioner.

D. The commissioner shall register the charters approved by all chartering authorities in chronological order by date of approval.

E. An approved application may not serve as a school's charter contract ~~nor may it be incorporated by reference into the charter contract.~~

F. A decision on an application must be conveyed in writing to the applicant. A decision may grant approval or conditional approval, ~~request resubmission~~ or reject the application and must include written reasons for the decisions.

Sec. 2. 20-A MRSA §2413, sub-§2, ¶A, as amended by PL 2011, c. 679, §2, is further amended to read:

A. For each public charter school student, the school administrative unit in which the student resides must forward the per-pupil allocation to the public charter school attended by the student as follows.

(1) The per-pupil allocation amount is the EPS per-pupil rate for the school administrative unit in which the student resides, as calculated pursuant to section 15676, based on the student's grade level and adjusted as appropriate for economic disadvantage and limited English proficiency pursuant to section 15675, subsections 1 and 2. Debt service and capital outlays may not be included in the calculation of these per-pupil allocations. The department shall adopt rules governing how to calculate these per-pupil allocations, including those for ~~career and technical education programs~~, targeted funds for assessment technology and kindergarten to grade 2 programs.

(2) For students attending public charter schools, the school administrative unit of residence shall forward the per-pupil allocations described in subparagraph (1) directly to the public charter school attended. These per-pupil allocations must be forwarded to each public charter school on a quarterly basis, as follows. For each fiscal year, allocations must be made in quarterly payments on September 1st, December 1st, March 1st and June 1st. The September payment and December payments must be based on the identity and number of students enrolled or anticipated to be enrolled in the public charter school at the opening of school for that school year, which. The number of students may not exceed the maximum enrollment approved in the charter contract for that year unless a waiver is obtained from the authorizer. In February of the school year, if the number of students is higher or lower than the number of students at the beginning of the school year, adjustments must be made in the June payment, with 50% of the annual per-pupil allocation added for additional students or subtracted if the total number of students is lower. The March and June payments must be based on the identity and number of students enrolled in the public charter school on February 1st.

(3) For transportation expenses, the average per-pupil expense in each school administrative unit of residence must be calculated and an amount equal to a proportion, up to but not more than 100%, of that per-pupil allocation amount must be forwarded to the public charter school attended on the same basis as the per-pupil allocations for operating funds. The percentage of that per-pupil expense must be determined by the authorizer of the public charter school and must be based on the cost of transportation services provided by the public charter school to the student.

(4) The department shall pay to the public charter school any additional allocation assigned to the public charter school for gifted and talented students pursuant to section 15681-A, subsection 5 in the year in which the allocation is assigned.

A school administrative unit is not required to send funds to a public charter school for a student enrolled in the public charter school's preschool or prekindergarten program if the school administrative unit of the student's residence does not offer that program to its own residents.

See title page for effective date.

CHAPTER 273

S.P. 404 - L.D. 1167

An Act Regarding the Maine Guaranteed Access Reinsurance Association

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

Sec. 1. 24-A MRSA §3953, sub-§1, as enacted by PL 2011, c. 90, Pt. B, §8, is amended to read:

1. Guaranteed access reinsurance mechanism established. The Maine Guaranteed Access Reinsurance Association is established as a nonprofit legal entity. As a condition of doing business in the State, an insurer that has issued or administered medical insurance within the previous 12 months or is actively marketing a medical insurance policy or medical insurance administrative services in this State must participate in the association. The Dirigo Health Program established in chapter 87 and any other state-sponsored health benefit program shall also participate in the association. Except as provided in section 3962, operations of the association are suspended and the association may not collect assessments as provided in section 3957, provide reinsurance for member insurers under section 3958 or provide reimbursement for member insurers under section 3961 as of the date on which a transitional reinsurance program established under the authority of Section 1341 of the federal Affordable Care Act commences operations in this State through the date the federal program ceases operations in this State.

Sec. 2. 24-A MRSA §3953, sub-§2, ¶A, as enacted by PL 2011, c. 90, Pt. B, §8, is amended to read:

A. The board consists of ~~44~~ 12 members appointed as described in this paragraph:

(1) ~~Six~~ Seven members appointed by the superintendent: 2 members chosen from the general public and who are not associated with the medical profession, a hospital ~~or~~ an insurer or a producer; 2 members who represent medical providers; one member who represents individual health insurance consumers who is not associated or formerly associated with the medical profession, a hospital, an insurer or a producer; one member who represents a statewide organization that represents small businesses; and one member who represents producers. A board member appointed by the superintendent may not be removed without cause; and

(2) Five members appointed by the member insurers, at least one of whom is a domestic