

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-SEVENTH LEGISLATURE

FIRST REGULAR SESSION
December 3, 2014 to July 16, 2015

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FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
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IN ACCORDANCE WITH THE MAINE REVISED STATUTES ANNOTATED,
TITLE 3, SECTION 163-A, SUBSECTION 4.

Augusta, Maine
2015

CHAPTER 226
S.P. 94 - L.D. 256

An Act To Allow Nonresident
College Students To Obtain
Hunting, Fishing and Trapping
Licenses at the Resident Fee
and with Resident Privileges

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

Sec. 1. 12 MRSA §10752, sub-§7 is enacted
to read:

7. Nonresident student enrolled in an institu-
tion of higher education. In accordance with this
subsection, a nonresident student is eligible for any
hunting, fishing, trapping or combination hunting and
fishing license or permit under this Part at the resident
fee and upon obtaining that license or permit has the
same privileges under this Part and rules adopted un-
der this Part as a resident holder of that license or
permit.

In order to obtain a hunting, fishing, trapping or com-
bination hunting and fishing license or permit under
this subsection, a person must demonstrate to the satis-
faction of the commissioner that the person is a non-
resident student and has been enrolled as a full-time
student in an institution of higher education for at least
one semester prior to applying for a license or permit
under this subsection. The commissioner shall stamp
or otherwise indicate on the license or permit issued to
the nonresident student that it has been issued to a
nonresident student. The license or permit remains
valid for one year from issuance unless otherwise sus-
pended or revoked.

For purposes of this subsection, "nonresident student"
means a nonresident who is 18 years of age or older
and under 24 years of age who is enrolled as a full-
time student in an institution of higher education. For
purposes of this subsection, "institution of higher edu-
cation" means an institution of higher education lo-
cated in this State that meets the requirements of and
conforms to the definitions contained in the federal
Higher Education Act of 1965, as amended, 20 United
States Code, Section 1001(a) and the regulations,
guidelines and procedures promulgated by the Secre-
tary of Education pursuant to that Act.

See title page for effective date.

CHAPTER 227
H.P. 246 - L.D. 359

An Act To Assist Persons with
Breast Cancer

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

Sec. 1. 24 MRSA §2320-C, sub-§1, as en-
acted by PL 1997, c. 408, §2 and affected by §8, is
amended to read:

1. Inpatient care. All individual and group non-
profit hospital and medical services plan contracts
providing coverage for medical and surgical benefits
must ensure that inpatient coverage with respect to the
treatment of breast cancer is provided for a period of
time determined by the attending physician, after pro-
viding notice to the patient regarding the coverage
required by this subsection and in consultation with
the patient, to be medically appropriate following a
mastectomy, a lumpectomy or a lymph node dissection
for the treatment of breast cancer.

Nothing in this subsection may be construed to require
the provision of inpatient coverage if the attending
physician and patient determine that a shorter period
of hospital stay is appropriate.

In implementing the requirements of this subsection,
an individual and group nonprofit hospital and medical
services plan contract may not modify the terms and
conditions of coverage based on the determination by
any enrollee to request less than the minimum cover-
age required under this subsection.

All individual and group nonprofit hospital and medi-
cal services plan contracts must provide written notice
to each enrollee under the contract regarding the cov-
erage required by this subsection. The notice must be
prominently positioned in any literature or correspon-
dence made available or distributed by the plan and
must be transmitted in the next mailing made by the
plan to the enrollee or as part of any yearly informa-
tion packet sent to the enrollee, whichever is earlier.
The notice must also be made available to any physi-
cian participating in the insurer's provider network.

Sec. 2. 24-A MRSA §2745-C, sub-§1, as en-
acted by PL 1997, c. 408, §4 and affected by §8, is
amended to read:

1. Inpatient care. All individual health policies
providing coverage for medical and surgical benefits,
except accidental injury, specified disease, hospital
indemnity, Medicare supplement, long-term care and
other limited benefit health insurance policies and con-
tracts, must ensure that inpatient coverage with respect
to the treatment of breast cancer is provided for a pe-
riod of time determined by the attending physician,
after providing notice to the patient regarding the cov-
erage required by this subsection and in consultation

with the patient, to be medically appropriate following a mastectomy, a lumpectomy or a lymph node dissection for the treatment of breast cancer.

Nothing in this subsection may be construed to require the provision of inpatient coverage if the attending physician and patient determine that a shorter period of hospital stay is appropriate.

In implementing the requirements of this subsection, an individual health policy may not modify the terms and conditions of coverage based on the determination by any enrollee to request less than the minimum coverage required under this subsection.

All individual health policies must provide written notice to each enrollee under the contract regarding the coverage required by this subsection. The notice must be prominently positioned in any literature or correspondence made available or distributed by the plan and must be transmitted in the next mailing made by the plan to the enrollee or as part of any yearly information packet sent to the enrollee, whichever is earlier. The notice must also be made available to any physician participating in the insurer's provider network.

Sec. 3. 24-A MRSA §2837-C, sub-§1, as enacted by PL 1997, c. 408, §6 and affected by §8, is amended to read:

1. Inpatient care. All group health policies providing coverage for medical and surgical benefits, except accidental injury, specified disease, hospital indemnity, Medicare supplement, long-term care and other limited benefit health insurance policies and contracts, must ensure that inpatient coverage with respect to the treatment of breast cancer is provided for a period of time determined by the attending physician, after providing notice to the patient regarding the coverage required by this subsection and in consultation with the patient, to be medically appropriate following a mastectomy, a lumpectomy or a lymph node dissection for the treatment of breast cancer.

Nothing in this subsection may be construed to require the provision of inpatient coverage if the attending physician and patient determine that a shorter period of hospital stay is appropriate.

In implementing the requirements of this subsection, a group health policy may not modify the terms and conditions of coverage based on the determination by any enrollee to request less than the minimum coverage required under this subsection.

All group health policies must provide written notice to each enrollee under the contract regarding the coverage required by this subsection. The notice must be prominently positioned in any literature or correspondence made available or distributed by the plan and must be transmitted in the next mailing made by the plan to the enrollee or as part of any yearly informa-

tion packet sent to the enrollee, whichever is earlier. The notice must also be made available to any physician participating in the insurer's provider network.

Sec. 4. 24-A MRSA §4237, sub-§1, as enacted by PL 1997, c. 408, §7 and affected by §8, is amended to read:

1. Inpatient care. All individual and group coverage subject to this chapter that provides coverage for medical and surgical benefits must ensure that inpatient coverage with respect to the treatment of breast cancer is provided for a period of time determined by the attending physician, after providing notice to the patient regarding the coverage required by this subsection and in consultation with the patient, to be medically appropriate following a mastectomy, a lumpectomy or a lymph node dissection for the treatment of breast cancer.

Nothing in this subsection may be construed to require the provision of inpatient coverage if the attending physician and patient determine that a shorter period of hospital stay is appropriate.

In implementing the requirements of this subsection, an individual or group coverage contract may not modify the terms and conditions of coverage based on the determination by any enrollee to request less than the minimum coverage required under this subsection.

All individual and group coverage subject to this subsection must provide written notice to each enrollee under the contract regarding the coverage required by this subsection. The notice must be prominently positioned in any literature or correspondence made available or distributed by the plan and must be transmitted in the next mailing made by the plan to the enrollee or as part of any yearly information packet sent to the enrollee, whichever is earlier. The notice must also be made available to any physician participating in the insurer's provider network.

Sec. 5. Application. The requirements of this Act apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2016. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

See title page for effective date.