

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from electronic originals
(may include minor formatting differences from printed original)

LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-EIGHTH LEGISLATURE

FIRST REGULAR SESSION
December 7, 2016 to August 2, 2017

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NON-EMERGENCY LAWS IS
NOVEMBER 1, 2017

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

Augusta, Maine
2017

CHAPTER 403-A**DIRECT PRIMARY CARE SERVICE AGREEMENTS****§1771. Direct primary care service agreements**

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Direct primary care service agreement" means a contractual agreement between a direct primary care provider and an individual patient, or the patient's legal representative, in which:

(1) The direct primary care provider agrees to provide primary care services to the individual patient for an agreed-to fee over an agreed-to period of time; and

(2) The direct primary care provider agrees not to bill 3rd parties on a fee-for-service or capitated basis for services already covered in the direct primary care service agreement.

B. "Direct primary care provider" means an individual who is a licensed physician or osteopathic physician or other advanced health care practitioner who is authorized to engage in independent medical practice in this State, who is qualified to provide primary care services and who chooses to practice direct primary care by entering into a direct primary care service agreement with patients. The term includes, but is not limited to, an individual primary care provider or a group of primary care providers.

C. "Primary care" means outpatient, nonspecialty health care services or the coordination of health care for the purpose of:

(1) Promoting or maintaining mental and physical health and wellness; and

(2) The diagnosis, treatment or management of acute or chronic conditions caused by disease, injury or illness.

2. Not insurance. A direct primary care service agreement is not an insurance policy and is not subject to regulation by the Department of Professional and Financial Regulation, Bureau of Insurance.

3. Ability to contract. A direct primary care service agreement is an agreement between the direct primary care provider and either an individual or the individual's representative, regardless of whether the periodic fee or other fees are paid by the individual, the individual's representative or a 3rd party.

4. Covered services. A direct primary care service agreement covers only the services specified in the agreement. Any goods or services that are not covered by the direct primary care service agreement may be billed separately.

5. Disclosure. A direct primary care service agreement must clearly state within the agreement that direct primary care services are not considered health insurance and do not meet requirements of any federal law mandating individuals to purchase health insurance and that the fees charged in the agreement may not be reimbursed or apply towards a deductible under a health insurance policy with an insurer.

6. Other care not prohibited. A primary care provider is considered a direct primary care provider only when the provider is engaged in a direct primary care service agreement with a patient or group of patients. A primary care provider is not prohibited from providing care to other patients under a separate agreement or contract with an insurer.

7. Other agreements not prohibited. This section does not prohibit a direct primary care provider from entering into:

A. An agreement with an insurer offering a policy specifically designed to supplement a direct primary care service agreement; or

B. A pilot program for direct primary care with a federal or state agency that provides health coverage.

See title page for effective date.

CHAPTER 113**S.P. 487 - L.D. 1409****An Act To Reduce Regulations for Small Nonalcoholic Beverage Producers**

Emergency preamble. **Whereas,** acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, this legislation removes a statutory barrier that currently prevents entrepreneurs from opening new nonalcoholic beverage manufacturing and bottling businesses in the State, which causes Maine to lose the economic benefit that these new businesses can provide; 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. 32 MRSA §1751, sub-§4-A is enacted to read:

4-A. Small beverage producer. "Small beverage producer" means a person or beverage plant that manufactures or bottles no more than 10,000 gallons of beverages a year.

Sec. 2. 32 MRSA §1852 is amended to read:

§1852. Plant requirements

Every beverage plant used for the preparation, manufacture and bottling of any beverage ~~shall must~~ be adequately lighted and ventilated and all floors ~~shall must~~ be constructed of cement, concrete or tile laid in cement or other material impervious to water, and ~~shall must~~ have sufficient pitch to ~~insure ensure~~ drainage; walls and ceilings ~~shall must~~ be varnished or painted in light color and kept clean; doors, windows and other openings of any room in which beverages or the ingredients of such beverages ~~shall be are~~ prepared ~~shall must~~ be screened. Wash basins, sinks and toilets ~~shall must~~ be provided for employees. ~~No A~~ toilet ~~shall may not~~ open directly into any room used for the preparation or bottling of any beverage. The syrup room ~~shall must~~ be separately enclosed, well ventilated and lighted, provided with sinks and taps for hot and cold water, thoroughly protected against vermin, flies, dirt and dust and so constructed as to be easily cleaned.

~~Every~~ Except for a small beverage producer, every beverage plant ~~shall must~~ be equipped with mechanical container-washing apparatus and machinery, and with mechanical and sanitary machines for bottling and for carbonating, if carbonated beverages are manufactured. A small beverage producer may wash and fill glass beverage containers by hand and carbonate beverages by hand if all other requirements of this section are met.

All machines, apparatus, vessels, fountains, tanks or other equipment, caps and ingredients used in the manufacture of beverages ~~shall must~~ be kept in a sanitary condition. No vessels or tanks ~~shall must~~ be used for syrup mixing or for storing such mixed syrup unless they are of glass or stainless steel, porcelain lined, block tin lined or made of some other suitable impervious material.

Beverage plants ~~shall must~~ be located in buildings so constructed that the bottling operation is performed in separate rooms, but such construction ~~shall must~~ allow for modern practices in the loading or unloading of trucks in the same rooms, and for modern practices in the use of conveyor systems or other means of mechanical handling.

Sec. 3. 32 MRSA §1854, as amended by PL 1977, c. 696, §242; PL 1979, c. 731, §19; and PL 2011, c. 657, Pt. W, §6, is further amended to read:

§1854. Cleaning of containers

All reusable glass containers used in the manufacture of beverages ~~shall must~~, before being filled or

refilled, be thoroughly cleaned and sanitized by washing ~~in an automatic washing machine~~ in a solution of not less than 3% caustic alkali; at a temperature not lower than 110° Fahrenheit to be followed by a rinsing in potable water. All other reusable and all single service containers ~~shall must~~ be cleaned and sanitized before being filled or refilled by suitable means approved by the Commissioner of Agriculture, Conservation and Forestry.

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

Effective June 1, 2017.

CHAPTER 114

H.P. 1001 - L.D. 1449

**An Act To Support Maine
Military Charities**

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

Sec. 1. 37-B MRSA §3, sub-§1, ¶D, as amended by PL 2015, c. 465, Pt. A, §1, is further amended to read:

D. Have the following powers and duties.

- (1) The Adjutant General shall administer the department subordinate only to the Governor.
- (2) The Adjutant General shall establish methods of administration consistent with the law necessary for the efficient operation of the department.
- (3) The Adjutant General may prepare a budget for the department.
- (4) The Adjutant General may transfer personnel from one bureau to another within the department.
- (5) The Adjutant General shall supervise the preparation of all state informational reports required by the federal military establishment.
- (6) The Adjutant General shall keep an accurate account of expenses incurred and, in accordance with Title 5, sections 43 to 46, make a full report to the Governor as to the condition of the military forces, and as to all business transactions of the Military Bureau, including detailed statements of expenditures for military purposes.
- (7) The Adjutant General is responsible for the custody, care and repair of all military property belonging to or issued to the State