LAWS

OF THE

STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND TWENTY-NINTH LEGISLATURE

FIRST SPECIAL SESSION
August 26, 2019

SECOND REGULAR SESSION
January 8, 2020 to March 17, 2020

THE GENERAL EFFECTIVE DATE FOR
FIRST SPECIAL SESSION
NON-EMERGENCY LAWS IS
NOVEMBER 25, 2019

THE GENERAL EFFECTIVE DATE FOR
SECOND REGULAR SESSION
NON-EMERGENCY LAWS IS
JUNE 16, 2020

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

Augusta, Maine
2020

products that are listed by the commission for sale in the State and that resells those spirits products to the bureau.

Sec. 11. 28-A MRSA §1355-A, sub-§2-B, ¶B, as enacted by PL 2017, c. 341, §1, is amended to read:

B. The licensee is in violation of section 707, subsection 2, ~~3~~ 3-A or ~~4~~ 5-A, if the violation existed in the same manner at the time the license was initially issued or at the time the license was renewed.

Sec. 12. 28-A MRSA §1363, as amended by PL 1997, c. 373, §118, is repealed.

See title page for effective date.

CHAPTER 666

H.P. 1493 - L.D. 2096

An Act To Save Lives by Capping the Out-of-pocket Cost of Certain Medications

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

Whereas, it is critically important that this legislation take effect before the expiration of the 90-day period; 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:

PART A

Sec. A-1. 24-A MRSA §4317-C is enacted to read:

§4317-C. Coverage for prescription insulin drugs; limit on out-of-pocket costs

1. Definition. As used in this section, "insulin" has the same meaning as in Title 32, section 13786-D, subsection 1, paragraph A.

2. Limit on out-of-pocket costs. A carrier that provides coverage for prescription insulin drugs may not impose any deductible, copayment, coinsurance or other cost-sharing requirement on an enrollee for that coverage that results in out-of-pocket costs to the enrollee that exceed $35 per prescription for a 30-day supply of covered prescription insulin drugs, regardless of the amount of insulin needed to fill the enrollee's insulin prescriptions.

3. Other cost sharing. This section does not prevent a carrier from setting an enrollee's cost-sharing requirement for one or more insulin drugs at an amount lower than the maximum amount specified in this section.

4. Rules. The superintendent may adopt rules to implement and administer this section to align with applicable federal requirements. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

Sec. A-2. Application. The requirements of this Part apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2021. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

PART B

Sec. B-1. 32 MRSA §13786-D is enacted to read:

§13786-D. Prescribing and dispensing insulin

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

A. "Insulin" includes various types of insulin analogs and insulin-like medications, regardless of activation period or whether the solution is mixed before or after dispensation.

B. "Insulin-related devices and supplies" means needles, syringes, cartridge systems, prefilled pen systems, glucose meters and test strips. "Insulin-related devices and supplies" does not include insulin pump devices.

2. Authorization. As authorized by the board in accordance with rules adopted under subsection 3, a pharmacist may dispense emergency refills of insulin and associated insulin-related devices and supplies by prescription drug order or standing order or pursuant to a collaborative practice agreement authorizing insulin to be dispensed. The insulin dispensed under this subsection must be in a quantity that is the lesser of a 30-day supply and the smallest available package. The intended recipient shall provide evidence of a previous prescription from a practitioner and attest that a refill of that previous prescription may not be readily or easily obtained under the circumstances.

3. Rules; protocols. The board by rule shall establish standards for authorizing pharmacists to dispense insulin in accordance with subsection 2, including adequate training requirements and protocols for dispensing insulin. Rules adopted under this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

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

Effective March 18, 2020.

CHAPTER 667

H.P. 1498 - L.D. 2103

An Act To Implement the Recommendations of the Right To Know Advisory Committee Regarding Public Records Exceptions

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

PART A

Sec. A-1. 1 MRSA §402, sub-§3, ¶C-1, as enacted by PL 2011, c. 264, §1, is amended to read:

C-1. Information contained in a communication between a constituent and an elected official if the information:

(1) Is of a personal nature, consisting of:

(a) An individual's medical information of any kind, including information pertaining to diagnosis or treatment of mental or emotional disorders;

(b) Credit or financial information;

(c) Information pertaining to the personal history, general character or conduct of the constituent or any member of the constituent's immediate family; or

(d) Complaints, charges of misconduct, replies to complaints or charges of misconduct or memoranda or other materials pertaining to disciplinary action; or

~~(e) An individual's social security number; or~~

(2) Would be confidential if it were in the possession of another public agency or official;

Sec. A-2. 1 MRSA §402, sub-§3, ¶K, as amended by PL 2003, c. 392, §1, is further amended to read:

K. Personally identifying information concerning minors that is obtained or maintained by a municipality in providing recreational or nonmandatory educational programs or services~~, if the municipality has enacted an ordinance that specifies the circumstances in which the information will be withheld from disclosure~~. This paragraph does not apply to records governed by Title 20-A, section 6001 and does not supersede Title 20-A, section 6001-A;

Sec. A-3. 1 MRSA §402, sub-§3, ¶M, as amended by PL 2011, c. 662, §2, is further amended to read:

M. Records or information describing the architecture, design, access authentication, encryption or security of information technology infrastructure, systems and software, including records or information maintained to ensure government operations and technology continuity and to facilitate disaster recovery. Records or information covered by this paragraph may be disclosed to the Legislature or, in the case of a political or administrative subdivision, to municipal officials or board members under conditions that protect the information from further disclosure;

Sec. A-4. 3 MRSA §997, sub-§1, as enacted by PL 2001, c. 702, §2, is amended to read:

1. Review and response. Prior to the presentation of a program evaluation under this chapter to the committee by the office, the director of the evaluated state agency or other entity must have an opportunity to review a draft of the program evaluation report. Within 15 calendar days of receipt of the draft report, the director of the evaluated state agency or other entity may provide to the office comments on the draft report. If provided to the office by the comment deadline, the comments must be included in the final report when it is presented to the committee. Failure by the director of an evaluated agency or other entity to submit its comments on the draft report by the comment deadline may not delay the submission of a report to the committee or its release to the public.

All documents, writings, drafts, electronic communications and information transmitted pursuant to this subsection are confidential and may not be released to the public ~~prior to the time the office issues its program evaluation report pursuant to subsection 3~~. A person violating the provisions of this subsection regarding confidentiality is guilty of a Class E crime.

Sec. A-5. 3 MRSA §997, sub-§3, as enacted by PL 2001, c. 702, §2, is amended to read:

3. Confidentiality. ~~The director shall issue program evaluation reports, favorable or unfavorable, of any state agency or other entity, and these reports are public records, except that, prior to the release of a program evaluation report pursuant to subsection 2 or the point at which a program evaluation is no longer being actively pursued, all papers, physical and electronic records and correspondence and other supporting materials comprising the working~~ Working papers in the possession of the director or ~~other entity charged with the preparation of a program evaluation report~~ an entity with which the director has contracted for the conduct of program evaluations pursuant to section 995, subsection 2 are confidential and exempt from disclosure pursuant to Title 1, chapter 13, including disclosure to the