

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 THIRTIETH LEGISLATURE

SECOND SPECIAL SESSION
September 29, 2021

SECOND REGULAR SESSION
January 5, 2022 to May 9, 2022

THE GENERAL EFFECTIVE DATE FOR
SECOND SPECIAL SESSION
NON-EMERGENCY LAWS IS
DECEMBER 29, 2021

THE GENERAL EFFECTIVE DATE FOR
SECOND REGULAR SESSION
NON-EMERGENCY LAWS IS
AUGUST 8, 2022

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

Augusta, Maine
2022

CHAPTER 517
H.P. 1045 - L.D. 1429

**An Act To Achieve Carbon
Neutrality in Maine by the
Year 2045**

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

Sec. 1. 38 MRSA §576-A, sub-§2-A is enacted to read:

2-A. Carbon neutrality. Beginning January 1, 2045, net annual greenhouse gas emissions may not exceed zero metric tons.

See title page for effective date.

CHAPTER 518
H.P. 1329 - L.D. 1778

**An Act To Improve Health
Care Affordability and
Increase Options for
Comprehensive Coverage for
Individuals and Small
Businesses in Maine**

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

Sec. 1. 5 MRSA §3122, sub-§3, as enacted by PL 2021, c. 459, §3, is amended by enacting a new first blocked paragraph to read:

Beginning in 2023, the office shall analyze barriers to affordable health care and coverage and develop for consideration by the legislative oversight committee proposals on potential methods to improve health care affordability and coverage for individuals and small businesses in the State.

Sec. 2. 5 MRSA §3124, as enacted by PL 2021, c. 459, §3, is amended to read:

§3124. Annual public hearing

Beginning in In 2022, the office shall convene an annual a public hearing on cost trends no later than October 1st. Beginning in 2023, the office shall convene an annual public hearing no later than October 1st on cost trends and barriers to health care affordability. The hearing must provide an opportunity for public comment on health care cost trends and, beginning in 2023, on barriers to health care affordability. The executive director shall preside over the hearing.

Sec. 3. Health care and coverage study. The Office of Affordable Health Care, established under the Maine Revised Statutes, Title 5, section 3122, shall study the effects of policies aimed at improving health

care affordability and coverage, including effects on the affordability of premiums and cost-sharing in the individual and small group health insurance markets, and the effects of the policies on enrollment in comprehensive health coverage. The office shall consider, but is not limited to considering:

1. Creating a public option health benefit plan;
2. Creating a Medicaid buy-in program;
3. Increasing enrollment in Medicaid and the federal Children's Health Insurance Program, including by increasing income eligibility levels;
4. Providing state-level subsidies to populations that do not qualify for federal subsidies through the Maine Health Insurance Marketplace, established under Title 22, section 5403; and
5. Other policies as identified by the office and the Advisory Council on Affordable Health Care, established in Title 5, section 12004-I, subsection 31-B.

The office shall provide a report of its findings to the joint standing committee of the Legislature having jurisdiction over health coverage and insurance matters no later than January 1, 2024.

See title page for effective date.

CHAPTER 519
S.P. 617 - L.D. 1781

**An Act To Align Postpartum
MaineCare Coverage with
Federal Law**

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

Sec. 1. 22 MRSA §3174-G, sub-§1, ¶A, as enacted by PL 1999, c. 731, Pt. OO, §1, is amended to read:

A. A qualified woman during her pregnancy and up to 60 days following delivery when the woman's family income is equal to or below ~~200%~~ 209% of the nonfarm income official poverty line;

Sec. 2. 22 MRSA §3174-G, sub-§1, ¶A-1, as enacted by PL 2021, c. 461, §1, is amended to read:

A-1. Notwithstanding paragraph A, beginning ~~January 1, 2022 and until June 30, 2022~~ August 1, 2022 and for as long as coverage is allowable by federal law, a qualified woman during her pregnancy and up to ~~6~~ 12 months following delivery when the woman's family income is equal to or below ~~200%~~ 209% of the nonfarm income official poverty line;

Sec. 3. 22 MRSA §3174-G, sub-§1, ¶A-2, as enacted by PL 2021, c. 461, §2, is repealed.

Sec. 4. 22 MRSA §3174-G, sub-§1, ¶A-3, as enacted by PL 2021, c. 461, §3, is repealed.

Sec. 5. 22 MRSA §3174-G, sub-§1, ¶G, as amended by PL 2021, c. 461, §4, is further amended to read:

G. A person otherwise eligible who is a noncitizen legally admitted to the United States to the extent that coverage is allowable by federal law if the person is:

- (1) A woman during her pregnancy and up to 60 days following delivery; or
- (2) A child under 21 years of age;

Sec. 6. 22 MRSA §3174-G, sub-§1, ¶G-1, as enacted by PL 2021, c. 461, §5, is amended to read:

G-1. Notwithstanding paragraph G, beginning ~~January 1, 2022 and until June 30, 2022~~ August 1, 2022, a person otherwise eligible who is a noncitizen legally admitted to the United States for as long as and to the extent that coverage is allowable by federal law if the person is:

- (1) A woman during her pregnancy and up to 6 ~~12~~ months following delivery; or
- (2) A child under 21 years of age; and

Sec. 7. 22 MRSA §3174-G, sub-§1, ¶G-2, as enacted by PL 2021, c. 461, §6, is repealed.

Sec. 8. 22 MRSA §3174-G, sub-§1, ¶G-3, as enacted by PL 2021, c. 461, §7, is repealed.

Sec. 9. PL 2021, c. 461, §8 is repealed.

Sec. 10. State plan amendment. The Department of Health and Human Services shall, no later than 30 days after the effective date of this section, submit requests for any state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services determined necessary in order to accomplish the purposes of this Act. The department shall take all reasonable and necessary steps to seek approval of the state plan amendment.

Sec. 11. Retroactivity. This Act applies retroactively to January 1, 2022.

See title page for effective date.

CHAPTER 520

H.P. 1339 - L.D. 1798

An Act To Ensure Health Insurance Coverage for Certain Adults with Disabilities

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

Sec. 1. 24-A MRSA §2742-B, sub-§2, as amended by PL 2019, c. 5, Pt. A, §8, is further amended to read:

2. Offer of coverage. Notwithstanding section 2703, subsection 3, an individual health insurance policy that offers coverage for a dependent child must offer such coverage, at the option of the policyholder, until the dependent child attains 26 years of age. If the dependent child has a disability, the policy must offer coverage in accordance with section 2742-C.

Sec. 2. 24-A MRSA §2742-C is enacted to read:

§2742-C. Mandatory offer of coverage for certain adults with disabilities

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

A. "Dependent child" has the same meaning as in section 2742-B, subsection 1.

B. "Disability" means a physical, mental, intellectual or developmental disability that renders a person incapable of self-sustaining employment.

2. Offer of coverage. An individual health insurance policy that offers coverage for a dependent child must offer such coverage, at the option of the policyholder, for a dependent child with a disability, regardless of age.

3. Proof of disability. A policyholder shall furnish proof of a dependent child's disability to the insurer within 31 days of the dependent child's attainment of the limiting age established in section 2742-B, subsection 2 and subsequently as may be required by the insurer, but the insurer may not require proof more frequently than annually after the 2-year period following the dependent child's attainment of the limiting age.

Sec. 3. 24-A MRSA §2833-B, sub-§2, as amended by PL 2019, c. 5, Pt. A, §13, is further amended to read:

2. Offer of coverage. Notwithstanding section 2822, a group health insurance policy that offers coverage for a dependent child must offer such coverage, at the option of the parent, until the dependent child attains 26 years of age. If the dependent child has a disability, the policy must offer coverage in accordance with section 2833-C.

Sec. 4. 24-A MRSA §2833-C is enacted to read:

§2833-C. Mandatory offer of coverage for certain adults with disabilities

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