

MAINE STATE LEGISLATURE

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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

replaced by c. 878, Pt. A, §82, is further amended to read:

14. Search for persons to serve. For diligently searching for persons on whom they are commanded to serve civil process when that party cannot be located at an address given to the sheriff or the deputy sheriff by the plaintiff or the plaintiff's attorney when commanding the service to be made, ~~\$10 \$40~~, plus ~~necessary travel mileage at at least the same rate per mile as provided under Title 5, section 8;~~ and

Sec. 8. 30-A MRSA §421, 3rd ¶, as amended by PL 1997, c. 8, §1, is further amended to read:

In addition to the fees charged for service, travel may be charged for each mile actually traveled at the same rate at which county government employees are reimbursed within that county, except that all travel initiated on behalf of a state government agency must be reimbursed ~~at at least the same rate per mile as provided under Title 5, section 8.~~

Sec. 9. 30-A MRSA §421, 4th ¶, as amended by PL 2005, c. 218, §5, is further amended to read:

The county commissioners of each county may require that the fees collected under subsections 1, 2, 3, 5, 7, 12 and 14 be increased by ~~\$5, except that the fee paid by any state agency or department may only be increased by \$1~~ \$25. The sheriff or deputy shall collect this additional amount and pay it to the county treasurer for the use and benefit of the county. The county commissioners may also require that the fees collected under subsections 1 to 14 be increased by an amount equal to the cost of social security and other withholding taxes on the fees payable under this section.

Sec. 10. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF

Child Support 0100

Initiative: Provides funding for an increase in the fees and travel reimbursement paid to sheriffs and their deputies for service of civil process documents.

GENERAL FUND	2021-22	2022-23
All Other	\$0	\$126,511
GENERAL FUND TOTAL	\$0	\$126,511

FEDERAL EXPENDITURES FUND	2021-22	2022-23
All Other	\$0	\$245,581

FEDERAL EXPENDITURES FUND TOTAL	\$0	\$245,581
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State-funded Foster Care/Adoption Assistance 0139

Initiative: Provides funding for an increase in the fees and travel reimbursement paid to sheriffs and their deputies for service of civil process documents.

GENERAL FUND	2021-22	2022-23
All Other	\$0	\$32,000
GENERAL FUND TOTAL	\$0	\$32,000

HEALTH AND HUMAN SERVICES, DEPARTMENT OF DEPARTMENT TOTALS

GENERAL FUND	\$0	\$158,511
FEDERAL	\$0	\$245,581
EXPENDITURES FUND		

DEPARTMENT TOTAL - ALL FUNDS	\$0	\$404,092
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JUDICIAL DEPARTMENT

Courts - Supreme, Superior and District 0063

Initiative: Provides funding for an increase in the fees and travel reimbursement paid to sheriffs and their deputies for service of civil process documents.

GENERAL FUND	2021-22	2022-23
All Other	\$0	\$35,194
GENERAL FUND TOTAL	\$0	\$35,194

JUDICIAL DEPARTMENT DEPARTMENT TOTALS

GENERAL FUND	\$0	\$35,194
DEPARTMENT TOTAL - ALL FUNDS	\$0	\$35,194

SECTION TOTALS

GENERAL FUND	\$0	\$193,705
FEDERAL	\$0	\$245,581
EXPENDITURES FUND		

SECTION TOTAL - ALL FUNDS	\$0	\$439,286
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See title page for effective date.

**CHAPTER 740
H.P. 718 - L.D. 972**

An Act To Establish the Rare Disease Advisory Council

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

Sec. 1. 5 MRSA §12004-I, sub-§48-A is enacted to read:

48-A.

Human Services: Rare Disease Advisory Council Expenses Only 22 MRSA §1700-B
Public Health

Sec. 2. 22 MRSA c. 277 is enacted to read:

CHAPTER 277
RARE DISEASES

§1700-B. Rare Disease Advisory Council

1. Advisory board established. The Rare Disease Advisory Council, as established in Title 5, section 12004-I, subsection 48-A and referred to in this section as "the council," advises the commissioner and provides information to the public on issues regarding rare diseases. As used in this section, unless the context otherwise indicates, "rare disease" means a condition or illness that affects fewer than 200,000 persons in the United States.

2. Membership. The council consists of 20 members appointed by the commissioner, or the commissioner's designee, as follows:

- A. Three physicians who practice in the area of cardiology, emergency care, neurology, oncology, orthopedics, pediatrics or primary care and provide care to persons with rare diseases;
- B. Two registered nurses who provide care to persons with rare diseases;
- C. Two administrators of hospitals that provide care to persons with rare diseases, or their designees;
- D. One representative of the department who provides education concerning rare diseases or the management of chronic conditions;
- E. One representative of the department who is responsible for epidemiology services;
- F. One representative of the department who is responsible for administering the MaineCare program;
- G. The Superintendent of Insurance within the Department of Professional and Financial Regulation, or the superintendent's designee;
- H. One person representing an insurer operating in the State;
- I. One person representing biopharmaceutical companies;
- J. One geneticist practicing in the State;
- K. One person representing an academic research institution in the State;
- L. Two persons over 18 years of age who have had or currently have a rare disease;

M. Two parents or guardians who each have a child with a rare disease; and

N. One representative of an organization dedicated to providing services to persons with rare diseases.

The council may, by affirmative vote of a majority of its members, request that the commissioner appoint to the council additional temporary members who have expertise on issues studied by the council. Such members serve for a period determined by the council.

3. Terms; quorum; meetings. Members serve for a term of 3 years and elect a chair from among the members. At the end of a term an outgoing member serves until a successor has been appointed. A member may serve multiple terms. The board shall meet at least once every 3 months to conduct business and to elect officers. A quorum is 11 members. The affirmative vote of a majority of the members present is necessary to decide any business brought before the board.

4. Staff support. The department shall provide such administrative support to the council as necessary to carry out the duties of the council.

5. Duties of council. The council shall:

- A. Receive and consider reports and input concerning rare diseases from the department and persons whose work relates to rare diseases, including community-based organizations, providers of health care and local and national organizations;
- B. Increase awareness of the burden caused by rare diseases in the State;
- C. Determine the effect of delayed or inappropriate treatment on the quality of life for persons with rare diseases and on the economy of this State;
- D. Identify and distribute publicly available educational resources to providers of health care in order to foster recognition of symptoms of and treatment for rare diseases among patients of those providers;
- E. Evaluate the systems for delivery of treatment for rare diseases in place in the State and develop recommendations to improve quality of life and to provide services and reimbursement for those services for persons with rare diseases;
- F. Convene public hearings and solicit comments from the public related to rare diseases;
- G. Establish a comprehensive plan for the management of rare diseases in the State, which must include recommendations for the department, the Department of Professional and Financial Regulation, Bureau of Insurance, public and private organizations and businesses and for potential sources of funding, and update the comprehensive plan as necessary;

H. Distribute and make available publicly accessible resources for the public on research, diagnosis, treatment and education about rare diseases; and

I. Compile an annual report, which must include, without limitation, a summary of the activities of the council and any recommendations of the council for legislation or other policies. The council shall:

(1) Post the report on a publicly accessible website maintained by the department; and

(2) Submit the report to the Governor, the commissioner and the Superintendent of Insurance within the Department of Professional and Financial Regulation and to the Executive Director of the Legislative Council for transmittal to the Legislature.

6. Authority to report out legislation. The joint standing committee of the Legislature having jurisdiction over health and human services matters may report out legislation related to the report required in subsection 5, paragraph I.

Sec. 3. Staggered terms. Notwithstanding the Maine Revised Statutes, Title 22, section 1700-B, subsection 3, the Commissioner of Health and Human Services, or the commissioner's designee, for the original appointments of members of the Rare Disease Advisory Council as established in Title 5, section 12004-I, subsection 48-A, shall designate the first 6 appointments for a one-year term, the 2nd 6 appointments for a 2-year term and the remaining 7 appointments for a 3-year term.

Sec. 4. Appropriations and allocations. The following appropriations and allocations are made.

**HEALTH AND HUMAN SERVICES,
DEPARTMENT OF**

**Maine Center for Disease Control and Prevention
0143**

Initiative: Provides funding for 0.5 Public Health Educator III position to coordinate all the duties associated with the Rare Disease Advisory Council.

GENERAL FUND	2021-22	2022-23
POSITIONS -	0.000	0.500
LEGISLATIVE COUNCIL		
Personal Services	\$0	\$58,166
All Other	\$0	\$6,354
GENERAL FUND TOTAL	\$0	\$64,520

See title page for effective date.

CHAPTER 741

H.P. 741 - L.D. 1003

**An Act To Improve Outcomes
for Persons with Limb Loss**

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

Sec. 1. 24-A MRSA §4315, sub-§2, as amended by PL 2003, c. 688, Pt. I, §1, is further amended to read:

2. Required coverage. A carrier shall provide coverage for prosthetic devices in all health plans that, at a minimum, equals, except as provided in subsection 8, the coverage and payment for prosthetic devices provided under federal laws and regulations for the aged and disabled pursuant to 42 United States Code, Sections 1395k, 1395l and 1395m and 42 Code of Federal Regulations, Sections 414.202, 414.210, 414.228 and 410.100. Covered benefits must be provided for ~~a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee.~~

A. A prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee; and

B. With respect to an enrollee under 18 years of age, in addition to coverage of a prosthetic device required by paragraph A, a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that meets the medical needs of the enrollee for recreational purposes, as applicable, to maximize the enrollee's ability to ambulate, run, bike and swim and to maximize upper limb function.

Sec. 2. 24-A MRSA §4315, sub-§6, as amended by PL 2009, c. 603, §1 and affected by §2, is further amended to read:

6. Exclusions. Coverage Except as provided in subsection 2, paragraph B for an enrollee under 18 years of age, coverage is not required pursuant to this section for a prosthetic device that is designed exclusively for an athletic purposes purpose.

Sec. 3. 24-A MRSA §4315, sub-§9 is enacted to read:

9. Report. No later than June 30, 2028, each carrier that issues a health plan subject to this section shall report to the superintendent on its experience pursuant to this section for plan years 2024, 2025, 2026 and 2027. The report must be in a form prescribed by the superintendent and must include the number of claims