

LAWS

OF THE

STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND THIRTY-FIRST LEGISLATURE

FIRST REGULAR SESSION December 7, 2022 to March 30, 2023

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

Augusta, Maine 2023

FIRST SPECIAL SESSION - 2023

1. Discrimination prohibited. Notwithstanding any provision of law to the contrary and except as provided in subsection 2, an insurer authorized to do business in this State may not:

A. Limit coverage or refuse to issue or renew coverage of an individual under any life insurance policy due to the fact that the individual has been issued a prescription for naloxone hydrochloride or another opioid overdose-reversing medication or has purchased naloxone hydrochloride or another opioid overdose-reversing medication in accordance with Title 22, section 2353;

B. Consider the fact that an individual has been issued a prescription for naloxone hydrochloride or another opioid overdose-reversing medication or has purchased naloxone hydrochloride or another opioid overdose-reversing medication in determining the premium rate for coverage of that individual under a life insurance policy; or

C. Otherwise discriminate in the offering, issuance, cancellation, amount of coverage, price or any other condition of a life insurance policy based solely and without any additional actuarial justification upon the fact that an individual has been issued a prescription for naloxone hydrochloride <u>or</u> <u>another opioid overdose-reversing medication</u> or has purchased naloxone hydrochloride <u>or another</u> <u>opioid overdose-reversing medication</u>.

An opioid overdose-reversing medication referenced in this subsection must be approved by the federal Food and Drug Administration.

2. Exception. An insurer may take an action described in subsection 1 with respect to an individual who has a demonstrated history of opioid use disorder.

Sec. 5. 32 MRSA §85, sub-§8, as enacted by PL 2021, c. 161, §4, is amended to read:

8. Naloxone hydrochloride <u>or another opioid</u> <u>overdose-reversing medication</u>. An emergency medical services person licensed under this chapter may dispense naloxone hydrochloride <u>or another opioid</u> <u>overdose-reversing medication</u> in accordance with Title 22, section 2353, subsection 2-A and the rules adopted and protocols developed for emergency medical services persons under this chapter. <u>An opioid overdosereversing medication referenced in this subsection must</u> be approved by the federal Food and Drug Administration.

Sec. 6. 32 MRSA §86, sub-§4, as enacted by PL 2021, c. 161, §5, is amended to read:

4. Naloxone hydrochloride <u>or another opioid</u> <u>overdose-reversing medication</u>. An ambulance service or a nontransporting emergency medical service licensed under this chapter may dispense naloxone hydrochloride or another opioid overdose-reversing med<u>ication</u> in accordance with Title 22, section 2353, subsection 2-A and the rules adopted and protocols developed for ambulance services and nontransporting emergency medical services under this chapter. <u>An opioid</u> <u>overdose-reversing medication referenced in this sub-</u> <u>section must be approved by the federal Food and Drug</u> <u>Administration.</u>

Sec. 7. 32 MRSA c. 117, sub-c. 11-A, headnote is amended to read:

SUBCHAPTER 11-A

PRESCRIBING AND DISPENSING OF NALOX-ONE HYDROCHLORIDE <u>AND OTHER OPIOID</u> <u>OVERDOSE-REVERSING MEDICATIONS</u>

Sec. 8. 32 MRSA §13815, sub-§2, as amended by PL 2017, c. 364, §7, is further amended to read:

2. Rules for prescribing and dispensing naloxone hydrochloride or another opioid overdosereversing medication. The board by rule shall establish standards for authorizing pharmacists to prescribe and dispense naloxone hydrochloride or another opioid overdose-reversing medication in accordance with Title 22, section 2353, subsection 2, paragraphs A-1 and C-1. The rules must establish adequate training requirements and protocols for prescribing and dispensing naloxone hydrochloride or another opioid overdose-reversing medication when there is no prescription drug order, standing order or collaborative practice agreement authorizing naloxone hydrochloride or another opioid overdose-reversing medication to be dispensed to the intended recipient. Rules adopted under this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. A pharmacist authorized by the board pursuant to this subsection to prescribe and dispense naloxone hydrochloride or another opioid overdose-reversing medication may prescribe and dispense naloxone hydrochloride or another opioid overdose-reversing medication in accordance with Title 22, section 2353, subsection 2, paragraphs A-1 and C-1. An opioid overdose-reversing medication referenced in this subsection must be approved by the federal Food and Drug Administration.

See title page for effective date.

CHAPTER 162

S.P. 51 - L.D. 84

An Act to Strengthen Thirdparty Liability Requirements for the MaineCare Program

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

Sec. 1. 22 MRSA §14, sub-§2-H, as amended by PL 2007, c. 240, Pt. JJJ, §§2 and 3 and c. 448, §8 and affected by §14, is further amended to read:

2-H. Honoring of assignments. The following provisions apply to claims for payment submitted by the department or a health care provider.

A. Whenever the department submits claims to a health insurer, as included in 42 United States Code, Section 1396a(a)(25)(I), including selfinsured plans, group health plans as defined in the federal Émployee Retirement Income Security Act of 1974, Section 607(1), service benefit plans, managed care organizations, pharmacy benefit managers or other parties that are, by statute, contract or agreement, legally responsible for payment of a claim for a health care item or service, on behalf of a current or former recipient under the MaineCare program for whom an assignment of rights has been received, or whose rights have been assigned by the operation of law, the health insurer doing business in the State or providing coverage to a resident of this State must respond to the department within 60 days and:

(1) Provide information, with respect to individuals who are eligible for or are provided medical assistance under <u>the</u> MaineCare <u>program</u>, upon the request of the State, to determine during what period the individual or the individual's spouse or dependents may be or may have been covered by a health insurer and the nature of the coverage that is or was provided by the health insurer, including the name, address and identifying number of the plan, in a manner prescribed by the United States Secretary of Health and Human Services;

(2) Accept the State's right of recovery and the assignment to the State of any right of an individual or other entity to payment from the party for an item or service for which payment has been made under the state plan <u>and, in the case of a responsible 3rd party that requires prior authorization for an item or service furnished to an individual eligible to receive medical assistance under the MaineCare program, accept authorization provided by the State that the item or service is covered under the MaineCare program for that individual, as if the authorization were the prior authorization made by the 3rd party for the item or service;</u>

(3) Respond to any inquiry by the State regarding a claim for payment for any health care item or service that is submitted not later than 3 years after the date of the provision of such health care item or service; and

(4) Agree not to deny a claim submitted by the State solely on the basis of the date of submission of the claim, the type or format of the claim form Θr_2 a failure to present proper documentation at the point-of-sale that is the basis

of the claim <u>or, in the case of a responsible 3rd</u> party, a failure to obtain a prior authorization for the item or service for which the claim is being submitted, if:

(a) The claim is submitted by the State within the 3-year period beginning on the date on which the item or service was furnished; and

(b) Any action by the State to enforce its rights with respect to such claim is commenced within 6 years of the State's submission of such claim.

C. A payment made as part of an assignment by a 3rd party to the MaineCare program or a contractor acting on behalf of the MaineCare program is considered final 2 years after the date of the payment and when final the payment is not subject to adjustment.

See title page for effective date.

CHAPTER 163

S.P. 290 - L.D. 732

An Act to Prohibit Off-trail Operation of a Snowmobile in an Area Closed to Off-trail Operation

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

Sec. 1. 12 MRSA §13106-A, sub-§27 is enacted to read:

Operating snowmobile in posted area. 27. person may not operate a snowmobile off a snowmobile trail identified by the Department of Agriculture, Conservation and Forestry, Bureau of Parks and Lands as having been funded by the Snowmobile Trail Fund pursuant to section 1893, subsection 3 if the trail is posted as being closed to off-trail snowmobile operation and the operator has not obtained the permission of the applicable landowner or landowner's representative. For purposes of this subsection, "posted" means containing signage that is reasonably likely to come to the attention of a person operating a snowmobile that indicates that off-trail snowmobiling is prohibited and that is placed by the landowner, the landowner's representative, a local snowmobile club trail master serving as the landowner's representative, a local snowmobile club representative or an employee of the Department of Inland Fisheries and Wildlife or the Department of Agriculture, Conservation and Forestry.

A. A person who violates this subsection commits a civil violation for which a fine of not less than \$100 and not more than \$500 may be adjudged.