

MAINE STATE LEGISLATURE

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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

FIRST SPECIAL SESSION
April 5, 2023 to July 26, 2023

THE GENERAL EFFECTIVE DATE FOR
FIRST REGULAR SESSION
NONEMERGENCY LAWS IS
JUNE 29, 2023

THE GENERAL EFFECTIVE DATE FOR
FIRST SPECIAL SESSION
NONEMERGENCY LAWS IS
OCTOBER 25, 2023

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

Augusta, Maine
2023

**CHAPTER 332
H.P. 792 - L.D. 1244**

An Act to Define Undisputed Health Insurance Claims

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

Sec. 1. 24-A MRSA §2436, sub-§2-A, as repealed and replaced by PL 2009, c. 613, §9, is amended to read:

2-A. For a claim submitted by a health care provider or health care facility with respect to a ~~health plan carrier~~ as defined in section 4301-A, subsection 7 ~~3~~, for purposes of this section, "~~undisputed claim~~" means a timely claim for payment of covered health care expenses ~~that is must be~~ submitted to a carrier in conformity with the ~~following~~ requirements for standardized claim forms set forth in section 2753.

~~A. The claim must be submitted on one of the following claims forms:~~

~~(1) For a health care facility claim submitted on paper, the standard claim form, using standards approved by a national uniform billing committee;~~

~~(2) For a health care provider claim submitted on paper, the standard claim form, using standards approved by a national uniform claim committee; and~~

~~(3) For health care facility and health care provider claims submitted electronically, an electronic form using standards approved by an accredited standards committee of the American National Standards Institute.~~

Sec. 2. 24-A MRSA §2436, sub-§2-B, as enacted by PL 2009, c. 613, §10, is amended to read:

2-B. If a claim does not conform to the requirements specified in ~~subsection~~ subsections 2-A and 2-C and payment is denied to a health care provider or health care facility by a carrier, the health care provider or health care facility may not request payment from the insured or beneficiary and shall attempt to rectify the deficiencies with the claim and resubmit the claim to the carrier.

Sec. 3. 24-A MRSA §2436, sub-§2-C is enacted to read:

2-C. For a claim submitted by a health care provider or health care facility with respect to a carrier as defined in section 4301-A, subsection 3, for purposes of this section, "undisputed claim" means a manually or electronically submitted claim from a health care provider or health care facility that:

A. Contains all the required data elements necessary for accurate adjudication without the need for additional information;

B. Is not materially deficient or improper, including lacking substantiating documentation required by the carrier; and

C. Has no particular or unusual circumstances requiring special treatment that prevent payment from being made by the carrier.

See title page for effective date.

**CHAPTER 333
H.P. 915 - L.D. 1419**

An Act to Inform Fair Minimum Rates of Wages and Benefits in Bids for Public Contracts Using State and Federal Data

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

Sec. 1. 26 MRSA §1308, sub-§1, as repealed and replaced by PL 2019, c. 545, §1, is amended to read:

1. Determination of wage and benefits rates.

The Bureau of Labor Standards shall investigate and determine the prevailing hourly wage and benefits rate paid in the construction industry in this State. To determine the prevailing hourly wage and benefits rate, the bureau shall:

A. Collect a set of data by conducting a survey of wages and benefits during the 2nd and 3rd week of July of each year; ~~and~~

B. Collect a 2nd set of data through certified payroll submissions on state construction of public works during the 2nd and 3rd week of July of each year from any state agency that contracts for the construction of public works; ~~and~~

C. Collect a 3rd set of data for the job classification under the federal Davis-Bacon Act.

Survey data collected pursuant to paragraph A and certified payroll data collected pursuant to paragraph B must be submitted to the bureau by the 2nd week of October.

The bureau shall use the ~~higher~~ highest wage and benefits information of the ~~2 3~~ data sets collected pursuant to paragraphs A ~~and~~ B ~~and~~ C to determine the prevailing hourly wage and benefits rate. The bureau may also use wage and benefits information received from construction trade associations in its determination of prevailing rates. In determining the prevailing rate, the bureau may ascertain and consider the applicable wage and benefits rates established by collective bargaining