

# MAINE STATE LEGISLATURE

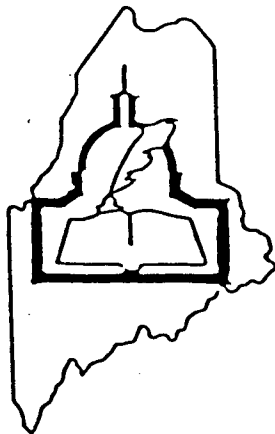
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STATE OF MAINE  
ONE HUNDRED AND TWELFTH LEGISLATURE  
SECOND REGULAR SESSION

JOINT STANDING COMMITTEE ON  
LABOR  
BILL SUMMARY



MAY 1986

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ONE HUNDRED AND TWELFTH LEGISLATURE  
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BILL SUMMARIES  
MAY 1986

This document is a compilation of the bill summaries prepared by this office for the Joint Standing Committees and Joint Select Committees of the Maine Legislature, covering the Second Regular Session of the 112th Legislature. The summaries are arranged by LD number under each committee.

All Amendments are listed, by paper number (e.g., H-584 or S-222), together with the sponsor if it is a floor amendment or the designation "CA" if it is a committee amendment. If the amendment was adopted in the House, the letter H appears after the sponsor. If it was adopted in the Senate, the letter S appears.

Final action for each bill is listed to the right of the title. If final House action and Senate action differ, both are listed.

Key to Committee Reports and Floor Action:

OTP	Ought to Pass
OTP-ND	Ought to Pass in New Draft
OTP-ND-NT	Ought to Pass in New Draft, New Title
OTP-AM	Ought to Pass as Amended
ONTP	Ought Not to Pass
LVWD	Leave to Withdraw
INDEF PP	Indefinitely Postponed

LD AN ACT TO REQUIRE EMPLOYERS TO NOTIFY EMPLOYEES NOT ENACTED  
2210 OF THE TERMINATION OR SUBSTANTIAL MODIFICATION SEE LD 2209  
OF GROUP INSURANCE

Sponsor: RUHLIN, Tuttle, Tammaro, Hale  
Committee Report: New Draft of LD 1953 (Minority Report)

SUMMARY: L.D. 2210 was the same as L.D. 2209 except that the references to substantial modifications of health benefit plans were retained. "Substantial modification" was also defined to include any change in the level of benefits under a health plan or a change in carriers.

LD AN ACT TO AMEND THE LAW RELATING TO PL 1985  
2273 GROUP HEALTH INSURANCE c. 684

Sponsor: BEAULIEU, Hale  
Committee Report: OTP-ND OF LD 2057, ONTP

SUMMARY: The original bill, L.D. 2057, gave employees whose group health insurance was terminated because of a layoff or a workers' compensation injury the option to continue as members of the employer's group health plan at their own expense and at group rates, or to convert to an individual policy. The employee had 31 days after the layoff or the filing of a workers' compensation claim in which to elect to continue group coverage. Once continued, this coverage could only be terminated for failure to pay premiums or if the employee became eligible for coverage under another health plan.

The new draft, L.D. 2273, ensured that the bill covered both Blue Cross/ Blue Shield programs as well as other health insurers. It limited the eligibility of employees to those who had been employees for at least 6 months and whose termination was due to a temporary layoff or a noncontroverted workers' compensation or occupational disease claim. It extended the period of time in which the employee could elect to come under this extended coverage to 31 days from the termination of insurance for employees who had been laid off, and 60 days from the termination of insurance for employees who suffered a workers' compensation injury. L.D. 2273 also established limits on the length of this extended coverage. For employees who were terminated because of a layoff or a work-related injury which rendered the employee partially-disabled, the group coverage could be extended for up to 6 months from the last day of work; for those employees rendered totally

disabled, the period was up to one year. When this extended coverage expires, the employees may still convert to an individual policy as provided under current law. It was also clarified that the bill did not prevent employees from bargaining for or receiving more coverage than required under the bill, nor were employers required to provide the group coverage option for longer than the 6-month or one-year periods.

LD            AN ACT TO AMEND THE WORKERS' COMPENSATION ACT            PL 1985  
2274        TO REQUIRE PREPAYMENT FOR MEDICAL AID AND TO            c. 729  
             MAKE CORRECTIONS RELATING TO FOREIGN EMPLOYEES

Sponsor: MARTIN, J.  
Committee Report: New draft of LD 2098

H-625    HA                                H            S  
S-466    SA                                H            S

SUMMARY: L.D. 2098 was so poorly drafted nobody could make any sense out of it.

L.D. 2274 had 2 major purposes. First, it made the payment of medical aids part of the early-pay system under the Workers' Compensation Act. Second, it enacted several provisions dealing with foreign workers. It created a presumption that for residents of a foreign country that has a socialized medical program, that program would pay for the medical expenses associated with the treatment of a work-related injury suffered in Maine. The insurer would be responsible only for reimbursing the socialized medical program for those expenses; it would not be directly liable to the health care provider who performed the services. It also allowed workers' compensation benefits to be cut off if, because of residency in a foreign country, the injured worker refused an offer of suitable work or refused to comply with the conditions of a rehabilitation program.

House Amendment "A" (H-625) clarified that the presumption of payment of an injured worker's medical costs applies only to the socialized medical programs of jurisdictions located outside the United States.

Senate Amendment "A" (S-466) deleted the portion of the bill which allowed a foreign employee's workers' compensation benefits to be cut off before a hearing and final decision on a petition for review under 39 MRSA §100.