MAINE STATE LEGISLATURE

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STATE OF MAINE

123rd Legislature First Regular Session



Summaries of bills and adopted amendments and laws enacted or finally passed during the First Regular Session of the 123rd Maine Legislature coming from the

JOINT STANDING COMMITTEE ON INSURANCE AND FINANCIAL SERVICES

July 2007

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STATE OF MAINE

123rd Legislature First Regular Session

LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS



This Legislative Digest of Bill Summaries and Enacted Laws summarizes all bills and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 123rd Maine Legislature, which was in session from December 6, 2006 to June 21, 2007.

The *Digest* is arranged alphabetically by committee, and within each committee by LD number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each bill title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. The appendices include a summary of relevant session statistics, an index of all bills by LD number and an index of enacted laws by law type and chapter number.

Final action on each bill is noted to the right of the bill title. The abbreviations used for various categories of final action are as follows:

CON RES XXX	Chapter # of Constitutional Resolution passed by both Houses
CONF CMTE UNABLE TO AGREE	
DIED BETWEEN BODIES	House & Senate disagree; bill died
	v accepts ONTP report; the other indefinitely postpones the bill
	Action incomplete when session ended; bill died
EMERGENCY	Enacted law takes effect sooner than 90 days
FAILED EMERGENCY ENACTMENT/FINA	IL PASSAGE Emergency bill failed to get 2/3 vote
FAILED ENACTMENT/FINAL PASSAGE	
	Bill imposing local mandate failed to get 2/3 vote
NOT PROPERLY BEFORE THE BODY	Ruled out of order by the presiding officers; bill died
INDEF PP	Bill Indefinitely Postponed
ONTP (or Accepted ONTP report)	Ought Not To Pass report acceptedCommittee report Ought To Pass In New Draft
OTP-ND	
P&S XXX	
PASSED	Joint Order passed in both bodies
PUBLIC XXX	
RESOLVE XXX	
UNSIGNED	Bill held by Governor
VETO SUSTAINED	Legislature failed to override Governor's Veto

Please note that the effective date for non-emergency legislation enacted in the First Regular Session is *September 20, 2007*. The effective date for legislation enacted as an emergency measure is specified in the enacted law summary for those bills.

Joint Standing Committee on Insurance and Financial Services

Part A of LD 1517 permits out-of-state health insurers, which are referred to as regional insurers in the bill, to offer their individual or group health plans for sale in this State if certain requirements of Maine law are met, including minimum capital and surplus and reserve, disclosure and reporting and grievance procedures. The bill defines the out-of-state health insurers as those insurers authorized to transact individual or group health insurance in one of the following states or jurisdictions: Connecticut, Massachusetts, New Hampshire, Rhode Island, Vermont, Delaware, Maryland, New Jersey, New York, Pennsylvania or the District of Columbia. It also permits Maine health insurers to offer individual health plans of out-of-state parent or subsidiary health insurers if similar requirements are met. If out-of-state health plans are offered for sale in this State, the bill requires that prospective enrollees be provided adequate disclosure of how the plans differ from Maine health plans in a format approved by the Superintendent of Insurance.

Part B of the bill repeals the statutory provisions governing the Capital Investment Fund and certificate of need. The bill takes effect January 1, 2008.

Committee Amendment "A" (S-261)

This amendment is the minority report of the committee. The amendment clarifies that the bill's provisions apply to the sale of individual and small group health plans. The amendment clarifies that the regional insurer must be domiciled and licensed to transact health insurance in the states listed in the bill. The amendment also clarifies the provision relating to the participation of a regional insurer in the guaranty association.

The amendment removes Part B of the bill, which proposed to repeal the statutory provisions governing the Capital Investment Fund and Certificate of Need.

Committee Amendment "A" was not adopted.

Lyme Disease

LD 1521 Resolve, To Provide Education Concerning and Insurance Coverage for

RESOLVE 143

Sponsor(s)	Committee Report	Amendments Adopted
BRYANT B	OTP-AM	S-349 MARTIN
		S-78

LD 1521 requires insurance polices to provide coverage for the treatment of Lyme disease. It also requires any employer whose employees are involved in activities that place them at high risk of exposure to Lyme disease to provide those employees with accurate information about Lyme disease before allowing them to engage in such activities. It directs the Maine Center for Disease Control Prevention to study the incidence of Lyme disease in this State, how many cases of Lyme disease are contracted by employees during the course of their employment, and the effects of the disease on the State.

Committee Amendment "A" (S-78)

This amendment replaces the bill, and changes it to a resolve. The amendment directs the Maine Center for Disease Control and Prevention to undertake public education efforts relating to the prevention, diagnosis and treatment of Lyme disease and other tick-borne illnesses. The amendment also requires the Joint Standing Committee on Insurance and Financial Services to review issues related to Lyme disease and other tick-borne illnesses and authorizes the committee to submit legislation to the Second Regular Session of the 123rd Legislature.

Senate Amendment "A" (S-349)

This amendment removes the requirement in Committee Amendment "A" that the Joint Standing Committee on Insurance and Financial Services review issues regarding Lyme disease.

Enacted Law Summary

Joint Standing Committee on Insurance and Financial Services

Resolve 2007, chapter 143 directs the Maine Center for Disease Control and Prevention to undertake public education efforts relating to the prevention, diagnosis and treatment of Lyme disease and other tick-borne illnesses.

LD 1539 An Act To Implement a Single-Payor Health Care System

ONTP

Sponsor(s)	Committee Report	Amendments Adopted
WALCOTT	ONTP	

LD 1539 is a concept draft pursuant to Joint Rule 208. This bill proposes to establish a single-payor health care system.

A related bill, LD 1072, An Act to Establish a Single-payor Health Care System, has been carried over to any special or regular session of the Legislature. See LD 1072.

LD 1568 Resolve, To Explore the Feasibility of Enrolling the Legislature as an Employer Group in Dirigo Health

RESOLVE 112

Sponsor(s)	<u>Committee Report</u>	Amendments Adopted
MILLER	OTP-AM MAJ ONTP MIN	Н-513

LD 1568 directs the State Employee Health Commission to evaluate the feasibility of the Legislature's being an employer group in the Dirigo Health Program and what effect that would have on retirees who are Legislators.

Committee Amendment "A" (H-513)

This amendment requires that the State Employee Health Commission consult with Dirigo Health in evaluating and issuing a report on the feasibility of enrolling the Legislature as an employer group in the Dirigo Health Program. The amendment clarifies that legislative employees are not included. The amendment also clarifies that the Joint Standing Committee on Insurance and Financial Services may submit a bill to the Second Regular Session of the 123rd Legislature.

Enacted Law Summary

Resolve 2007, chapter 112 directs the State Employee Health Commission, in consultation with Dirigo Health, to evaluate the feasibility of enrolling the Legislature as an employer group in the Dirigo Health Program.

LD 1592 An Act To Protect Small Businesses and Individual Health Insurance Consumers

ONTP

Sponsor(s)	Committee Report	Amendments Adopted
BRAUTIGAM	ONTP	

LD 1592 is a concept draft pursuant to Joint Rule 208. The bill proposes to require health insurance carriers, over a 2-year period, to merge their insurance group markets for purposes of rate filings and to offer standardized health insurance plans. The first year, the carriers would be required to merge their small group and individual markets; the second year, carriers would be required to merge their large group markets. The bill would require the Department of Professional and Financial Regulation, Bureau of Insurance to ensure that surplus and profits are shared across the combined pool. Existing requirements for basic and standard health insurance plans would continue to apply to the merged market.