

# MAINE STATE LEGISLATURE

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**STATE OF MAINE**  
127<sup>TH</sup> LEGISLATURE  
FIRST REGULAR SESSION



Summaries of bills, adopted amendments and laws enacted or finally passed

**JOINT STANDING COMMITTEE ON INSURANCE AND  
FINANCIAL SERVICES**

August 2015

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# STATE OF MAINE

127<sup>TH</sup> LEGISLATURE

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## LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contains summaries of all LDs and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 127<sup>th</sup> Maine Legislature.

The *Digest* is arranged alphabetically by committee and within each committee by Legislative Document (LD) number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each LD title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. An appendix provides a summary of relevant session statistics.

Final action on each LD is noted to the right of the LD title. The following describes the various final actions.

<i>CARRIED OVER</i> .....	<i>carried over to a subsequent session of the Legislature</i>
<i>CON RES XXX</i> .....	<i>chapter # of constitutional resolution passed by both houses</i>
<i>CONF CMTE UNABLE TO AGREE</i> .....	<i>Committee of Conference unable to agree; legislation died</i>
<i>DIED BETWEEN HOUSES</i> .....	<i>House &amp; Senate disagreed; legislation died</i>
<i>DIED IN CONCURRENCE</i> .....	<i>defeated in each house, but on different motions; legislation died</i>
<i>DIED ON ADJOURNMENT</i> .....	<i>action incomplete when session ended; legislation died</i>
<i>EMERGENCY</i> .....	<i>enacted law takes effect sooner than 90 days after session adjournment</i>
<i>FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE</i> .....	<i>emergency failed to receive required 2/3 vote</i>
<i>FAILED, ENACTMENT or FINAL PASSAGE</i> .....	<i>failed to receive final majority vote</i>
<i>FAILED, MANDATE ENACTMENT</i> .....	<i>legislation proposing local mandate failed required 2/3 vote</i>
<i>HELD BY GOVERNOR</i> .....	<i>Governor has not signed; final disposition to be determined at subsequent session</i>
<i>LEAVE TO WITHDRAW</i> .....	<i>sponsor's request to withdraw legislation granted</i>
<i>NOT PROPERLY BEFORE THE BODY</i> .....	<i>ruled out of order by the presiding officer; legislation died</i>
<i>INDEF PP</i> .....	<i>indefinitely postponed; legislation died</i>
<i>ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X</i> ....	<i>ought-not-to-pass report accepted; legislation died</i>
<i>P&amp;S XXX</i> .....	<i>chapter # of enacted private &amp; special law</i>
<i>PUBLIC XXX</i> .....	<i>chapter # of enacted public law</i>
<i>RESOLVE XXX</i> .....	<i>chapter # of finally passed resolve</i>
<i>VETO SUSTAINED</i> .....	<i>Legislature failed to override Governor's veto</i>

The effective date for non-emergency legislation enacted in the First Regular Session of the 127<sup>th</sup> Legislature is October 15, 2015. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

*Joint Standing Committee on Insurance and Financial Services*

**LD 863      An Act To Update Professional Liability Insurance Reporting to the  
Bureau of Insurance**

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WHITTEMORE FARRIN	ONTP	

This bill makes changes to the laws governing liability claims reports under the Maine Health Security Act. The bill continues the requirement that reports of disposition of claims against a health care provider must be forwarded by the Bureau of Insurance to the department or board that regulates the health care provider, but removes the requirement that reports of claims against a health care provider must be forwarded to the department or board that regulates the health care provider.

**LD 865      An Act To Protect Vision Care Patients and Providers**

PUBLIC 171

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
WHITTEMORE FREDETTE	OTP-AM	S-114

This bill establishes standards relating to agreements between an insurer and a vision care provider related to insurance coverage for vision care.

**Committee Amendment "A" (S-114)**

This amendment replaces the bill. The amendment prohibits a carrier, as defined in the Maine Revised Statutes, Title 24-A, section 4301-A, subsection 3, or a subsidiary or subcontractor of a carrier from engaging in the following practices with regard to agreements with eye care providers:

1. Requiring that the eye care provider provide services or materials to an enrollee in a health plan that provides coverage for vision care or eye care services or a limited benefit vision insurance plan at a specified or limited fee unless the services or materials are a covered service or a covered material under the health plan or limited benefit vision insurance plan;
2. Restricting or limiting the eye care provider's choice of sources and suppliers of services or materials provided by the eye care provider to an enrollee or the optical laboratories used by the eye care provider;
3. Changing any term, contractual discount or reimbursement rate without notice to the eye care provider at least 60 days before the change is implemented;
4. Requiring that the eye care provider participate in other vision insurance as a condition of joining an insurer's provider network for a health plan that provides coverage for vision care or eye care services or a limited benefit vision insurance plan; or
5. Entering into any agreement that is longer than two years.

The amendment stipulates that the provisions apply to contracts between an eye care provider and a carrier or a subsidiary or subcontractor of a carrier executed or renewed on or after January 1, 2016.

**Enacted Law Summary**

Public Law 2015, chapter 171 prohibits a carrier, as defined in the Maine Revised Statutes, Title 24-A, section

*Joint Standing Committee on Insurance and Financial Services*

4301-A, subsection 3, or a subsidiary or subcontractor of a carrier from engaging in the following practices with regard to agreements with eye care providers:

1. Requiring that the eye care provider provide services or materials to an enrollee in a health plan that provides coverage for vision care or eye care services or a limited benefit vision insurance plan at a specified or limited fee unless the services or materials are a covered service or a covered material under the health plan or limited benefit vision insurance plan;
2. Restricting or limiting the eye care provider's choice of sources and suppliers of services or materials provided by the eye care provider to an enrollee or the optical laboratories used by the eye care provider;
3. Changing any term, contractual discount or reimbursement rate without notice to the eye care provider at least 60 days before the change is implemented;
4. Requiring that the eye care provider participate in other vision insurance as a condition of joining an insurer's provider network for a health plan that provides coverage for vision care or eye care services or a limited benefit vision insurance plan; or
5. Entering into any agreement that is longer than two years.

Public Law 2015, chapter 171 stipulates that the provisions apply to contracts between an eye care provider and a carrier or a subsidiary or subcontractor of a carrier executed or renewed on or after January 1, 2016.

**LD 889      An Act To Protect Maine's Small Businesses from High Interest Rates on Commercial and Business Loans      CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BECK KATZ		

This bill caps the interest rate for commercial or business loans at 25 percent per year. The bill provides that violations are subject to criminal penalties of up to \$5,000 or imprisonment for not more than one year or both. The bill also allows a court to void a loan issued in violation of the interest rate caps upon the petition of the person to whom the loan was issued.

This bill was carried over to any special or regular session of the 127th Legislature by joint order, H.P. 992.

**LD 919      An Act To Provide Access to Opioid Analgesics with Abuse-deterrent Properties      PUBLIC 371**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HOBBS	OTP-AM	H-159

This bill requires all health insurance carriers offering individual and group health plans to provide coverage for abuse-deterrent opioid analgesic drug products as preferred drugs on any formulary, preferred drug list or other list of drugs used by the carrier. The bill applies to all policies and contracts issued or renewed on or after January 1, 2016.

**Committee Amendment "A" (H-159)**

This amendment requires all health insurance carriers offering individual and group health plans to provide