

# STATE OF MAINE $129^{\text{TH}}$ Legislature First Regular Session



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

## JOINT STANDING COMMITTEE ON HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

August 2019

MEMBERS:

SEN. HEATHER B. SANBORN, CHAIR SEN. GEOFFREY M. GRATWICK SEN. ROBERT A. FOLEY

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## **STATE OF MAINE**

 $129^{\text{TH}} LEGISLATURE$ FIRST REGULAR SESSION



### 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 129<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.

CARRIED OVER	arried over to a subsequent session of the Legislature
CON RES XXX	
CONF CMTE UNABLE TO AGREE	$\pi$ of constitutional resolution passed by both noises
DIED BETWEEN HOUSES	
DIED IN CONCURRENCE defeated in a	
DIED ON ADJOURNMENT ac	tion incomplete when session ended; legislation died
EMERGENCYenacted law takes	effect sooner than 90 days after session adjournment
FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE.	emergency failed to receive required 2/3 vote
FAILED, ENACTMENT or FINAL PASSAGE	failed to receive final majority vote
FAILED, MANDATE ENACTMENTlegislat	ion proposing local mandate failed required 2/3 vote
HELD BY GOVERNOR Governor has not signed; fin	al disposition to be determined at subsequent session
LEAVE TO WITHDRAW	sponsor's request to withdraw legislation granted
NOT PROPERLY BEFORE THE BODYruled	out of order by the presiding officer; legislation died
INDEF PP	indefinitely postponed; legislation died
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X.	ought-not-to-pass report accepted; legislation died
P&S XXX	
PUBLIC XXX	
RESOLVE XXX	
VETO SUSTAINED	
	Le gisidiare juilea io overnue Oovernor s velo

The effective date for non-emergency legislation enacted in the First Regular Session of the 129<sup>th</sup> Legislature is Thursday, September 19, 2019. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

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following areas: skills assessment and evaluation; counselor development; management and administration; and professional responsibility; and

3. Has completed 1000 hours of practice in alcohol and drug counseling under the person's qualifying license or has work experience in treating co-occurring mental health and substance use disorders and at least three years of experience supervising clinicians in treatment programs for individuals with co-occurring mental health and substance use disorders.

The law also authorizes individuals already licensed as alcohol and drug counselors to become certified clinical supervisors. For those individuals, the law provides that the minimum qualifications for licensing are 24 hours of training in clinical supervision with at least 6 hours of training in each of the following areas: skills assessment and evaluation; counselor development; management and administration; and professional responsibility.

#### LD 242 An Act To Amend the Laws Governing Multiple-party Accounts with Financial Institutions

PUBLIC 1 EMERGENCY

Sponsor(s)	Committee Report	Amendments Adopted
SANBORN H	OTP	

This bill suspends until July 1, 2019 the requirement that at the time a multiple-party account is established or at the time a single-party account is converted to a multiple-party account with a financial institution, the document establishing the account or adding another party include for each party to the account a question regarding whether that party intends for the sum remaining upon that party's death to belong to the surviving party or parties.

#### **Enacted Law Summary**

Public Law 2019, chapter 1 suspends until July 1, 2019 the requirement that at the time a multiple-party account is established or at the time a single-party account is converted to a multiple-party account with a financial institution, the document establishing the account or adding another party include for each party to the account a question regarding whether that party intends for the sum remaining upon that party's death to belong to the surviving party or parties.

Public Law 2019, chapter 1 was enacted as an emergency measure effective March 7, 2019.

LD 249An Act To Ensure Protection of Patients in Medical Reviews by HealthPUBLIC 171Insurance Carriers

Sponsor(s)	Committee Report	Amendments Adopted
GRATWICK G	OTP-AM	S-107
PERRY A		

This bill requires that a health insurance carrier's medical reviews, including utilization reviews and case management, be conducted by a health care practitioner who is board certified and in active medical practice in the same specialty as typically manages the medical condition, procedure or treatment under review.

#### Committee Amendment "A" (S-107)

This amendment replaces the bill. The amendment requires that appeals of a health insurance carrier's adverse health care treatment decision be conducted by a licensed health care practitioner who is board certified in the same or similar specialty as typically manages the medical condition, procedure or treatment under review and whose compensation does not directly or indirectly depend upon the quantity, type or cost of the medical condition,

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procedure or treatment the practitioner approves or denies on behalf of a carrier. The bill would have required that all medical reviews be conducted by a clinical peer who was board certified and in active medical practice in the same specialty.

The amendment also provides that any rules adopted by the Bureau of Insurance to conform to changes made in the bill are routine technical rules as defined in the Maine Administrative Procedures Act.

#### **Enacted Law Summary**

Public Law 2019, chapter 171 requires that appeals of a health insurance carrier's adverse health care treatment decision be conducted by a licensed health care practitioner who is board certified in the same or similar specialty as typically manages the medical condition, procedure or treatment under review and whose compensation does not directly or indirectly depend upon the quantity, type or cost of the medical condition, procedure or treatment the practitioner approves or denies on behalf of a carrier.

## LD 260An Act To Permit Disability Insurance To Be Offered through the<br/>Surplus Lines MarketPUBLIC 20<br/>EMERGENCY

<u>Sponsor(s)</u>	Committee Report	Amendments Adopted
FOLEY R	OTP-AM	S-7
PRESCOTT D		

This bill permits disability insurance to be offered through the surplus lines market in excess of policy limits available from an admitted insurer.

#### Committee Amendment "A" (S-7)

This amendment removes the restriction in the bill that would have limited the offer of disability insurance to only the excess of policy limits available from an admitted insurer. The amendment would allow a licensed producer to place disability insurance through the surplus lines market if coverage is not available from an admitted insurer.

The amendment also adds an emergency preamble and emergency clause to the bill.

#### **Enacted Law Summary**

Public Law 2019, chapter 20 permits disability insurance to be offered through the surplus lines market. The law allows a licensed producer to place disability insurance through the surplus lines market if coverage is not available from an admitted insurer.

Public Law 2019, chapter 20 was enacted as an emergency measure effective April 5, 2019.

#### LD 267 An Act To Amend the Laws Governing the Practice of Pharmacy

Died Between Houses

Sponsor(s)	
SANBORN L	

Committee Report ONTP

OTP

Amendments Adopted

This bill specifies that the practice of pharmacy is the provision of health care services.