

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from electronic originals
(may include minor formatting differences from printed original)

STATE OF MAINE
129TH 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

REP. DENISE A. TEPLER, CHAIR
REP. MICHAEL F. BRENNAN
REP. ANNE MARIE MASTRACCIO
REP. HEIDI E. BROOKS*
REP. GINA M. MELARAGNO
REP. VICTORIA FOLEY
REP. DWAYNE W. PRESCOTT
REP. MARK JOHN BLIER
REP. JOSHUA MORRIS
REP. GREGORY LEWIS SWALLOW
REP. H. SCOTT LANDRY, JR.*

STAFF:

COLLEEN MCCARTHY REID, SR. LEGISLATIVE ANALYST
OFFICE OF POLICY AND LEGAL ANALYSIS
13 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1670
<http://legislature.maine.gov/opla/>

*Committee member for a portion of the session

STATE OF MAINE

129TH 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 129th 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..... carried over to a subsequent session of the Legislature
CON RES XXX..... chapter # of constitutional resolution passed by both houses
CONF CMTE UNABLE TO AGREE..... Committee of Conference unable to agree; legislation died
DIED BETWEEN HOUSES..... House & Senate disagreed; legislation died
DIED IN CONCURRENCE..... defeated in each house, but on different motions; legislation died
DIED ON ADJOURNMENT..... action incomplete when session ended; legislation died
EMERGENCY..... enacted 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 ENACTMENT..... legislation proposing local mandate failed required 2/3 vote
HELD BY GOVERNOR..... Governor has not signed; final disposition to be determined at subsequent session
LEAVE TO WITHDRAW..... sponsor's request to withdraw legislation granted
NOT PROPERLY BEFORE THE BODY..... ruled 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..... chapter # of enacted private & special law
PUBLIC XXX..... chapter # of enacted public law
RESOLVE XXX..... chapter # of finally passed resolve
VETO SUSTAINED..... Legislature failed to override Governor's veto

The effective date for non-emergency legislation enacted in the First Regular Session of the 129th 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.

Joint Standing Committee on Health Coverage, Insurance and Financial Services

Public Law 2019, chapter 295 requires health insurance carriers to establish a process for prescription drug step therapy exceptions. The law conforms the timeline for responding to a request for a step therapy override exception determination with the existing timeline for prior authorization requests. The law clarifies the meaning of exigent circumstances and makes clear that a carrier is required to continue to provide access to the prescription drug subject to step therapy protocol during the consideration of a request for a step therapy override exception determination.

Public Law 2019, chapter 295 applies to health plans issued or renewed by health insurance carriers on or after January 1, 2020.

LD 1025

An Act To Prohibit the Provision of Conversion Therapy to Minors by Certain Licensed Professionals

PUBLIC 165

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FECTEAU R SANBORN L	OTP-AM OTP-AM	H-213

This bill does the following.

1. It defines "conversion therapy" as any practice or course of treatment that seeks or purports to change an individual's sexual orientation or gender identity, except for any practice or treatment that assists an individual undergoing a gender transition; any practice or treatment that provides acceptance, support and understanding to an individual; and any practice or treatment that facilitates an individual's coping, social support or identity exploration and development, including any therapeutic intervention that is neutral with regard to sexual orientation or gender identity, and that seeks to prevent or address unlawful conduct or unsafe sexual practices, as long as the counseling does not seek to change the individual's sexual orientation or gender identity.
2. It prohibits certified school psychologists and guidance counselors, nurses, doctors, physician assistants, psychologists, psychological examiners, alcohol and drug counselors and aides, social workers, pharmacists and pharmacy technicians, professional counselors, marriage and family therapists, pastoral counselors, speech-language pathologists and assistants and audiologists from advertising, offering or administering conversion therapy to individuals under 18 years of age. Advertising, offering or administering conversion therapy to an individual under 18 years of age in violation of this prohibition is grounds for discipline of the professional by the department or board that issued the professional's license, certification or registration, including but not limited to suspension or revocation of the license, certification or registration.
3. It prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.
4. It includes a statement of legislative findings and intent.

Committee Amendment "A" (H-213)

This amendment is the majority report of the committee. The amendment clarifies the definition of "conversion therapy." The bill provides that evidence that a certified school psychologist or guidance counselor has advertised, offered or administered conversion therapy to a child within the last 5 years is grounds for discipline; the amendment retains this provision but removes the 5-year limitation. The amendment also removes a similar 5-year limitation added by the bill to the current law that provides that evidence that an applicant for such a certification has injured the health or welfare of a child through abuse or exploitation is grounds for a denial of the certification. The amendment also adds an additional finding and makes other clarifying changes to the legislative findings and intent section.

Joint Standing Committee on Health Coverage, Insurance and Financial Services

Committee Amendment "B" (H-214)

This amendment is the minority report of the committee and replaces the bill. In place of the bill, the amendment incorporates the substance of L.D. 1296, An Act To Clarify the Scope of Practice of Certain Licensed Professionals Regarding Conversion Therapy. The amendment does the following.

1. It defines "conversion therapy" as any aversive practice or treatment that seeks to change an individual's sexual orientation or gender identity. The amendment defines "aversive practice or treatment" as any practice or treatment that is intended to induce changes in behavior through unpleasant stimuli or punishment and provides examples of aversive practices or treatments.
2. It provides that advertising, offering or administering conversion therapy to individuals under 18 years of age in the State is an unfair trade practice. Court actions involving conversion therapy brought against health care providers under the Maine Unfair Trade Practices Act are not governed by the specialized procedures set forth in the Maine Health Security Act for actions involving professional negligence.
3. It prohibits school psychologists and guidance counselors, nurses, doctors, physician assistants, psychologists, psychological examiners, alcohol and drug counselors and aides, social workers, pharmacists and pharmacy technicians, professional counselors, marriage and family therapists, pastoral counselors, speech-language pathologists and assistants and audiologists from administering conversion therapy to individuals under 18 years of age. Administration of conversion therapy to an individual under 18 years of age in violation of this prohibition is grounds for discipline of the professional by the department or board that issued the professional's license, certification or registration, including but not limited to suspension or revocation of the license, certification or registration.
4. It prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.

This amendment was not adopted.

House Amendment "A" To Committee Amendment "A" (H-222)

This amendment replaces Committee Amendment "A" and the bill to incorporate the substance of L.D. 1296, An Act To Clarify the Scope of Practice of Certain Licensed Professionals Regarding Conversion Therapy. The amendment does the following.

1. It defines "conversion therapy" as any aversive practice or treatment that seeks to change an individual's sexual orientation or gender identity. The amendment defines "aversive practice or treatment" as any practice or treatment that is intended to induce changes in behavior through unpleasant stimuli or punishment and provides examples of aversive practices or treatments.
2. It provides that advertising, offering or administering conversion therapy to individuals under 18 years of age in the State is an unfair trade practice. Court actions involving conversion therapy brought against health care providers under the Maine Unfair Trade Practices Act are not governed by the specialized procedures set forth in the Maine Health Security Act for actions involving professional negligence.
3. It prohibits school psychologists and guidance counselors, nurses, doctors, physician assistants, psychologists, psychological examiners, alcohol and drug counselors and aides, social workers, pharmacists and pharmacy technicians, professional counselors, marriage and family therapists, pastoral counselors, speech-language pathologists and assistants and audiologists from administering conversion therapy to individuals under 18 years of age. Administration of conversion therapy to an individual under 18 years of age in violation of this prohibition is grounds for discipline of the professional by the department or board that issued the professional's license,

Joint Standing Committee on Health Coverage, Insurance and Financial Services

certification or registration, including but not limited to suspension or revocation of the license, certification or registration.

4. It prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.

House Amendment "A" to Committee Amendment "A" was not adopted.

Senate Amendment "A" To Committee Amendment "A" (S-111)

This amendment replaces Committee Amendment "A" and the bill to incorporate the substance of L.D. 1296, An Act To Clarify the Scope of Practice of Certain Licensed Professionals Regarding Conversion Therapy. This amendment does the following.

1. It defines "conversion therapy" as any aversive practice or treatment that seeks to change an individual's sexual orientation or gender identity. The amendment defines "aversive practice or treatment" as any practice or treatment that is intended to induce changes in behavior through unpleasant stimuli or punishment and provides examples of aversive practices or treatments.
2. It provides that advertising, offering or administering conversion therapy to individuals under 18 years of age in the State is an unfair trade practice. Court actions involving conversion therapy brought against health care providers under the Maine Unfair Trade Practices Act are not governed by the specialized procedures set forth in the Maine Health Security Act for actions involving professional negligence.
3. It prohibits school psychologists and guidance counselors, nurses, doctors, physician assistants, psychologists, psychological examiners, alcohol and drug counselors and aides, social workers, pharmacists and pharmacy technicians, professional counselors, marriage and family therapists, pastoral counselors, speech-language pathologists and assistants and audiologists from administering conversion therapy to individuals under 18 years of age. Administration of conversion therapy to an individual under 18 years of age in violation of this prohibition is grounds for discipline of the professional by the department or board that issued the professional's license, certification or registration, including but not limited to suspension or revocation of the license, certification or registration.
4. It prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.

Senate Amendment "A" to Committee Amendment "A" was not adopted.

Enacted Law Summary

Public Law 2019, chapter 165 prohibits certified school psychologists and guidance counselors, nurses, doctors, physician assistants, psychologists, psychological examiners, alcohol and drug counselors and aides, social workers, pharmacists and pharmacy technicians, professional counselors, marriage and family therapists, pastoral counselors, speech-language pathologists and assistants and audiologists from advertising, offering or administering conversion therapy to individuals under 18 years of age. Advertising, offering or administering conversion therapy to an individual under 18 years of age in violation of this prohibition is grounds for discipline of the professional by the department or board that issued the professional's license, certification or registration, including but not limited to suspension or revocation of the license, certification or registration.

The law defines "conversion therapy" as any practice or course of treatment that seeks or claims to change an individual's sexual orientation or gender identity, except for any practice or treatment that assists an individual undergoing a gender transition; any practice or treatment that provides acceptance, support and understanding to an

Joint Standing Committee on Health Coverage, Insurance and Financial Services

individual; and any practice or treatment that facilitates an individual's coping, social support or identity exploration and development, including any therapeutic intervention that is neutral with regard to sexual orientation or gender identity, and that seeks to prevent or address unlawful conduct or unsafe sexual practices, as long as the counseling does not seek or claim to change the individual's sexual orientation or gender identity.

The law prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.

Public Law 2019, chapter 165 also includes a statement of legislative findings and intent.

LD 1047 An Act To Prohibit Consideration of Naloxone Purchases in Life Insurance Underwriting

PUBLIC 203

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SANBORN H TEPLER D	OTP-AM ONTP	S-106

This bill prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone or has purchased naloxone.

Committee Amendment "A" (S-106)

This amendment is the majority report and replaces the bill. The amendment prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone hydrochloride or has purchased naloxone hydrochloride. The amendment also provides an exception to the prohibition when the individual has a demonstrated history of opioid use disorder.

Enacted Law Summary

Public Law 2019, chapter 203 prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone hydrochloride or has purchased naloxone hydrochloride. The law provides an exception to the prohibition when the individual has a demonstrated history of opioid use disorder.

LD 1072 An Act To Promote Workforce Education on Alzheimer's Disease and Dementia

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CRAVEN M GRATWICK G	ONTP	

This bill requires health care practitioners to disclose a diagnosis of Alzheimer's disease or dementia to an authorized representative or a family or household member except for a person that is expressly prohibited by the individual diagnosed. The health care practitioner making the diagnosis must also provide information regarding care planning services, including assistance understanding the diagnosis, and medical and nonmedical options for treatment, services and supports and information on how to access those options.

The bill requires that by January 1, 2023 every hospital must have a policy regarding the recognition and management of patients with Alzheimer's disease and dementia within that hospital and have the policy on file. The hospital must consult with the Department of Health and Human Services and statewide organizations with expertise in the field of Alzheimer's disease and dementia and include relevant portions of the federal Department of Health and Human Services, Centers for Disease Control and Prevention "Healthy Brain Initiative" publication and