

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
129<sup>TH</sup> 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

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# STATE OF MAINE

129<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 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*..... 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 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.

*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