

# 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*

any succeeding plans and the state plan regarding Alzheimer's disease and related dementias in Maine developed by the Department of Health and Human Services.

The bill also requires continuing education requirements to be adopted by the Board of Licensure in Medicine, the Board of Osteopathic Licensure and the State Board of Nursing that relate to diagnosis, behavioral symptoms, respectful and effective communication, safety, signs of abuse and neglect and identifying signs of self-neglect by persons living alone with Alzheimer's or dementia. It also requires physician assistants to receive the same continuing education.

The bill also requires the Department of Health and Human Services to provide four hours of education and training to all employees of adult protective services at the beginning of employment.

**LD 1082      An Act To Provide for Alternative Pain Treatment before Treatment with Opioids      ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
JACKSON T STANLEY S	ONTP	

This bill prohibits an individual licensed to prescribe opioid medication from prescribing opioid medication to a patient who does not have an active prescription for opioid medication unless the patient has completed 24 sessions of alternative pain treatment. This bill exempts from this requirement patients who have pain associated with cancer treatment, palliative care in conjunction with a serious illness, end-of-life and hospice care, medication-assisted treatment for substance use disorder and other circumstances determined in rule by the Department of Health and Human Services. This bill requires an individual licensed to prescribe opioid medication to discuss alternative pain treatment with a patient who has an active prescription for opioid medication. This bill also provides that a referral from an individual licensed under the Maine Revised Statutes, Title 32 whose scope of practice includes prescribing opioid medication is not required for coverage for alternative pain treatment and that the cost of covered alternative pain treatment may not exceed the cost of a visit to a primary care provider.

**LD 1085      An Act To Ensure That Maine Residents Have Adequate and Affordable Access to Health Care      CARRIED OVER**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SANBORN L HUBBELL B		

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to ensure that consumer protections in health insurance are maintained under state law.

This bill was carried over to any special or regular session, or both, of the 129th Legislature by joint order, H.P. 1322.

**LD 1089      An Act To Ban Discretionary Clauses in Disability Income Insurance Policies      PUBLIC 179**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
CARPENTER M	OTP-AM	S-89

*Joint Standing Committee on Health Coverage, Insurance and Financial Services*

This bill adds a provision in the individual and group life insurance and health insurance and health maintenance organization provisions in the Maine Insurance Code that prohibits the inclusion or enforcement of a contract provision allowing the insurer sole or absolute discretion to interpret the terms of the insurance contract.

**Committee Amendment "A" (S-89)**

This amendment replaces the bill. The amendment prohibits the inclusion or enforcement of a contract provision in individual and group disability income insurance policies allowing the insurer sole or absolute discretion to interpret the insurance contract.

**Enacted Law Summary**

Public Law 2019, chapter 179 prohibits the inclusion or enforcement of a contract provision in individual and group disability income insurance policies allowing the insurer sole or absolute discretion to interpret the insurance contract.

**LD 1105      An Act To Allow Acupuncture Detoxification Specialists To Administer      PUBLIC 269**  
**an Auricular Acupuncture Treatment for Substance Use and**  
**Co-occurring Disorders**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
PERRY A CLAXTON N	OTP-AM	H-337

This bill directs the Department of Professional and Financial Regulation, Board of Complementary Health Care Providers to license acupuncture detoxification specialists and establishes standards for the provision of auricular acupuncture detoxification. The bill directs the board to adopt rules to implement the requirements.

**Committee Amendment "A" (H-337)**

This amendment replaces the bill and directs the Department of Professional and Financial Regulation, Board of Complementary Health Care Providers to license acupuncture detoxification specialists. The amendment also establishes standards for the provision of auricular acupuncture detoxification.

**Enacted Law Summary**

Public Law 2019, chapter 269 directs the Department of Professional and Financial Regulation, Board of Complementary Health Care Providers to license acupuncture detoxification specialists. The law also establishes standards for the provision of auricular acupuncture detoxification.

**LD 1138      An Act To Ensure Health Insurance Coverage for Treatment for      CARRIED OVER**  
**Childhood Postinfectious Neuroimmune Disorders Including Pediatric**  
**Autoimmune Neuropsychiatric Disorders Associated with Streptococcal**  
**Infections and Pediatric Acute-onset Neuropsychiatric Syndrome**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BAILEY D DESCHAMBAULT S		

This bill requires health insurance coverage for treatment of childhood postinfectious neuroimmune disorders, a group of medical conditions that includes autoinflammatory encephalopathic conditions including pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute-onset