

# 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

Public Law 2019, chapter 178 provides that the law that prohibits carriers from denying payment for covered health care services solely on the basis that the referral for services was made by an out-of-network provider applies only to referrals made by out-of-network direct primary care providers. It prohibits a carrier from requiring an enrollee to pay a greater cost-sharing amount than the cost-sharing that would apply to the same service if the service was referred by a participating primary care provider. It also allows a carrier to require a direct primary care provider who is not a member of the carrier's provider network to attest that the provider is a direct primary care provider through a written attestation or copy of the direct primary care agreement with the enrollee.

### **LD 1236 An Act To Clarify the Laws Governing the Licensing of Paramedics ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
HANDY J	ONTP	

This bill defines paramedic and paramedic emergency medical treatment in the laws governing the provision of emergency medical treatment. It also authorizes the Emergency Medical Services' Board to establish by rule appropriate licensure levels for paramedics and the qualifications for persons to hold those licenses.

### **LD 1243 An Act To Assist Small Businesses in Providing Health Care for Their Employees ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MORALES V	ONTP	

This bill requires the Bureau of Insurance, Consumer Health Care Division to provide education and resources to employers with 50 or fewer employees to assist with making decisions related to health care coverage for their employees.

See related bill, LD 1274.

### **LD 1260 An Act Regarding Short-term, Limited-duration Health Plans PUBLIC 330**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FOLEY V JACKSON T	OTP-AM	H-476

This bill limits the issuance of short-term, limited-duration individual health insurance policies in this State to policies with a term that is 3 months or less and further restricts an insurer or the insurer's agent or broker from issuing a short-term, limited-duration policy that replaces a prior short-term, limited-duration policy if the combined term of the new policy and all prior successive policies exceeds 3 months in any 12-month period. The bill prohibits an insurer from imposing any preexisting condition exclusion on a short-term, limited-duration policy. The bill also requires that insurers make specific written disclosures related to the terms and benefits of policies in at least 14-point type, including the types of benefits and consumer protections that are and are not included in the policies. The bill prohibits the issuance of a policy without prior approval from the Superintendent of Insurance.

The requirements of the bill apply to policies issued or renewed in this State on or after January 1, 2020.

#### **Committee Amendment "A" (H-476)**

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

This amendment replaces the bill. The amendment does the following.

1. It limits the issuance of short-term, limited-duration individual health insurance policies in this State to policies with a term that ends on December 31st of the calendar year in which they are issued and allows an insurer or the insurer's agent or broker to issue a short-term, limited-duration policy that replaces a prior short-term, limited-duration policy only if the combined term of the new policy and all prior policies does not exceed 24 months and as long as the individual has not been covered under any short-term, limited-duration policy for at least 12 months prior to the issuance of a policy.
2. It requires that insurers make specific written disclosures related to the terms and benefits of policies in at least 14-point type, including the types of benefits and consumer protections that are and are not included in the policies, a summary of plan benefits, limits and exclusions in a standardized format, information about the circumstances in which covered benefits may be subject to balance billing and examples of how charges may be applied toward any cost sharing under the policy and billed to the individual policyholder, and a comparison of the short-term, limited-duration policy to a qualified health plan in the terms, benefits and conditions of the policy, any exclusions, medical loss ratio requirements or the provisions of guaranteed renewal and continuity of coverage. It also requires an insurer to make the documents and information required to be disclosed to be made available on the insurer's publicly accessible website.
3. It prohibits a short-term, limited-duration policy from being actively marketed or sold during any open enrollment period except for a policy that terminates coverage on December 31st.
4. It restricts the sale of short-term, limited-duration policies to in-person encounters with an insurer or an insurer's agent or broker.
5. It requires that an insurer or an insurer's agent or broker, upon offering an individual short-term, limited-duration policy for purchase, assess an individual making an application for eligibility for an advanced premium tax credit or cost-sharing reduction for coverage under a qualified health plan purchased on the exchange pursuant to the federal Patient Protection and Affordable Care Act and provide an estimate of the cost for coverage under a qualified health plan after applying any advanced premium tax credit or cost-sharing reduction.
6. It requires the Department of Professional and Financial Regulation, Bureau of Insurance to issue, no later than 30 days following the effective date of this legislation, a bulletin related to short-term, limited-duration health insurance policies describing the statutory requirements for the policies, including the requirements enacted in this legislation and the required mandated benefits applicable to all short-term, limited-duration policies.
7. It makes the requirements of this legislation apply to policies issued or renewed in this State on or after January 1, 2020.

### **Enacted Law Summary**

Public Law 2019, chapter 330 does the following.

1. It limits the issuance of short-term, limited-duration individual health insurance policies in this State to policies with a term that ends on December 31st of the calendar year in which they are issued and allows an insurer or the insurer's agent or broker to issue a short-term, limited-duration policy that replaces a prior short-term, limited-duration policy only if the combined term of the new policy and all prior policies does not exceed 24 months and as long as the individual has not been covered under any short-term, limited-duration policy for at least 12 months prior to the issuance of a policy.
2. It requires that insurers make specific written disclosures related to the terms and benefits of policies in at least 14-point type, including the types of benefits and consumer protections that are and are not included in the policies,

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

a summary of plan benefits, limits and exclusions in a standardized format, information about the circumstances in which covered benefits may be subject to balance billing and examples of how charges may be applied toward any cost sharing under the policy and billed to the individual policyholder, and a comparison of the short-term, limited-duration policy to a qualified health plan in the terms, benefits and conditions of the policy, any exclusions, medical loss ratio requirements or the provisions of guaranteed renewal and continuity of coverage. It also requires an insurer to make the documents and information required to be disclosed to be made available on the insurer's publicly accessible website.

- 3. It prohibits a short-term, limited-duration policy from being actively marketed or sold during any open enrollment period except for a policy that terminates coverage on December 31st.
- 4. It restricts the sale of short-term, limited-duration policies to in-person encounters with an insurer or an insurer's agent or broker.
- 5. It requires that an insurer or an insurer's agent or broker, upon offering an individual short-term, limited-duration policy for purchase, assess an individual making an application for eligibility for an advanced premium tax credit or cost-sharing reduction for coverage under a qualified health plan purchased on the exchange pursuant to the federal Patient Protection and Affordable Care Act and provide an estimate of the cost for coverage under a qualified health plan after applying any advanced premium tax credit or cost-sharing reduction.
- 6. It requires the Department of Professional and Financial Regulation, Bureau of Insurance to issue, no later than 30 days following the effective date of this legislation, a bulletin related to short-term, limited-duration health insurance policies describing the statutory requirements for the policies, including the requirements enacted in this legislation and the required mandated benefits applicable to all short-term, limited-duration policies.

The requirements of Public Law 2019, chapter 330 apply to policies issued or renewed in this State on or after January 1, 2020.

**LD 1261      An Act To Authorize Certain Health Care Professionals To Perform Abortions      PUBLIC 262**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GIDEON S SANBORN H	OTP ONTP	

This bill allows a physician assistant or an advanced practice registered nurse licensed as such in this State to perform abortions, in addition to a licensed allopathic or osteopathic physician.

**Enacted Law Summary**

Public Law 2019, chapter 262 allows a physician assistant or an advanced practice registered nurse licensed as such in this State to perform abortions, in addition to a licensed allopathic or osteopathic physician.

**LD 1263      An Act Regarding Telehealth      PUBLIC 289**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GRATWICK G TALBOT ROSS R	OTP-AM ONTP	S-176