MAINE STATE LEGISLATURE

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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

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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 Legislatur | $\cdot e$ |
|---|-----------|
| CON RES XXX | 2S |
| CONF CMTE UNABLE TO AGREE | d |
| DIED BETWEEN HOUSES | d |
| DIED IN CONCURRENCE defeated in each house, but on different motions; legislation die | d |
| DIED ON ADJOURNMENT action incomplete when session ended; legislation die | d |
| EMERGENCYenacted law takes effect sooner than 90 days after session adjournment | ıt |
| FAILED, EMERGENCY ENACTMENT or FINAL PASSAGEemergency failed to receive required 2/3 vot | te |
| FAILED, ENACTMENT or FINAL PASSAGE failed to receive final majority vot | te |
| FAILED, MANDATE ENACTMENTlegislation proposing local mandate failed required 2/3 vot | te |
| HELD BY GOVERNOR Governor has not signed; final disposition to be determined at subsequent sessio | n |
| LEAVE TO WITHDRAWsponsor's request to withdraw legislation grante | d |
| NOT PROPERLY BEFORE THE BODYruled out of order by the presiding officer; legislation die | |
| INDEF PPindefinitely postponed; legislation die | d |
| ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X ought-not-to-pass report accepted; legislation die | |
| P&S XXXchapter # of enacted private & special law | w |
| PUBLIC XXX | w |
| RESOLVE XXX | |
| VETO SUSTAINEDLegislature failed to override Governor's vet | 0 |
| | |

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

LD 1660 An Act To Improve Access to Physician Assistant Care

CARRIED OVER

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| SANBORN L | | |
| STEWART T | | |

This bill makes the following changes to the laws governing the licensing and scope of practice of physician assistants.

- 1. It increases the membership of the Board of Osteopathic Licensure and the Board of Licensure in Medicine from 10 to 11 members by changing the number of members on each board who are physician assistants from one member to two members.
- 2. It establishes provisions for the scope of practice, insurance coverage of services and immunity from liability for providing volunteer medical services during emergencies or disasters and clarifies that physician assistants are primary care providers when practicing in a medical specialty required for a physician to be a primary care provider.
- 3. It removes registration and physician supervisory requirements.
- 4. It establishes requirements for physician assistant collaboration and consultation with physicians and other health care professionals.
- 5. It changes the initial licensing fee from \$250 to \$300.
- 6. It provides a transition provision for physician assistant licenses that are current and not subject to disciplinary action.

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

LD 1661

An Act To Create the Drug Donation and Redispensing Program

CARRIED OVER

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| CLAXTON N | OTP-AM | S-227 |

This bill establishes the drug donation and redispensing program under the Department of Health and Human Services. The program collects donations of unused prescription and legend drugs from health care providers, health care facilities and other sources, including at drop-off locations throughout the State, and redispenses the drugs through participating pharmacies to qualified low-income persons.

Committee Amendment "A" (S-227)

This amendment adds a provision to protect a person from civil or criminal liability and from professional discipline of a licensing board for actions taken by a person in good faith in accordance with the requirements of the drug donation and redispensing program established in the bill.

Joint Standing Committee on Health Coverage, Insurance and Financial Services

This bill was reported out of committee and then carried over to any special or regular session, or both, of the 129th Legislature on the Special Appropriations Table by joint order, H.P. 1322.

LD 1666 An Act To Require Certain Health Care Providers To Provide Patients Detailed Information on the Risks Associated with the Use of Opioid Medications and Schedule II Drugs

ONTP

| Sponsor(s) | <u>Committee Report</u> | Amendments Adopted |
|------------|-------------------------|--------------------|
| PICKETT R | ONTP | |
| FOLEY R | | |

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This bill requires a health care provider who is a prescriber of any opioid medication or a medication that is a schedule II drug, before issuing an initial prescription and before issuing a third prescription of an opioid medication or a medication that is a schedule II drug, to inform a patient of the risks of using the medication, the reason the medication is necessary and alternative treatments that may be available. It also requires the health care provider to include a note in the patient's medical record that the health care provider discussed the information with the patient.

LD 1673 An Act To Prohibit Prescription Drug Advertising

CARRIED OVER

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| CHIPMAN B | | |
| TEPLER D | | |

This bill amends current law, which allows the advertising of prescription drugs only if the advertisement is not misleading, to ban completely, beginning January 1, 2020, the advertising of prescription drugs, either by broadcast by a television or radio station in this State, over the Internet from a location in this State or in a magazine or newspaper printed, distributed or sold in this State. A violation is a violation of the Maine Unfair Trade Practices Act.

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

LD 1694 Resolve, To Determine Compliance with Federal and State Mental Health Parity Laws

RESOLVE 72

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| GRATWICK G | OTP-AM | S-226 |
| SCHNECK J | | |

This bill requires insurers, health maintenance organizations and nonprofit hospital or medical service organizations to submit mental health and substance use disorder parity compliance reports to the Superintendent of Insurance. It specifies how the superintendent of Insurance may enforce parity requirements and provides parity reporting requirements for the superintendent. The bill also prohibits certain types of medical management protocols from being used in conjunction with prescription medications used to treat substance use disorder.

Committee Amendment "A" (S-226)

This amendment replaces the bill with a resolve that requires the Superintendent of Insurance to determine the