

MAINE STATE LEGISLATURE

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STATE OF MAINE
129TH LEGISLATURE
FIRST SPECIAL AND SECOND REGULAR SESSIONS



Summaries of bills, adopted amendments and laws enacted or finally passed

**JOINT STANDING COMMITTEE ON HEALTH COVERAGE,
INSURANCE AND FINANCIAL SERVICES**

November 2020

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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

amendments to the rule prior to final adoption.

Enacted Law Summary

Resolve 2019, chapter 136 authorizes final adoption of portions of Chapter 104: Maine State Services Manual, Section 8, Wholesale Prescription Drug Importation Program, a major substantive rule of the Department of Health and Human Services, only if the department incorporates certain specific amendments to the rule prior to final adoption.

The resolve requires that the rule be amended to specify that the Department of Health and Human Services shall submit an application to the United States Department of Health and Human Services to establish a state importation program no later than May 1, 2020. The resolve also requires that the rule be amended to also require that, if the final federal rule is not released before May 1, 2020, the department shall submit a subsequent or revised application to establish a state importation program as soon as is practicable after the release of the final federal rule.

Resolve 2019, chapter 123 was finally passed as an emergency measure effective March 18, 2020.

LD 2095 An Act To Require Appropriate Coverage of and Cost-sharing for ONTP **Generic Drugs and Biosimilars**

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

This bill establishes requirements for the coverage of and cost-sharing for generic drugs, biosimilars and branded pharmaceuticals when dispensed by pharmacies as outpatient prescription drugs under health plans offered by carriers that provide coverage for prescription drugs.

LD 2096 An Act To Save Lives by Capping the Out-of-pocket Cost of Certain PUBLIC 666 **Medications** **EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GIDEON S JACKSON T	OTP-AM	H-772 H-778 MOONEN M

This bill provides that a health insurance carrier that provides coverage for prescription insulin drugs may not impose a cost-sharing requirement on the enrollee that results in out-of-pocket costs to the enrollee in excess of \$100 per 30-day supply of insulin.

Committee Amendment "A" (H-772)

This amendment replaces the bill.

Part A provides that a health insurance carrier that provides coverage for prescription insulin drugs may not impose a cost-sharing requirement on an enrollee that results in out-of-pocket costs to the enrollee in excess of \$35 per prescription for a 30-day supply of insulin. The requirements apply to all health insurance policies issued or renewed on or after January 1, 2021.

Part B authorizes a pharmacist to dispense emergency refills of insulin and associated insulin-related supplies. The amendment requires that the insulin dispensed be in a quantity that is the lesser of a 30-day supply and the smallest

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available package. The amendment also requires the Maine Board of Pharmacy to adopt rules to establish adequate training requirements and protocols for dispensing insulin.

House Amendment "A" To Committee Amendment "A" (H-778)

This amendment adds an emergency preamble and an emergency clause to the bill.

Enacted Law Summary

Public Law 2019, chapter 666 provides that a health insurance carrier that provides coverage for prescription insulin drugs may not impose a cost-sharing requirement on an enrollee that results in out-of-pocket costs to the enrollee in excess of \$35 per prescription for a 30-day supply of insulin. The requirements apply to all health insurance policies issued or renewed on or after January 1, 2021.

Public Law 2019, chapter 666 also authorizes a pharmacist to dispense emergency refills of insulin and associated insulin-related supplies. The law requires that the insulin dispensed be in a quantity that is the lesser of a 30-day supply and the smallest available package. The law also requires the Maine Board of Pharmacy to adopt rules to establish adequate training requirements and protocols for dispensing insulin.

Public Law 2019, chapter 666 was enacted as an emergency measure effective March 18, 2020.

LD 2105 An Act To Protect Consumers from Surprise Emergency Medical Bills

**PUBLIC 668
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
GIDEON S SANBORN H	OTP-AM	H-773 H-777 MOONEN M

This bill amends the law providing consumer protection for surprise medical bills to include surprise bills for emergency services. In the event of a dispute with respect to a surprise medical bill, the bill directs the Superintendent of Insurance to develop an independent dispute resolution process to determine a reasonable payment for health care services.

Committee Amendment "A" (H-773)

This amendment replaces the bill.

The amendment amends the law providing consumer protection for surprise medical bills to include surprise bills for emergency services and also extends the same protections to bills for covered emergency services rendered by out-of-network providers. The amendment clarifies that consumers must be held harmless and not subject to balance billing for these services and specifies that consumers are responsible only for any applicable cost sharing determined as if the health care services were rendered by a network provider.

In the event of a dispute with respect to only a surprise bill for emergency services or a bill for covered emergency services rendered by an out-of-network provider, the amendment directs the Superintendent of Insurance to develop an independent dispute resolution process to determine a reasonable payment for health care services beginning no later than October 1, 2020.

The amendment requires the Emergency Medical Services' Board to convene a stakeholder group to review reimbursement rates for ambulance services.

The amendment also adds an appropriations and allocations section.