MAINE STATE LEGISLATURE

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STATE OF MAINE

132ND LEGISLATURE

FIRST REGULAR AND FIRST SPECIAL SESSIONS

Disposition of bills and summaries of all laws enacted or finally passed

JOINT STANDING COMMITTEE ON HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

August 2025

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OFFICE OF POLICY AND LEGAL ANALYSIS

13 STATE HOUSE STATION

AUGUSTA, ME 04333

(207) 287-1670

http://legislature.maine.gov/opla

LD 985 An Act to Impose a Moratorium on the Ownership or Operation of Hospitals in the State by Private Equity Companies or Real Estate Investment Trusts

ENACTED LAW SUMMARY

Public Law 2025, chapter 401 places a moratorium until June 15, 2026 on a private equity company or real estate investment trust from acquiring or increasing a direct or indirect ownership interest or operational control or financial control in a hospital in the State. The moratorium does not apply to any transaction for which an application for a certificate of need under the Maine Revised Statutes, Title 22, section 329 was filed on or before June 1, 2025.

Public Law 2025, chapter 401 was enacted as an emergency measure effective June 22, 2025.

LD 999 An Act to Include Employees of the Maine Indian Tribal-State Commission in the State's Group Health Plan and to Clarify Future Eligibility for the State's Group Health Plan

ENACTED LAW SUMMARY

Public Law 2025, chapter 278 extends to Maine Indian Tribal-State Commission employees eligibility to participate in the State's group health plan. The law also clarifies the eligibility of persons other than state employees for the group health plan provided by the State as an employee benefit and provides that persons other than state employees may not be granted eligibility under the group health plan unless the persons are employees of a quasi-governmental entity that receives significant and ongoing operating funds through a General Fund appropriation.

LD 1100 An Act to Clarify the Requirements for Accessing Nonformulary Drugs and Drugs Used to Treat Serious Mental Illness

ENACTED LAW SUMMARY

Public Law 2025, chapter 473 clarifies that if a drug shortage causes a formulary drug used for the treatment of serious mental illness to become unavailable, a health insurance carrier must approve a prior authorization for an equivalent nonformulary drug that has been prescribed for the treatment of an enrollee's serious mental illness if there is a shortage of the formulary drug and there is no equivalent drug available on the carrier's formulary. The law also preserves the ability of an enrollee to request a clinically appropriate drug not otherwise covered by a carrier's health plan, but eliminates a requirement that an enrollee in a health plan gain access to such a drug.