

MAINE STATE LEGISLATURE

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STATE OF MAINE
132ND LEGISLATURE
SECOND REGULAR SESSION



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

**JOINT STANDING COMMITTEE ON
HEALTH AND HUMAN SERVICES**

May 2026

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Resolve 2025, chapter 119 was subsequently amended by Public Law 2025, chapter 757 to change the date for the request for applications from March 1, 2026 to March 1, 2027.

LD 1540 Resolve, Directing the Maine Developmental Disabilities Council to Examine the Unmet Needs of Children Who Need Skilled Medical Care

Resolve 2025, chapter 128 requires the Maine Developmental Disabilities Council to convene a work group to examine the unmet needs of children who require skilled medical care and the families of those children. The council must submit a report to the Joint Standing Committee on Health and Human Services no later than January 31, 2026. The committee is authorized to report out legislation related to the report to the Second Regular Session of the 132nd Legislature.

Resolve 2025, chapter 128 was finally passed in both the House and the Senate prior to the adjournment sine die of the First Special Session in 2025 but was not signed by the Governor. Pursuant to the Constitution of Maine, Resolve 2025, chapter 128 became law without the Governor's signature on January 11, 2026.

Resolve 2025, chapter 128 was subsequently amended by Public Law 2025, chapter 757 to change the reporting date to January 31, 2027 and to authorize the joint standing committee of the Legislature having jurisdiction over health and human services matters to report out legislation in the 133rd Legislature in 2027.

LD 1583 An Act Regarding Home Health Care Services Ordered by a Physician Licensed Outside of Maine

Public Law 2025, chapter 567 allows a home health care provider to deliver home health care to a patient who resides in this State based on an order from a physician in another state. It requires the home health care provider to be certified by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services, in addition to being licensed by the Department of Health and Human Services. The physician issuing the order must be licensed in another state, prescribe services pursuant to an in-person physical exam in the jurisdiction where the physician is licensed and may order services for no more than 90 days. The physician licensed in another state may provide telehealth services only to the patient for whom the order has been issued and is exempt from licensure by the Maine Board of Licensure in Medicine or the Maine Board of Osteopathic Licensure for this limited purpose.

LD 1677 An Act to Establish the Alzheimer's Disease and Related Dementias Prevention and Support Program

Public Law 2025, chapter 507 establishes the Alzheimer's Disease and Related Dementias Prevention and Support Program, which the Department of Health and Human Services, Maine Center for Disease Control and Prevention must administer in consultation with the Department of Health and Human Services, Office of Aging and Disability Services. The program's objectives

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include educating the public, supporting efforts for early detection and diagnosis, reducing cognitive decline and other negative outcomes and supporting care planning and management.

The law also creates the Healthy Brain Initiative Council as an advisory board composed of various stakeholders including, but not limited to, families affected by Alzheimer's disease or related dementias, medical professionals and medical facilities that treat individuals with Alzheimer's disease or related dementias, research and advocacy organizations and employees of the Office of Aging and Disability Services. The council is responsible for studying and developing findings and recommendations on a series of topics including, but not limited to, the occurrence of Alzheimer's disease or related dementias in this State, the treatment and care available and policies that address public awareness, prevention and early detection, treatment and care, safety concerns, legal concerns, research and assistance to families.

By January 20, 2027, the council must submit to the Governor and the Legislature a five-year plan outlining its recommendations to address the concerns the council is tasked with studying. The Maine Center for Disease Control and Prevention is required to issue annual updates on the progress of the plan's implementation and the council is required to issue an updated plan every five years.

Public Law 2025, chapter 507 was finally enacted in both the House and the Senate prior to the adjournment sine die of the First Special Session in 2025 but was not signed by the Governor. Pursuant to the Constitution of Maine, Public Law 2025, chapter 507 became law without the Governor's signature on January 11, 2026.

LD 1728 An Act to Improve Affordability, Stability and Access in the Maine Child Care Affordability Program

Public Law 2025, chapter 587 makes the following changes to the Maine Child Care Affordability Program.

1. It establishes a cap on copayments for families receiving subsidies under the program. A family with income up to 85% of the median family income in the State may not be required to pay more than 7% of the family's household income. The Department of Health and Human Services may further reduce or waive copayments for additional populations, including families with income up to 30% of the median family income in the State, children in foster care or kinship care, families experiencing homelessness and families with a child with a disability. Copayment information must be posted on the department's publicly accessible website.
2. It requires the department to reimburse child care providers for subsidies based on enrollment rather than attendance. Payment practices must promote the financial stability of child care providers and continuity of care for children.
3. It allows the department to reimburse child care providers receiving a subsidy at a rate that is higher than the amount charged for a child in a family that is not receiving a subsidy.