

LEGISLATIVE SUMMARY 2023



*The 2023 Legislative Session adjourned on July 25th. Vetoes of passed legislation can be made up to 10 days after adjournment, after which legislation becomes public law.

PREFACE

Since its founding in 1853, the Maine Medical Association (MMA) has worked to support physicians, their patients, and public health. Central to MMA policy is advocating for the interests of Maine physicians and their patients within the state legislature. The following digest has been put together by the MMA Advocacy Team and is a summary of the laws and resolutions that passed this session.

The 2023 First Regular & Special session of the 131st legislature saw 2,019 bills introduced. Of these, the MMA supported/opposed/monitored 396 Maine bills that have passed into law take effect 90 days after the legislature adjourns. This year laws without an emergency measure classification will take effect on October 25, 2023.

For more information and/or a detailed explanation of any bills of interest please contact Mikenzie Dwyer, Public Health & Government Affairs Associate (mdwyer@mainemed.com).





Co-chairs of MMA's Legislative Committee, Dr. Kevin Fickenscher and Dr. Henk Goorhuis

Thank you to our outstanding MMA Legislative Committee Co-chairs, Dr. Henk Goorhuis, and Dr. Kevin Fickenscher. Thanks to Sarah Lepoff for her work organizing and supporting the MMA Legislative Committee. Lastly, THANK YOU to our Doctors of the Day and to MMA members who participated in the weekly Legislative Committee updates. Your work and expertise are key to our advocacy efforts at the State House. Thank you!

TABLE OF SUMMARIZED BILLS

BILL NO.	PRIME SPONSOR	BILL TOPIC	GOVERNOR'S ACTION	EFFECTIVE DATE	SESSION LAWS CHAPTER
L.D. 51	Representative DRINKWATER of Milford	Restore Religious and Philosophical Vaccine Exemptions	N/A	DEAD	
L.D. 52	Representative FOSTER of Dexter	An Act to Allow Certain School Employees to Carry Firearms on School Property	N/A	DEAD	
L.D.60	Representative CRAVEN of Lewiston	72-Hour Firearm Purchase Waiting Period	N/A	DEAD	
L.D. 162	Representative MADIGAN of Waterville	Resolve, to Study the Establishment of a Substance Use Disorder Hotline	Signed 6/22/23	October 25, 2023	69
L.D. 199	Speaker Rachel TALBOT ROSS of Portland	An Act to Improve the Health of Maine Residents by Removing Exclusions to the MaineCare Program	N/A	DEAD	
L.D. 231	Representative Shagoury of Hallowell	Maine Pediatric and Behavioral Health Partnership Program	Emergency Signed 6/28/23	6/28/23	339
L.D. 258	Representative PRINGLE of Windham	Biennial Budget: MPHP FUNDING	N/A	DEAD	
L.D. 353	Representative FARRIN of Somerset	An Act Concerning Substance Use Disorder Treatment, Recovery, Prevention and Education	N/A	Carried Over	
L.D. 420	Representative PRINGLE of Windham	An Act to Fund a Health Program for Medical Professionals	N/A	DEAD	
L.D. 549	Representative MOONEN of Portland	An Act Regarding a Discovery Rule for the Statute of Limitations of Cases of Medical Negligence	N/A	DEAD	
L.D. 714	Representative CAMPBELL of Orrington	An Act to Expand the List of Crimes that Do Not Quality for Immunity Under Maine's Good Samaritan Laws Concerning Drug-Related Medical Assistance	N/A	DEAD	
L.D. 796	Representative PRINGLE of Windham	An Act Concerning Prior Authorizations for Health Care Provider Services	N/A	Carried Over	
L.D. 864	Senator BEEBE-CENTER of Knox	An Act to Clarify Provisions of the Maine Good Samaritan Law	Signed 6/15/23	October 25, 2023	178
L.D. 869	Senator KEIM of Oxford	An Act to Protect Education Access by Prohibiting a Mandate for Schoolchildren for a COVID-19 Vaccine or a Vaccine Under an Emergency Use Authorization	N/A	DEAD	
L.D. 902	Representative LEMELIN of Chelsea	An Act to Repeal So-called MaineCare Expansion	N/A	DEAD	
L.D.904	Representative OSHER OF Orono	An Act Supporting Rural Health Care Workforce in Maine	N/A	Carried Over	
L.D.934	Representative MOONEN of Portland	An Act to Amend the Laws Governing Damages Awarded for Wrongful Death	Signed 6/6/23	October 25, 2023	390

L.D.995	Representative QUINT of Hodgdon	An Act to Enhance Access to a Second Opinion for Health Care Services or Treatment	Signed 6/28/23	October 25, 2023	348
L.D.1052	Senator BRAKEY of Androscoggin	An Act to Expand Good Samaritan Protections for Naloxone Hydrochloride Administration	Signed 6/12/23	October 25, 2023	154
L.D.1098	Representative BAGSHAW in Windham	An Act to Restore Religious and Philosophical Exemptions Regarding Immunization Requirements	N/A	DEAD	
L.D.1119	Senator BENNETT of Oxford	An Act to Clarify the Criminal Statutes with Regard to Assaults on Emergency Services Persons	N/A	October 25, 2023	
L.D.1137	Representative GRAMLICH of Old Orchard Beach	An Act to Prohibit Deceptive Advertising in Limited Pregnancy Services Centers	N/A	DEAD	
L.D.1148	Senator BRAKEY of Ad	An Act to Prohibit COVID-19 Vaccine Mandates for Students Enrolled in Public Institutions of Learning	N/A	DEAD	
L.D.1151	Senator INGWERSEN of York	An Act Concerning Authority for Pharmacy to Administer Vaccines	Emergency Signed 6/15/23	6/15/23	170
L.D.1215	Senator DUSON of Cumberland	An Act to End the Sale of Flavored Tobacco Products	N/A	Carried Over	
L.D.1228	Representative SMITH of Palermo	An Act to Prohibit Certain Higher Education Institutions from Requiring Vaccines Approved Under Emergency Use Authorization for Admission or Attendance	N/A	DEAD	
L.D.1244	Representative O'NEIL of Saco	An Act to Define Undisputed Health Insurance Claims	Signed 6/27/23	October 25, 2023	
L.D. 1304	Representative PERRY of Calais	Resolve, to Establish the Task Force to Study Barriers to Achieving Behavioral Health Integration and Parity	N/A	Carried Over	
L.D.1323	Representative NUTTING of Oakland	An Act to Amend the Opioid Education Requirements	N/A	DEAD	
L.D.1498	Representative PERRY of Calais	An Act to Create an Advocacy and Complaint Process for Health Care Providers Within the Bureau of Insurance	N/A	Carried Over	
L.D.1614	Representative GRIFFIN of Levant	An Act to Require an Ultrasound and Certain Counseling Before an Abortion	N/A	DEAD	
L.D.1619	Speaker TALBOT ROSS of Portland (Governor's Bill)	An Act to Improve Maine's Reproductive Privacy Laws	N/A	October 25, 2023	
L.D.1639	Senator BRENNER of Cumberland	An Act to Address Unsafe Staffing of Nurses and Improve Patient Care		Carried Over	

L.D.1728	Senator MOORE of Washington	An Act to Ensure Access to Federally Approved Opioid Overdose-reversing Medication.	Signed 6/12/23	October 25, 2023	161
L.D.1736	Representative OSHER of Orono	An Act to Advance the National HIV/AIDS Strategy in Maine by Broadening HIV Testing	Signed 6/23/23	October 25, 2023	281
L.D.1741	Representative BAGSHAW of Windham	An Act to Promote Educational Opportunity Through the Educational Choice Tax Credit Program, Eliminating Certain Restrictions on Charter Schools and Virtual Public Charter Schools, Allowing More Entities to Authorize Charter Schools and Clarifying Educational Policy on Immunization Requirements	N/A	DEAD	
L.D.1745	Representative LaRochelle of Augusta	An Act to Support Public Health by Clarifying Authorized Activities Regarding Drug Checking	Emergency Signed 6/26/23	6/26/23	303
L.D.1766	Representative MASTRACCIO of Sanford	An Act to Require Insurance Carriers to Compensate Providers for Costs of Providing Medical Records for Utilization Review	N/A	DEAD	
L.D.1792	President JACKSON of Aroostook	Resolve, to Establish the Rural Health Services Task Force		Carried Over	
L.D.1795	President JACKSON of Aroostook	An Act to Create Greater Transparency for Facility Fees Charged by Health Care Providers and to Establish the Task Force to Evaluate the Impact of Facility Fees on Patients	Signed 7/10/23	October 25, 2023	
L.D.1797	President JACKSON of Aroostook	An Act to Expand Maine's Health Care Workforce by Expanding Educational Opportunities		Carried Over	
L.D.1836	Representative MATHIESON of Kittery	An Act Regarding Insurance Coverage for Diagnostic and Supplemental Breast Examinations	Unsigned 6/28/23	October 25, 2023	338
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Resolves

RESOLUTION: An expression of the will of the Legislature that does not have the effect of law.

Resolves have the force of law but do not amend statutes directly and are very limited in duration. They are narrow in scope and are often an instrument for one-time occurrences such as temporary study commissions.

Substance Use Disorder Treatment Hotline: Resolve Ch. 69 (H.P. 103 – L.D. 162)

MMA proposed the development of a hotline to assist and provide guidance to primary care physicians and others providing care to patients with substance use disorders. This hotline would be managed through the Maine Substance Use Disorders Learning Community and would be based on similar programs in Wisconsin and Massachusetts. The Maine Department of Health and Human Services (DHHS) would consult with stakeholders and current programs to inform the development.

This Resolve institutes a study into the development of the hotline, with an effective date of October 25, 2023. It also requires a report back to the legislature by January 15, 2024.

Telemonitoring and Telehealth Policy Review: Resolve Ch. 84 (S.P. 315 – L.D. 757)

Maine DHHS will review MaineCare's coverage of telemonitoring services, including any policies that restrict access to telemonitoring by patients eligible for home health services and for ultrasound procedures and/or fetal nonstress tests performed remotely through telehealth. The department will develop recommendations and clarify reimbursable services under the current policy.

Effective Date: October 25, 2023. Requires a report back to the legislature by January 10, 2024.

Public Option Health Plan Study: Resolve, Ch. 87 (H.P. 1186 – L.D. 1856)

Requires the prioritization of consideration of a public option health benefit plan in the Office of Affordable Health Care study established in 2021. The public option health plan consideration is for either a buy-in to the MaineCare program or a fully publicly administered plan that may be offered through the Maine Health Insurance Marketplace. The study will also consider other models to address the availability and affordability of health coverage in Maine.

Effective Date: October 25, 2023

Foreign-Trained Physicians Commission: Resolve, Ch. 93 (H.P. 584 – L.D. 937

Establishes a commission to study integrating foreign-trained physicians into Maine's health care workforce. The commission will consist of 13 members including: one person from the Board of Licensure in Medicine, one from the Maine Hospital Association, three physicians who are refugees or immigrants, and one person from the Maine Medical Association. The commission will study integration strategies, opportunities, and necessary support for foreign-trained physicians and develop guidelines for licensure.

Effective Date: Emergency Clause – will take effect immediately.

Public Laws

Bills that are passed or enacted by both chambers (House & Senate) and change current statutes become public law.

Continuation of Standing Orders by DHHS: Public Law Ch. 31 (H.P. 180 – L.D. 282)

Maine DHHS can authorize standing orders for the dispensing of vaccines and nonprescription drugs that support access to preventative care and medically necessary services for Medicaid recipients and participants in state-funded medical programs for noncitizens. Elderly low-cost drug program enrollees. Qualified residents and people receiving benefits under Cub Care. The standing orders must identify the eligible population and may include other criteria such as age limitations. The standing order must be signed by a physician or contracted with the department or office of MaineCare services or by a MaineCare-enrolled prescriber or department official.

Effective Date: October 25, 2023

Carried Acceptance of MOC for Reimbursement: Public Law Ch. 40 (H.P. 145 – L.D. 224)

A health insurance carrier in this State cannot deny or lower reimbursement to a physician, hospital, or outpatient clinical practice because the physician does not participate in a maintenance of certification (MOC) program. The carrier also cannot deny the provider from being a network provider or determine credentials of a physician, hospital, or outpatient clinical practice because the provider does not participate in MOC.

Effective Date: Requirements will apply to all policies on or after January 1, 2024. This section will be repealed on April 1, 2029.

Insurance Orders for Involuntary Hospitalizations: Public Law Ch. 66 (S.P. 213 – L.D. 459)

Allows for electronic endorsements submitted through secure electronic means to be a suitable signature and means for orders submitted for judicial review for involuntary hospitalizations.

Effective Date: October 25, 2023.

Access to Naloxone in Municipalities: Public Law Ch. 71 (H.P. 377 – L.D. 600)

With the consent of the municipalities, an overdose prevention program can provide and maintain a naloxone hydrochloride wall-mounted box or other visible accessible containers on public property (including parks, restrooms, recreational facilities, etc.). The municipality is immune from criminal or civil liability.

Effective Date: October 25, 2023.

EMS Training for Naloxone: Public Law Ch. 92 (S.P. 400 – L.D. 981)

Provides that emergency medical services (EMS) professionals administer and dispense naloxone hydrochloride in compliance with protocols and training that will be developed in accordance with this law.

Effective Date: Takes effect July 1, 2024.

Birth Control by Pharmacist Prescription: Public Law Ch. 115 (S.P. 158 – L.D. 351)

A pharmacist is allowed to prescribe, dispense, and administer hormonal contraceptive or injectable hormonal contraceptive if they have completed a Board training program, have completed a self-screening risk assessment with the patient, and have a valid certificate authorized by the Board. The pharmacist must provide the patient with a written record and refer the patient to the patient's provider or advise the patient to consult with a provider if they do not have one.

Effective Date: October 25, 2023. The Pharmacy Board will adopt rulemaking to implement the requirements.

Specialist Referrals at Urgent Care Visits: Public Law Ch. 119 (S.P. 280 - L.D. 722)

Prohibits an insurance carrier from denying coverage for behavioral health services or physical therapy services based solely on the referral coming from a provider other than the primary care provider providing the referral was made during an urgent care visit and the primary care provider was notified. An insurance carrier cannot apply additional cost-sharing requirements because of a referral made by another provider during an urgent care visit.

Effective Date: October 25, 2023.

Healthcare Facility Data Collection of Gender Identity and Sexual Orientation: Public Law Ch. 129 (H.P. 603 – L.D. 956)

Health care facilities, other than pharmacies, are required to ensure that data regarding sexual orientation and gender identity is collected from individuals as part of their health care information collection upon intake, unless the person declines to answer.

Effective Date: All health care facilities are required to collect this data <u>Beginning October 1</u>, 2026.

Mandatory Reporting Document Request: Public Law Ch. 146 (H.P. 291 – L.D. 474)

Requires a staff member, or person in charge of a public or private medical institution, agency, or facility to disclose the same documentation of child abuse or neglect submitted to Maine DHHS to law enforcement upon request.

Effective Date: October 25, 2023

Good Samaritan Protection for Naloxone Administration: Public Law Ch. 154 (S.P. 421 – L.D. 1052)

Grants immunity from criminal charges or professional disciplinary action for any person authorized to possess, obtain, store, administer, or dispense naloxone for administering or providing to another person for the use of administration, to whom they believe in good faith is experiencing an opioid-related drug overdose. Effective Date: October 25, 2023.

Expanding Opioid-Reversal Medication: Public Law Ch. 161 (S.P. 692 – L.D. 1728)

Expands access to opioid-reversal medication by including any FDA-approved opioid-reversal medication for use in collaborative practice agreements at schools and those allowed for prescription and purchase through a pharmacy. Also includes any FDA-approved opioid-reversal medication to any standing orders and/or prevention programs and administration by law enforcement, firefights, and health care professionals.

Effective Date: October 25, 2023.

Pharmacist Vaccine Administration: Public Law Ch. 170 (S.P. 478 – L.D. 1151)

Changes the age at which a pharmacist can administer vaccines without a prior prescription from 7 years old to 3 years old for the FLU vaccine. Allows for a pharmacist to administer vaccines authorized by the FDA and recommended by the CDC, with a valid prescription, to ages 3 through 18 and allows for pharmacists to provide vaccines not recommended by the CDC to a person 18 years or older with a valid prescription. All pharmacists must provide written immunization records to the person and notify their primary care provider within 72 hours of administering a vaccine.

Effective Date: Emergency Clause – take effect immediately.

Good Samaritan Law Exclusion: Public Law Ch. 178 (S.P. 361 – L.D. 864)

Adds endangering the welfare of a child to the listed exclusions to the Good Samaritan law. Meaning, a person would not be immune to criminal charges under the Good Samaritan law if they are endangering the welfare of a child.

Effective Date: October 25, 2023.

MaineCare Reimbursement for Electric Breast Pumps: Public Law Ch. 216 (H.P. 380 – L.D. 603)

Requires MaineCare reimbursement for electric breast pumps and supplies without prior authorization or limitation to prescription or recommendation by a health care professional.

Effective Date: Requirements will apply to all policies on or after January 1, 2024.

Insurance Coverage for Donor Breast Milk: Public Law Ch. 229 (S.P. 126 – L.D. 267)

Requires private insurance carriers to provide coverage for pasteurized donor breast milk if a physician, physician assistant, or advanced practice registered nurse signs an order stating the infant is medically/physically unable to receive maternal breast milk or participate in breastfeeding and the infant has a birth weight less than 1,500 grams, has a gastrointestinal anomaly or metabolic/digestive disorder, is not appropriately gaining weight, has formula intolerance, low blood sugar, congenital heart disorder, has received an organ transplant or has another serious medical condition for which donor breast milk is medically necessary.

Effective Date: Requirements will apply to all policies on or after January 1, 2024.

Claims Payments Through ACH: Public Law Ch. 232 (H.P. 815 – L.D. 1267)

Requires insurance carriers to provide a method for making claims payment using electronic funds transfer through an automated clearinghouse network upon request of the health care provider.

Effective Date: October 25, 2023

Updates to the Public Action Committee (PAC) Allowable Contributions: Public Law Ch. 244 (S.P. 284 – L.D. 726)

Increases the allowable individual contributions from \$1,500 to \$1,950 for gubernatorial candidates, from \$350 to \$475 for legislative candidates, from \$500 to \$575 for municipal candidates, and to no more than \$975 for any election of any other candidate. Associations, organizations, or corporations cannot aggregate any more than the allowable individual contributions listed previously. Adjusts the allowable contribution limits with the Consumer Price Index (inflation). Contributions made by a non-profit and a PAC or a PAC are made by that non-profit or PAC and are subject to restrictions.

Effective Date: Emergency Clause – effective immediately

Pharmacy Technician Vaccine Administration: Public Law Ch. 245 (H.P. 555 – L.D. 899)

Allows for a pharmacy technician to administer vaccines under the direct supervision of a pharmacist who has a valid license and who has completed required certification issued by the Board of Pharmacy. The pharmacy technician must complete a 20-hour drug administration training course within 3 years of graduation or have a valid certificate issued by any other state. The pharmacy technician can delegate vaccine administration to a pharmacy intern, but they are only authorized to give vaccines to those 18 and older.

Effective Date: Emergency Clause – effective immediately

Standardized Testing for HIV/AIDS: Public Law Ch. 281 (H.P. 1115 – L.D. 1736)

With consent from the patient, a health care provider is required to include an HIV test in the standard set of medical tests performed on an individual with a possible sexually transmitted disease or infection.

Effective Date: October 25, 2023

Reimbursement for Gender-Affirming Care under MaineCare: Public Law Ch. 288 (H.P. 676 – L.D. 1040)

Provides reimbursement for medically necessary treatment for, or related to, gender dysphoria and prohibits discrimination based on a MaineCare member's gender identity or gender expression. Gender dysphoria is given the definition included in the DSM 5.

Effective Date: October 25, 2023

Clarification for Sample Drug Transportation: Public Law Ch. 303 (H.P. 1124 – L.D. 1745)

Clarifies that a person (physician, dentist, podiatrist, or other authorized persons) possessing, receiving, transporting, or storing one or more drug samples contained in sample collection instruments or drug paraphernalia (i.e., syringe) is not committing a crime if the purpose for handling those drugs is drug checking (testing).

Effective Date: Emergency Clause – effective immediately

Diagnoses of Organic Mental Illness by Social Workers: Public Law Ch. 315 (H.P. 895 – L.D. 1400)

Allows for social workers to diagnose organic mental illness, in accordance with rules adopted by the board, during a psychosocial evaluation.

Effective Date: October 25, 2023

Changes to the Physical Therapist Practice Law: Public Law Ch. 317 (S.P. 571 – L.D. 1453)

Adds a definition of "physical therapist assistant" and adds "physiotherapy" to the definition of "physical therapy". Changes the definition of "practice of physical therapy" to include the detection, assessment, prevention, correction, or alleviation of any limiting physical disability or bodily malfunction. Allows for a referral to an advanced practice registered nurse, certified nurse midwife, physician assistant, or naturopathic doctor in addition to a physician or any other health care provider acting within the scope of that health care provider's license and requires a referral to any listed provider for treatment required beyond 120 days and requires a consult with any of the listed providers if there is no improvement within 90 days. No referral is necessary if the services provided are for the purpose of health promotion, injury prevention, wellness, fitness, or athletic performance or if the patient was diagnosed within 9 months with a chronic neuromuscular condition or services are provided from an individualized education plan under federal law.

Effective Date: October 25, 2023. Rules will be adopted following consultation with the State Bureau of Identification.

Undisputed Health Insurance Claim Definition Clarification: Public Law Ch. 332 (H.P. 792 – L.D. 1244)

A claim must be submitted using the requirements for standardized claims approved by the Federal Government. Defines "undisputed claim" as a manually or electronically submitted claim from a health care provider that contains all required data and is not missing any documentation.

Effective Date: October 25, 2023

Coverage for Diagnostic & Supplemental Breast Examinations: Public Law 338 (H.P. 1168 – L.D. 1836)

Requires insurance carriers to cover diagnostic and supplemental breast examinations if the results of a screening mammogram are inconclusive. Prohibits an insurance carrier from applying any cost-sharing requirements to the diagnostic and supplemental breast examinations. Supplemental breast examinations include magnetic resonance imaging or ultrasound to screen for breast cancer where there is no abnormality seen or suspected, but the individual has an increased risk of breast cancer.

Effective Date: Requirements will apply to all policies on or after January 1, 2024.

Funding for Maine Pediatric & Behavioral Health Partnership Program: Public Law Ch. 339 (H.P. 152 – L.D. 231)

Provides continued funding for Maine's current Pediatric & Behavioral Partnership Program to provide support to primary care physicians who are treating children and adolescent patients and need assistance with diagnosis, treatment, care coordination, or any other behavioral health questions to serve their patients. Requires the program to have an oversight team which includes one primary care provider and an adolescent psychiatrist; regional community teams; an advisory panel of key stakeholders; working agreements with other social service and educational agencies; a system for data collection and sharing.

Effective Date: Emergency Clause – will take effect immediately.

Protection for Health Care Professionals Providing Reproductive Care: Public Law Ch. 345 (H.P. 393 – L.D. 616)

Prohibits a medical malpractice insurer in Maine from refusing to issue or renew coverage, cancel, or restrict coverage or require additional charges to any health care professional that provides reproductive services based solely on the fact that the health care professional is in violation of another state's laws or is subject to adverse action against their professional license for violation of that state's reproductive health laws.

Effective Date: October 25, 2023

Removal of Cost-sharing for Abortion Care: Public Law Ch. 347 (H.P. 582 – L.D. 935)

No health plan can apply any cost-sharing measures (deductible, copayment, coinsurance, etc.) for the costs of abortion services in Maine. This does not apply to a health plan offered for use with a health savings account.

Effective Date: Requirements will apply to all policies on or after January 1, 2024.

Coverage for Second Opinions for Health Services: Public Law Ch. 348 (H.P. 630 – L.D. 995)

A health insurance enrollee may seek a second opinion from an out-of-network healthcare professional regarding health services without any cost-sharing if a network provider is not available. Health insurance plans cannot require an enrollee to seek a 2nd opinion from a provider that practices in the same office location as the enrollee's provider.

Effective Date: Requirements will apply to all policies on or after January 1, 2024.

Preemption of Legislating Abortion: Public Law Ch. 352 (H.P. 857 – L.D. 1343)

No political subdivision (municipality, county, town, village, etc.) can adopt any ordinance or rule concerning the regulation of abortion. Only the state has the authority to legislate the field concerning the regulation of a person's decision to terminate a pregnancy and legislation concerning abortion.

Effective Date: October 25, 2023

Wrongful Death Cap: Public Law Ch. 390 (H.P. 581 – L.D. 934)

Changes the cap for wrongful death, non-economic damages (loss of comfort, society, and companionship) from \$750,000 to \$1,000,000 adjusted for inflation and raises the amount for punitive damages from \$250,000 to \$500,000. Extends the timeline for wrongful death action from within 2 years to within 3 years of the decedent's death except in the case of homicide which would be within 6 years.

Effective Date: October 25, 2023

Supervised Community Confinement for Prisoners with a Medical Condition: Public Law Ch. 399 (S.P. 278 – L.D. 720)

A person held in a correctional facility can be transferred to supervised community confinement without meeting eligibility requirements if the medical director determines the

person to have a terminal or severely incapacitating medical condition or has a worsening prognosis that is likely to result in a terminal or severely incapacitating condition.

Effective Date: October 25, 2023

Consent for Gender-affirming Hormone Therapy for Minors: Public Law Ch. 413 (H.P. 340 – L.D. 535)

A health care professional can provide gender-affirming hormone therapy and follow-up care to a minor without the consent of their parent or guardian if the minor is at least 16 years old, has been diagnosed with gender dysphoria, the minor providers written consent, has discussed the diagnosis with their parent or guardian, and within the judgment of the health care professional, the minor is experiencing harm from, or is expected to experience harm from, not receiving gender-affirming hormone therapy. Effective Date: October 25, 2023

Changes to Abortion Reports and Abortions after Viability: Public Law Ch. 416 (H.P. 1044 – L.D. 1619)

Each abortion report to Maine DHHS is changed to include only, date, location, age of the patient, method used, and gestational age of the fetus. The report must be transmitted no later than 10 days following the end of the month in which the abortion was performed. Any abortion may be performed after viability only when it is necessary in the professional judgment of the physician with the Effective Date of the applicable standard of care.

Effective Date: October 25, 2023

MaineCare Reimbursement for Certain Chiropractic Services: Public Law Ch 454 (S.P. 260 – L.D. 592)

Requires reimbursement under the MaineCare program for the following chiropractic services: treatment by means of manual manipulation of the spine, evaluation and management examinations, and physical therapy when the services are otherwise covered by MaineCare when performed by a physical therapist.

Effective Date: The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services must first approve a state plan amendment and the Commissioner of Health and Human Services must notify the Secretary of State, the Secretary of the Senate, the Clerk of the House of Representatives, and the Revisor of Statutes that written approval for the state plan amendment has been receive before the law can take effect.

Clarification of Criminal Statutes for Assaults on EMS

Clarifies current law by including all hospital personnel who are assisting in emergency and emergency medical service persons (not including firefighters). Also makes it a Class C crime for a person found guilty of assault in an emergency room if that person intentionally, knowingly, or recklessly causes bodily injury to a person employed or contracted by a hospital.

Effective Date: October 25, 2023

Medicaid Eligibility for Incarcerated Persons

Closes the coverage gap in the MaineCare program by clarifying an incarcerated person who had Medicaid coverage prior to incarceration in a correctional facility or any jail does not lose this coverage as a result of their incarceration. Also requires the Department of Corrections (DOC) to enter into a memorandum of understanding to provide a person who is incarcerated with assistance in applying for benefits. When an incarcerated person is released, the Department will provide reimbursement under MaineCare for a 90-day period so the individual can receive care while transitioning back into the community.

Effective Date: Contingent on the U.S DHHS, CMS approval of the federal waiver, and written approval the waiver has been received.

To Promote Family-Centered SUD Treatment Interventions

A hospital must publicly post in an accessible area of its emergency department information provided by the Department of Health and Human Services that describes how individuals with substance use disorder can access evidence-based treatment.

Effective Date: July 1, 2024

Reimbursement for Ambulance Services

Requires an insurance carrier to provide reimbursement when an ambulance services provider responds to a call for emergency services and an enrollee refuses to transport to a hospital. Also requires the board to consider data on the volume of services provided per capita and per square mile, the impact of length of the state in a health care facility due to lack of ambulance services, type of entity, the payer mix, and demographics of person when they are establishing a program for collecting and reporting cost and performance metrics.

Effective Date: October 25, 2023