



Maine Hospital Association

Legislative Wrap Up

May 2026



Second Session
132nd Legislature

SECOND SESSION SUMMARY

The Second Session (the so-called short session) of the Legislature **adjourned April 29th**. The 132nd Legislature had a very large number of bills filed as was the case last session.

HISTORICAL RESULTS

	132nd (2025-2026)	131 st (2023-2024)	130 th (2021-2022)	129 th (2019-2020)	128 th (2017-2018)	127 th (2015-2016)	126 th (2013-2014)
Total Bills	2,245	2,291	2,041	2,173	1,927	1,703	1,865

SECOND SESSION

	132nd (2026)	131 st (2024)	130 th (2022)	129 th (2020)	128 th (2018)	127 th (2016)	126 th (2014)
New Bills Filed	257	272	300	321	281	248	288
Bills Carried Over from 1st Session	393	482	372	411	319	176	213
Total Bills Considered	650	754	672	732	600	424	501
Bills Enacted	343	264	346	182	203	179	229
% Enacted	53%	35%	51%	25%	34%	42%	46%

SECOND SESSION BILLS MHA FOLLOWED

	Number	Percentage
Enacted	45	43%
Rejected	60	57%
Total		

As always, thank you for all your assistance during this session.

State Government Leadership

Governor: Janet Mills

DHHS Commissioner: Sarah Gagne-Holmes (replaced J. Lambrew in 2024)

MaineCare Director: Michelle Probert

House of Representatives:

Democrats - 75

Republicans - 72

Other - 5 (1 Independents, 2 unenrolled, 2 Tribal)

Speaker - Ryan Fecteau (Biddeford)

Majority Leader - Matt Moonen (Portland)

Majority Whip - Lori Gramlich (Old Orchard beach)

Minority Leader - Billy Bob Faulkingham (Winter Harbor)

Minority Whip - Katrina Smith (Palermo)

Senate:

Democrats - 20

Republicans - 15

Other - 0

Senate President - Matthea Daughtry (Cumberland County)

Majority Leader - Teresa Pierce (Cumberland County)

Majority Whip - Jill Duson (Cumberland County)

Minority Leader - Trey Stewart (Aroostook County)

Minority Whip - Matt Harrington (York County)

Budget

The state enacted one supplemental budget in 2026.

For the second year in a row, a stand-alone supplemental budget failed enactment by the 2/3 majority vote needed to make it effective immediately.

As a result, DHHS did not have sufficient funding for the Medicaid program to finish SFY 2026. Consequently, DHHS will curtail payments to CAHs, out-of-state hospitals, some pharmacies and high-cost claims from May to June.

On April 10th, the Governor signed the supplemental budget (**LD 2212/Chapter 650**).

General Fund Balance.

General Fund spending alone increased by \$600 Million in two years, a 12% increase.

	SFY 2025	SFY 2026	SFY 2027
Revenue	\$5.35 Billion	\$5.89 Billion	\$5.94 Billion
Expenditures	\$5.51 Billion	\$5.82 Billion	\$6.17 Billion
Surplus/(Deficit)	(\$165 Million)	\$73 Million	(\$221 Million)
<i>Beginning Balance</i>	<i>\$321 Million</i>	<i>\$156 Million</i>	<i>\$229 Million</i>
Net Balance	\$156 Million	\$229 Million	\$8 Million

Note: This only reflects the balance of the General Fund. It does not reflect all State spending; it excludes Federal Funds and other funds.

Hospital Tax Re-Base.

The most notable item for hospitals was the re-base of the hospital tax from calendar year 2022 revenues to calendar year 2024. This is expected to raise approximately \$30M per year. The re-base is technically effective for SFY 2026. However, the budget won't be effective until after July 1, so the actual payment is not due until after July 1. We expect DHHS to issue details about the payment.

The Legislature only provided a partial match payment. We don't know the exact amount of the COLA but it will be approximately \$15M in SFY 2027 (and half of that amount for SFY 2026).

Other.

Not much else for hospitals. The proposed PRTF received another appropriation and its construction should be fully funded.

New Laws

Maine enacted 343 new laws this year. For non-emergency legislation enacted in the second session, the effective date is July 29, 2026.

If the bill was designated “emergency” legislation, it is immediately effective. Our list below will indicate emergency bills.

The MHA Bills of Interest document with all the bills is still available on the MHA website.

The next several pages list all of the enacted bills by committee.

Insurance Committee (20 new laws)

LD 378 - *An Act To Clarify That Health Insurers Must Comply With Plan Sponsors' Statutory Rights To Audit Claims And Data Requests Related To Those Audits* Public Law 2025, **Chapter 652 — Emergency**

This law is a 'do-over' from the first session. The original bill intended to give payers some ability to 'audit' their insurance carriers claim processing. It apparently had some technical drafting flaws. Chapter 652 is an attempt to fix those flaws.

LD 697 - *An Act To Direct The Maine Prescription Drug Affordability Board To Assess Strategies To Reduce Prescription Drug Costs And To Take Steps To Implement Reference-based Pricing* Public Law 2025, **Chapter 530**

This law:

1. It modifies the membership on the Maine Prescription Drug Affordability Board
2. It changes the scope of the duties of the board from determining prescription drug spending targets to focusing on an assessment of strategies to reduce prescription drug costs, reduce the rate of growth in prescription drug spending and reduce cost barriers for consumers.
3. It requires the board to review how states with authority to establish upper payment limits have implemented that authority and their regulation of pharmacy benefits managers, to recommend whether the board should have comparable authority and to assess implementing reference-based pricing for the first 10 prescription drugs for which the Medicare program has negotiated maximum fair prices through the Medicare drug price negotiation program.
4. It requires the board to recommend annual spending targets for prescription drugs for public payors and implementing complementary purchasing strategies; annual spending targets and strategies for the commercial insurance market; transparency requirements and supply chain regulation; strategies to reduce out-of-pocket costs through insurance regulation; and aligning prescription drug payment with acquisition costs.

New Laws

It also directs the board to recommend a program to reduce the impact of prescription drug costs on the State's health care system, stem the rate of growth in prescription drug spending and reduce cost barriers for consumers based on data the board has collected. The board is directed to submit in reports to the joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters, a preliminary plan to implement the program by January 30, 2026 and a final plan by October 1, 2027. The joint standing committee is authorized to report out legislation based on the reports.

LD 961 - *An Act To Address Maine's Health Care Workforce Shortage And Improve Access To Care* Public Law 2025, Chapter 540 — Emergency

This law provides that once rules are adopted by the State Board of Nursing to establish practice standards, a certified nurse practitioner who qualifies as an advanced practice registered nurse is no longer required to practice for at least 24 months under the supervision of a licensed physician or supervising nurse practitioner or be employed by a clinic or hospital that has a medical director who is a licensed physician.

LD 1890 - *An Act To Facilitate The Development Of Ambulatory Surgical Facilities By Increasing The Monetary Threshold For Certain Facilities Under The Requirement To Obtain A Certificate Of Need And To Index The Threshold Annually Thereafter* Public Law, Chapter 599

This law increases the threshold for review of certain ambulatory surgical facilities under the requirement to obtain a certificate of need from the Department of Health and Human Services to finance or incur expenditures for a project from \$3M to \$7.5M and then indexes the threshold to inflation.

LD 1970 - *An Act To Amend The Laws Regarding Consent For HIV Testing And Disclosure Of Related Medical Information For Insurance Purposes* Public Law 2025, Chapter 559

This law provides that an HIV test may be undertaken with a patient's informed consent. The law also provides that disclosure of information in a medical record for the purpose of seeking insurance reimbursement for HIV testing is not precluded.

LD 1990 - *An Act To Update The Requirements For Psychology Licensure* Public Law 2025, Chapter 577 — Emergency

This law modifies licensure requirements for psychologists by allowing the State Board of Examiners of Psychologists to accept applications for licensure at any time after successful passage of the qualifying examination. Current law prevents the board from accepting such applications within 6 months of failure of the examination.

New Laws

LD 2005 - An Act Regarding Mail Order Delivery Of Prescription Drugs Public Law 2025, **Chapter 674**

This law clarifies that a covered person is entitled to no more than a 7-day supply or the smallest prepackaged unit supply of a prescription drug to be dispensed at a network pharmacy when the delivery by the mail order pharmacy of the prescription drug is delayed by more than one day. The law clarifies that a covered person is entitled to receive a prescription drug to be dispensed at a network pharmacy in accordance with the covered person's prescription if the prescription drug arrives from the mail order pharmacy in an unusable condition. The amendment also clarifies that a covered person may not be subject to a payment that exceeds the total of one copayment, coinsurance payment or other out-of-pocket payment for the dispensing of the prescription drug in these circumstances.

LD 2082 - An Act To Regulate The Use Of Artificial Intelligence In Providing Certain Mental Health Services Public Law 2025, **Chapter 687**

This 19-page law prohibits any person from providing, advertising or otherwise offering therapy or psychotherapy services, including through the use of Internet-based artificial intelligence, to the public unless the therapy or psychotherapy services are provided by a licensed professional. It provides an exception for an artificial intelligence-based intervention that is used solely within a research project conducted in compliance with all applicable federal protections for human subjects in research.

However, it authorizes certain licensed professionals who are able to provide therapy or psychotherapy services within the scope of their license to use artificial intelligence to assist in providing administrative support or supplementary support in therapy or psychotherapy services. The law provides requirements for the use of artificial intelligence as well as prohibitions on its use.

LD 2071 - An Act To Expand Access To Vaccines Approved By The United States Food And Drug Administration By Allowing Pharmacists To Prescribe, Dispense And Administer Vaccines And Require Insurance Coverage Public Law 2025, **Chapter 683**

This law expands pharmacists' authority to prescribe, dispense, and administer vaccines to adults and to children over 6 months for influenza and COVID-19, with additional vaccines allowed for those age 3 and older with a prescription. It requires that vaccines be FDA-approved and consistent with recommendations from recognized national medical organizations. The law allows pharmacy interns to administer drugs and vaccines to minors under a pharmacist's supervision by removing prior restrictions. It eliminates the requirement for pharmacists to notify a patient's primary care provider after vaccination, relying instead on the state immunization registry. The law also clarifies that insurers may cover recommended vaccines without cost-sharing requirements.

New Laws

LD 2087 - *An Act To Amend The Laws Governing The Licensure Of American Sign Language Interpreters* Public Law 2025, **Chapter 585 — Emergency**

This law addresses certain recommendations from the Transforming Interpreting Maine (TIME) needs assessment report issued by the Department of Health and Human Services in 2024 in the wake of the October 2023 Lewiston shooting. It authorizes an exemption to American Sign Language interpreter licensure during emergencies, creates a broader educational pathway to licensure and extends the period of conditional licensure from 4 to 5 years, with a 6th year granted in cases of extreme hardship.

LD 2088 - *An Act To Increase Access To Primary Care Provided By Physician Associates* Public Law 2025, **Chapter 604 — Emergency**

This law removes the requirement for a practice agreement with an active physician for a physician associate who is the principal clinical provider in a practice that does not include a physician. It also makes optional consultations between a physician associate and a physician or other health care professional and removes the requirement that a physician be accessible at all times for purposes of consultation.

LD 2128 - *An Act To Reorganize The Emergency Medical Services' Board To Implement The Recommendations Of The Blue Ribbon Commission To Study Emergency Medical Services In The State* Public Law 2025, **Chapter 596**

This law, based on the recommendations of the Blue Ribbon Commission to Study Emergency Medical Services in the State, reduces the number of members appointed to the Emergency Medical Services' Board, other than the members representing regional councils, from 12 to 5, provides for regular feedback and recommendations from each region and requires the board to report annually by January 1st to the legislature any recommended changes to the Maine Emergency Medical Services Act of 1982 or other necessary changes to improve the provision of emergency medical services and allows the committee to report out legislation based on the board's recommendations.

LD 2129 - *An Act To Prohibit Liens On Principal Residences And Wage Garnishments For Medical Debt* Public Law 2025, **Chapter 649**

This law prohibits the placement of a lien on the principal place of residence of a consumer and prohibits the garnishment of salary or wages of a consumer when the related action is based on medical debt.

LD 2133 - *An Act Regarding Licensing Of Community Paramedicine Services And Clinicians* Public Law 2025, **Chapter 635**

This law defines "community paramedicine," "community paramedicine clinician" and "community paramedicine service" and requires community paramedicine clinicians and community paramedicine services to be licensed by the Emergency Medical Services' Board.

New Laws

It establishes minimum requirements for licensure and directs the board to adopt rules governing qualifications and standards.

LD 2146 - *An Act To Increase Access To Critical Vaccinations* Public Law 2025, Chapter 702

This law removes references to the Northeast Public Health Collaborative and instead relies on vaccine recommendations from national medical organizations such as the American Academy of Pediatrics, the American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists. It requires the Maine Vaccine Board to consider vaccines recommended by these organizations when determining which vaccines must be included in the state's Universal Immunization Program. Additionally, it grants pharmacists immunity from negligence liability when administering vaccines outside federal advisory guidelines if they follow state or recognized medical organization recommendations.

LD 2148 - *An Act To Amend The Laws Governing The Health Insurance Premium Cap For State Employees* Public Law 2025, Chapter 685

This law provides that the total premium increase for active and retired state employee health insurance for fiscal years ending after June 30, 2026 is limited to no more than any percentage increase in the Consumer Price Index plus 10%. The limitation does not apply to the fully insured Medicare Advantage prescription drug plan.

LD 2166 - *Resolve, Regarding Legislative Review Of Chapter 6: Delegation Of Nursing Activities And Tasks To Unlicensed Assistive Personnel By Registered Professional Nurses, A Major Substantive Rule Of The Department Of Professional And Financial Regulation, State Board Of Nursing* Resolve, Chapter 140 — Emergency

This resolve provides for legislative approval of Chapter 6: Delegation of Nursing Activities and Tasks to Unlicensed Assistive Personnel by Registered Professional Nurses, a major substantive rule of the State Board of Nursing.

LD 2167 - *Resolve, Regarding Legislative Review Of Portions Of Chapter 100: Enforcement Procedures, A Major Substantive Rule Of The Maine Health Data Organization* Resolve, Chapter 138 — Emergency

This resolve adopts Chapter 100 of the MHDO rules which establishes a schedule of fines and other enforcement actions for failure to file clinical, quality, financial, organizational information, health care claims and prescription drug price data; failure to pay the annual assessment; and for intentional or knowing failure to protect the disclosure of confidential or privileged data. This rule change is necessary to comply with the enforcement requirements in PL 2023, Chapter 584, (LD 1740, "*An Act to Protect a Patient's Access to Affordable Health Care with Timely Access to Health Care Prices*").

New Laws

LD 2189 - *An Act To Require Prior Notification Of Closures Of Labor And Delivery Units And Changes In Maternity Or Newborn Care Services By Hospitals* Public Law 2025, **Chapter 606 — Emergency**

This law requires a hospital to provide at least 120 days' notice to DHHS prior to the termination of maternity or newborn care services or of a change in the level of care a hospital provides for maternity and newborn care services. It essentially makes existing DHHS voluntary guidelines mandatory.

LD 2201 - *An Act To Implement Certain Recommendations Related To The Regulatory Review And Approval Of Certain Health Care Transactions Involving Private Equity Companies, Hedge Funds Or Management Services Organizations From The Commission To Evaluate The Scope Of Regulatory Review And Oversight Over Health Care Transactions That Impact The Delivery Of Health Care Services In The State* **Public Law, Chapter 690**

This law establishes a review process for transactions involving private equity firms, hedge funds, or related management services organizations acquiring ownership or control of health care entities. It excludes dental-only providers from the definition of “health care entity,” effectively exempting dental practice transactions, and also exempts independent provider practices with six or fewer providers. The law makes proprietary information submitted during the review process confidential, subject to limited disclosure conditions, and clarifies that this review runs concurrently with certificate of need reviews. It expands the scope of review to include financial impacts such as sale-leaseback arrangements and post-transaction debt levels. It removes an assessment on insurers, increases allowable filing fees, and requires that implementing rules be treated as major substantive rules subject to legislative approval.

It also revises reporting requirements by shifting to a one-time report (with follow-up after transactions), reducing certain reporting obligations, limiting some data collection to hospitals, protecting certain business identifiers as confidential, and expanding reporting exemptions for smaller provider practices.

Health and Human Services Committee (22 new laws)

LD 145 - *An Act To Provide Funding To The Office Of Aging And Disability Services To Support The Long-term Care Ombudsman* Public Law 2025, **Chapter 741**

This law provides one-time funding in the Office of Aging and Disability Services Central Office program to support the delivery of long-term care ombudsman services in Aroostook County.

LD 721- *Resolve, To Support The Full Implementation Of Certified Community Behavioral Health Clinics In The State* Resolve 2025, **Chapter 170**

This Resolve provides funding to DHHS to support certified community behavioral health centers by enhancement of the department's special certified community behavioral health clinic funding in a manner

New Laws

that enables the department to access the designated enhanced federal match for the program.

LD 1216 - *An Act to Improve Behavioral Health Crisis Services and Suicide Prevention Services* Public Law 2025, **Chapter 610**

As enacted, this law repeals a section of law that requires crisis intervention services in 4 counties and replaces it with a requirement for crisis intervention support services to be made available by the Department of Health and Human Services in all 16 counties in the State. It requires that a community-based telephone crisis intervention hotline be provided by crisis intervention support services. The hotline must coordinate with the national 9-8-8 suicide and crisis lifeline.

LD 1277 - *An Act Regarding Controlled Substances Prescription Monitoring Activities* Public Law 2025, **Chapter 760**

As enacted, this law removes anabolic steroids from the definition of "controlled substance" in the laws governing controlled substances prescription monitoring, rather than testosterone.

LD 1426 - *Resolve, To Expand Child Assertive Community Treatment* Resolve, **Chapter 119 — Emergency**

This resolve requires that, by March 1, 2026, the Department of Health and Human Services issue 1 request for proposals for pilot programs to develop child assertive community treatment teams.

LD 1583 - *An Act Regarding Home Health Care Services Ordered By A Physician Licensed Outside Of Maine* Public Law 2025, **Chapter 567**

As enacted, this law allows physicians who are licensed out of state issuing orders in this State are limited to home health care services, but not hospice. It provides that home health care providers who provide services to patients that have orders from a physician licensed in another state must be certified by CMS, in addition to being licensed by the Department of Health and Human Services.

It provides that an order for home health care services from a physician licensed in another state is limited to 90 days. It clarifies that the physician licensed in another state may provide telehealth services only to the patient for which the order has been issued.

It clarifies that the physician licensed in another state may order services only from a home health care provider that is certified by CMS and may only order services while the patient is receiving those services from such a provider. It clarifies that a physician licensed in another state is exempt from licensure by the Maine Board of Licensure in Medicine or the Maine Board of Osteopathic Licensure for this limited purpose. A physician who violates this limited exemption may lose the exemption.

New Laws

LD 1677 - *An Act To Establish The Alzheimer's Disease And Related Dementias Prevention And Support Program* Public Law 2025, **Chapter 507**

This law establishes the Alzheimer's Disease and Related Dementias Prevention and Support Program, which the Maine Center for Disease Control and Prevention must administer, within existing resources, in consultation with the Department of Health and Human Services, office of aging and disability services.

LD 1772 - *An Act To Establish The Fund For A Healthy Maine Stabilization Fund* Public Law 2025, **Chapter 641 — Emergency**

As enacted, this law establishes the Fund for a Healthy Maine Stabilization Fund as a sub-account of the Fund for a Healthy Maine. It requires the State Controller to credit all non-participating manufacturer adjustments received for 2026 and 2027, 10% of non-participating manufacturer adjustments received for 2028 and thereafter, and a proportional share of interest or other investment income on balances in the Fund for a Healthy Maine. It provides that funds shall be used to support the work of the Maine Commission on Public Health and Prevention, support the development, publication and promotion of a comprehensive state health plan, and eliminate the need for the working capital advance. If the need for a working capital advance or use of settlement payments in the fiscal year in which they are received is not eliminated by April 2028, any funds in the stabilization fund remaining in subsequent years must be used to reduce reliance on these two sources until all settlements payments can be allocated to the fiscal year following the year in which they are received. Any remaining funds may be used for health promotion activities allowable within the Fund for a Healthy Maine and may not be transferred out of the Fund for a Healthy Maine.

It also establishes the Maine Commission on Public Health and Prevention for the purpose of assisting and advising the Legislature on matters involving public health and prevention and assisting the Maine Center for Disease Control with the development, publication and promotion of a state health plan. The Commission is funded by the Healthy Maine Stabilization Fund and overseen by the joint standing committee of the legislature with jurisdiction over matters related to public health.

LD 1989 - *An Act To Increase Access To The Progressive Treatment Program Fund* Public Law 2025, **Chapter 576 — Emergency**

As enacted, this law changes eligibility for reimbursement from the Progressive Treatment Program Fund by replacing the term "private entities" with a list of individuals eligible to receive reimbursements, including the superintendent or chief administrative officer of a private psychiatric hospital, the director of an ACT team, a private medical practitioner, a law enforcement officer or the legal guardian of the patient who is the subject of an application to a progressive treatment program. It also allows reimbursement for legal costs incurred to extend an existing progressive treatment program.

New Laws

It adds language stating that a private attorney representing an individual eligible to receive funds may also be reimbursed. It changes the cap for reimbursement from the fund from \$800 to an annual cap of \$3,500. It adds language stating that reimbursement is subject to available funds.

LD 2011 - *An Act To Remove The Mainecare Program From The Prescription Drug Benefit Provisions In The Maine Insurance Code* Public Law 2025, **Chapter 561**

This law removes the MaineCare program from the definition of "carrier" for the purposes of the law governing health plans that provide prescription drug benefits under the Maine Insurance Code.

LD 2019 - *An Act To Amend The Laws Governing Licensure Of Wholesalers And Manufacturers Under The Maine Pharmacy Act* Public Law 2025, **Chapter 544 — Emergency**

This law modifies the initial licensure qualifications for prescription drug manufacturers and wholesalers by allowing an applicant to apply for licensure before the applicant has obtained a registration number from the appropriate federal agencies but requires that a manufacturer or wholesaler licensed in this State file the applicable registration numbers with the Maine Board of Pharmacy once the registration numbers are obtained by the manufacturer or wholesaler. The law also provides that the board may deny a license, refuse to renew a license or impose disciplinary sanctions if the manufacturer or wholesaler fails to file the applicable registration numbers with the board once the registration numbers are obtained.

LD 2074 - *An Act To Update The Requirements For Social Worker Licensure* Public Law 2025, **Chapter 584 — Emergency**

This law changes the licensure requirements for social workers. It enacts definitions of conditional licensure categories, identifies qualifying degrees for licensure, streamlines the qualifications for licensure specific to consultation and social work experience requirements, removes requirements for initial licensure that have created barriers to entering or re-entering the social work profession, clarifies the consultant eligibility, removes the 2-tiered system for eligibility for Department of Health and Human Services social workers and social workers who are not employees of the department and expands the State Board of Social Worker Licensure's authority to consider consultation and social work experience gained in this State or another jurisdiction when seeking initial licensure, late renewal or reinstatement of licensure. The law also requires DPFR to continue to examine the existing statutory and regulatory regime for potential future changes.

LD 2083 - *An Act To Expand Access To Certified Residential Medication Aide Training* Public Law 2025, **Chapter 574**

This law directs the Department of Health and Human Services to issue a certificate to an individual who has successfully completed a department-approved certified residential medication aide course that meets the medication administration training requirements for unlicensed assistive personnel in accordance with

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rules established by the department for certain facilities. It also requires the department to review the course curriculum at least every 5 years and allows the department to establish by rule certification fees and sanction fees for certified residential medication aides and instructors.

LD 2103 - *An Act Requiring Hospitals To Adopt Cybersecurity Plans* Public Law 2025, Chapter 668

As enacted, this law requires hospitals, beginning January 1, 2027, to adopt a cybersecurity plan that is consistent with best practices established by the United States Department of Homeland Security, Cybersecurity and Infrastructure Security Agency; the United States Department of Commerce, National Institute of Standards and Technology; and the Health care and Public Health Sector Coordinating Council or its successor organization. It establishes requirements regarding testing and revising such plans, training of employees, post-incident review, auditing and confidentiality.

LD 2105 - *An Act To Update Maine's Mandated Reporting Laws* Public Law 2025, Chapter 667

As enacted, this law replaces the list of mandated reporters of child abuse and neglect with a list that consolidates categories of mandated reporters and removes some from the list. It also requires that mandated reporters make a report within a 24-hour period.

It keeps the current statutory structure of mandated reporters in institutions, agencies or facilities to use the designated agent system, although the person with first-hand information about suspected child abuse or neglect must make the report whenever possible. The institution, agency or facility may establish internal procedures to facilitate reporting. The amendment also clarifies that a person required to report may seek consultation to determine if a report is required.

The law also clarifies section 4021 does not limit the authority of an appropriate licensing board of a mandated reporter to take action for a violation of the mandated reporter requirements in statute.

LD 2108 - *An Act To Establish The Suicide Mortality Review Panel* Public Law 2025, Chapter 586 — Emergency

This law establishes the Suicide Mortality Review Panel, which is a multidisciplinary panel established to review the trends in deaths by suicide of all residents of the State. The panel is charged with reviewing records of cases of confirmed or suspected deaths by suicide and deaths recorded as undetermined in which suicide cannot be ruled out to identify strengths and weaknesses of the system of care and to recommend to the Commissioner of Health and Human Services ways to decrease the rate of deaths by suicide and improve the system for preventing death by suicide, including modifications to law, rules, training, policies and procedures. A report is required to be submitted by January 2nd of each year to

New Laws

the Governor, commissioner and the HHS Committee.

LD 2131 - *An Act To Preserve And Improve Access To Nursing Facility Services In The State* Public Law 2025, **Chapter 157 — Emergency**

As enacted, this Resolve requires the Department of Health and Human Services to amend its MaineCare rule, Section 67, Principles of Reimbursement for Nursing Facilities, as soon as practicable to require that the guardrails that are used in the 3-year transition to new reimbursement rates be adjusted for inflation. The Resolve also requires DHHS to convene a stakeholder group to examine issues related to the Nursing Facility Reform Transition Fund. The stakeholder group must submit a report, no later than January 15, 2027, to the HHS Committee. The committee is authorized to report out legislation related to the report.

LD 2154 - *An Act To Establish The Health Information Technology Fund To Support A State-designated Statewide Health Information Exchange* Public Law 2025, **Chapter 732**

As enacted, this law provides one-time funding from the Attorney General's Office to support the operations of a state-designated statewide health information exchange and to meet the State's matching fund requirements for available federal funding.

LD 2177 - *An Act To Update And Improve The Mainecare Reimbursement System* Public Law 2025, **Chapter 664**

As enacted, this law removes language stating that increases to reimbursement rates—whether through cost-of-living adjustments or rate reviews—are contingent on the availability of funding. It also requires the Department of Health and Human Services, when developing the annual schedule of rate determination, to include the date of the most recent rate review and any discussion of issues related to MaineCare member access.

LD 2200 - *An Act Relating To Noncompete Agreements Between Employers And Health Care Practitioners* Public Law 2025, **Chapter 718**

As enacted, this law prohibits an employer from requiring or permitting a health care practitioner to enter into a noncompete agreement with that employer if the care practitioner is employed by an entity in which the health care practitioner does not have an ownership interest.

It also requires that any grandfathered noncompete agreement between an employer and a health care practitioner that is enforceable must recognize an individual's right to choose the individual's own health care practitioner.

LD 2202 - *An Act To Require Notice To The Attorney General Prior To The Merger Of Certain Health Care Entities As Recommended By The Commission To Evaluate The Scope Of Regulatory Review And Oversight Over Health Care Transactions That Impact The Delivery Of Health Care Services In The State* Public Law

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2025, Chapter 661

This law requires a health care entity to provide notice to the Attorney General about a pending merger or acquisition at the same time the health care entity is required to notify the Federal Trade Commission or the United States Department of Justice, Antitrust Division in accordance with federal laws and regulations.

LD 2233 - *An Act To Combine The Board Of Licensure In Medicine And Board Of Osteopathic Licensure Into A Single Licensing Board For All Physicians And Physician Associates* PL 2025, **Chapter 738**

This law seeks to combine the Board of Licensure in Medicine and Board of Osteopathic Medicine into a single licensing board, known as the Maine Board of Medicine, for all physicians and physician associates effective January 1, 2027.

Labor Committee (5 new laws)

LD 54 - *An Act To Require Employers To Disclose Pay Ranges And Maintain Records Of Employees' Pay Histories*

Public Law 2025, **Chapter 771**

This law requires an employer with 10 or more employees to include on a job posting a statement that lists the prospective range of pay the employer will offer to a successful applicant. The bill also requires an employer, upon request of an employee, to disclose the range of pay it offers for the position the employee holds and requires the employer to maintain a record of each position held by an employee and the employee's pay history during the employee's employment and for 3 years after the employee's termination of employment.

LD 61 – *An Act To Regulate Employer Surveillance To Protect Workers* Public Law 2025, **Chapter 524**

This law specifies that an employer may use employer surveillance only if the employer informs the employee before beginning employer surveillance. It prohibits an employer from using audiovisual monitoring in an employee's residence or personal vehicle or on the employee's property unless the audiovisual monitoring is required by the employer for duties of the job. It provides that an employee can decline a request by an employer to install data collection or transmission applications on the employee's personal electronic devices for the purposes of employer surveillance. Employers must also supply notice annually to all employees.

LD 1587 - *An Act To Clarify The Bureau Of Labor Standards' Investigatory And Enforcement Procedures* Public Law 2025, **Chapter 568**

As enacted, this law greatly expands the Department of Labor's investigatory powers. It provides the Director of Labor Standards within the Department of Labor the authority to conduct an investigation when

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the director believes a person or employer has violated any provision of Title 26, chapter 7 or 15. The amendment also provides the penalties the director may order if it is determined that a violation has occurred and authorizes the director to issue a notice of levy if the person or employer charged with a violation fails to pay. The amendment also requires persons or employers to prominently post in the workplace the notices of violation issued for a violation and requires the person or employer to notify employees if a notice of violation covers a defined period of time.

LD 2018 - *An Act To Amend The Requirements Governing Self-insurance Plans In The Paid Family And Medical Leave Benefits Program* Public Law 2025, **Chapter 686**

This law specifies that, under the law governing paid family and medical leave, the Department of Labor, with respect to a private plan in the form of self-insurance, may not allow the pooling of risk among multiple employers. It requires the department, with respect to a private plan in the form of self-insurance, must allow multiple employers to share the costs of legal, accounting and 3rd-party administrator expenses as long as the arrangements do not result in pooling of risk.

LD 2110 - *An Act To Update Employer Substance Use Testing Policy Requirements* Public Law 2025, **Chapter 666**

This law updates and clarifies certain statutes governing employers administering substance use tests, including the following: 1. Requiring that an applicant or employee must be given an opportunity to contest a non-negative result; 2. Requiring that results must be reported to an employer by a medical review officer; 3. Reducing the rehabilitation program opportunity based on a confirmed positive result from 6 months to 12 weeks and placing the sole responsibility of the cost on the employee; 4. Requiring that testing laboratories be able to process blood tests; 5. Allowing an employer that complies with the requirements governing testing facilities to be considered a qualified testing laboratory to collect samples from employees; and 6. Making other technical changes.

OTHER COMMITTEES

APPROPRIATIONS:

LD 705 - *An Act To Correct Technical Errors In Public Law 2025, Chapter 650* Public Law 2025, **Chapter 752**

This law is a small clean-up bill for the supplemental budget bill.

LD 2212 – Supplemental Budget Public Law 2025, **Chapter 650**

New Laws

CRIMINAL JUSTICE AND PUBLIC SAFETY:

LD 245 - *An Act To Implement The Recommendations Of The Blue Ribbon Commission To Study Emergency Medical Services In The State* Public Law 2025, **Chapter 520 — Emergency**

This law does a number of things. 1. It establishes a Maine Emergency Medical Services Commission. 2. It mandates that municipalities adopt a plan stipulating the method by which transporting emergency medical services will be delivered within the municipality. 3. It directs Maine EMS to conduct a funding needs analysis for regionalization of EMS services. 4. It directs Maine EMS to submit draft legislation that would implement the MaineEMS Two Year Action Plan from October 2023. 5. It directs MaineEMS to develop, as resources allow, a PR campaign for EMS services. 6. It reduces the MaineEMS Board from 26 members to 18 members.

LD 496 - *An Act Regarding The Issuance Of Silver Alerts* Public Law 2025, **Chapter 709**

This law requires that Silver Alerts be issued to all hospitals and homeless shelters in the State and to a statewide association of libraries.

LD 2132 - *An Act To Amend The Maine Emergency Medical Services Act Of 1982 To Modify Penalties For Unauthorized Operation Or Practice Of Emergency Medical Services, To Direct Maine Emergency Medical Services To Evaluate Improvements To Maine's Trauma System Reporting And To Make Certain Technical Changes* Public Law 2025, **Chapter 693**

This law adds a definition for "emergency medical services educator" and removes from the bill a provision requiring physicians and hospitals to report trauma information to the Emergency Medical Services' Board. Current law permits physicians and hospitals to report trauma information to the board. The law also requires the Director of Maine Emergency Medical Services to convene the State Trauma Prevention and Control Advisory Committee to evaluate opportunities to enhance the State's trauma care system and to share uniform quality data as it relates to injury-related incidents. By September 1, 2027, the director must submit a report with the findings of the advisory committee to the Legislature.

JUDICIARY:

LD 2032 - *An Act To Amend The Extreme Risk Protection Order Procedure* Public Law 2025, **Chapter 545 — Emergency**

This law amends the laws governing extreme risk protection orders by adding the requirement that a copy of the judicial endorsement and all attachments be provided to the court. Current law requires that a copy of the notification to the restricted person including the date of notification be provided to the court.

LD 882 - *An Act To Protect Communication With Providers Of Critical Incident Stress Management And Peer Support* Public Law 2025, **Chapter 678**

New Laws

This law defines “peer support” as a distinct service from critical incident stress management (CISM) and expands confidentiality protections to cover communications related to both services. It broadens the scope of protected communications to include those involving “affected persons,” defined as members or employees of organizations providing safety or emergency response services. The law designates communications with both peer support providers and CISM providers as confidential. It allows disclosure of otherwise confidential information when required by law or when there is a reasonable belief that an individual poses a danger to themselves or others. The law repeals existing law governing critical incident stress management teams. It establishes training requirements for peer support personnel based on nationally recognized standards, such as those from firefighter and police associations. Finally, it removes prior requirements related to training standards set by the Commissioner of Public Safety for certain volunteer coordinators.

LD 2106 - An Act To Limit Consent For Entry Into Nonpublic Areas Of And To Limit Access To Protected Records Maintained By Certain Public Entities Public Law 2025, **Chapter 770**

This law directs the Attorney General to develop model policies to help certain public facilities, including hospitals, remain safe and accessible regardless of immigration status. The policies are intended to limit voluntary cooperation with immigration enforcement, particularly access to nonpublic areas and sensitive records, to the fullest extent allowed by law. The law prohibits staff at covered facilities from voluntarily allowing law enforcement access to nonpublic areas or protected records for immigration enforcement unless required by law or court order. It also provides a good-faith exception for actions taken before the policies are formally adopted. Finally, when federal law requires inspections or interviews related to immigration or employment eligibility, facilities must provide access in designated areas and comply with those legal requirements.

LEGISLATION WITH STUDIES

1. **LD 245**— EMS Funding (Page 18).
2. **LD 697**— Prescription Drugs (Page 5).
3. **LD 2131**— Nursing Home Funding (Page 15).
4. **LD 2132**— Trauma Reporting (Page 18).



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