



## MOA 131<sup>st</sup> Legislative Session Priority Bill Tracker

Status as of 06/29/2023

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">51</a>	An Act to Restore Religious and Philosophical Exemptions to Immunization Requirements	DEAD	Public Law 2019, chapter 154 removed the exemption from immunization requirements	<a href="#">Dr. Hermann</a>
<a href="#">59</a>	An Act to Prohibit Inclusion of the COVID-19 Vaccine in the Universal Childhood Immunization Program	DEAD	This bill prohibits the inclusion of any vaccine for COVID-19 on the list of vaccines available through the Universal Childhood Immunization Program.	<a href="#">MIC Testimony</a>
<a href="#">129</a>	Resolve, to Direct the University of Maine System to Study the Feasibility of Establishing a Public Allopathic Medical School in Penobscot County	<a href="#">PASSED, on appropriations table</a>	This amendment, which is the majority report of the committee, replaces the bill. It directs the University of Maine System to study the feasibility of establishing a public allopathic medical school in Penobscot County and make specific recommendations in its report. It also directs the University of Maine System to coordinate with a tertiary care hospital medical education program in Penobscot County and solicit the advice, participation or testimony of other organizations. The amendment requires the University of Maine System to report to the joint standing committee of the Legislature having jurisdiction over education matters by November 6, 2024. The joint standing committee may report out legislation to the 132nd Legislature in 2025	<a href="#">Austin Vaughan, OMS</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">160</a>	An Act to Amend the Laws Governing Practicing Chiropractic Without a License	DEAD	This bill amends the laws governing practicing chiropractic without a license to include a prohibition on an individual using the title "chiropractic physician" without having complied with the provisions of law relating to the licensing of the practice of chiropractic.	<a href="#">Dr. Hermann</a>
<a href="#">162</a>	An Act to Establish a Substance Use Disorder Hotline and Consultation and Clinical Supervision Program	<a href="#">Resolve signed by the Gov 06/22/23</a>	This amendment replaces the bill with a resolve. It requires the Department of Health and Human Services to develop a plan to implement a hotline through the Maine Substance Use Disorders Learning Community to assist and provide guidance to primary care physicians and other providers in providing care to patients with substance use disorder. The department is required to consult with stakeholders, including members of the CoOccurring Collaborative Serving Maine currently partnering with the department to operate the Maine Substance Use Disorders Learning Community, and to study existing models in other states. The department is required to submit a report and plan to the Joint Standing Committee on Health and Human Services no later than January 15, 2024. The plan must include funding requirements, services that would be provided, hours of operation, 12 response times and any other relevant information to implement a hotline.	N/A
<a href="#">172</a>	An Act to Allow Health Care Workers to Return to Work by Reinstating Exemptions from Immunization Requirements	DEAD	This bill reinstates the religious and philosophical exemptions from immunization requirements for health care workers.	<a href="#">Dr. Hermann</a>
<a href="#">549</a>	An Act Regarding a Discovery Rule for the Statute of Limitations for Cases of Medical Negligence	DEAD	This bill provides that the statute of limitations does not begin to run on any medical malpractice claim, regardless of whether the claim is based on the leaving of a foreign object in the body, until the plaintiff discovers or reasonably should have discovered the harm.	<a href="#">Joint Testimony with MMA</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">601</a>	An Act to Reduce the Shortage of Municipal Emergency Medical Services Personnel by Removing Certain Vaccination Requirements	On Unfinished business in House Calendar #10 pending acceptance of either report	This bill allows emergency medical services persons to provide treatment within the scope of their licenses without having been vaccinated against the COVID-19 virus or the influenza virus.	<a href="#">Dr. Hermann</a>
<a href="#">722</a>	An Act to Expedite the Health Insurance Referral Process for Specialists by Allowing Referrals from Urgent Care Facilities	<a href="#">Signed into Public Law 06/01/23 with amendments</a>	This amendment replaces the bill and changes the title. The amendment prohibits a health insurance carrier from denying payment for any behavioral health care service or physical therapy service covered under an enrollee's health plan based solely on the basis that the enrollee's referral was not made by the enrollee's primary care provider as long as the enrollee's referral is made by a provider during an urgent care visit and the provider notifies the enrollee's primary care provider of the referral. The requirements apply beginning January 1, 2024.	<a href="#">Dr. Hurdle</a>
<a href="#">899</a>	An Act to Authorize Vaccine Administration by Pharmacy Technicians and Reduce Vaccine Administration Training Requirements for Pharmacists	<a href="#">Signed into Public Law 06/22/23 with amendments</a>	This amendment replaces the bill. The amendment authorizes pharmacy technicians to administer vaccines under the direct supervision of a pharmacist if they have met certain specified training requirements and have been issued a certification of administration by the Maine Board of Pharmacy. The amendment authorizes a fee to be established for the certificate of administration. The amendment also clarifies the timing of when drug or vaccine administration training requirements must be completed by pharmacists. This amendment replaces the bill. The amendment authorizes pharmacy technicians to administer vaccines under the direct supervision of a pharmacist if they have met certain specified training requirements and have been issued a certification of administration by the Maine Board of Pharmacy. The amendment authorizes a fee to be established for the certificate of administration. The amendment also clarifies the timing of when drug or vaccine administration training requirements must be completed by pharmacists.	<a href="#">Dr. Carroll</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">904</a>	An Act Supporting the Rural Health Care Workforce in Maine	<a href="#">PASSED, on appropriations table</a>	This amendment adds supporting the expansion of rural primary care clinical rotations for physician assistant students to the allowable uses of the fund established in the bill. It also directs the Department of Health and Human Services to prioritize health professional shortage areas or medically underserved areas or populations identified by the federal Department of Health and Human Services, Health Resources and Services Administration	<a href="#">Dr. Carreiro UNE COM Testimony</a>
<a href="#">934</a>	An Act to Amend the Laws Governing Damages Awarded for Wrongful Death,	<a href="#">PASSED with amendments</a>	This amendment, which is the majority report of the committee, increases the limit on damages for the loss of comfort, society and companionship and emotional distress in a case of wrongful death from \$750,000 in current law to \$1,000,000, instead of to \$1,500,000 as proposed in the bill, and provides for that amount to be adjusted based on inflation calculated in relation to the consumer price index. It also increases the limit on punitive damages from \$250,000 in current law to \$500,000, instead of to \$1,000,000 as proposed in the bill. The amendment also, like the bill, increases from 2 years to 3 years the time after the decedent's death within which a wrongful death action may be commenced.	<a href="#">MMA MOA Joint Testimony</a>
<a href="#">1035</a>	An Act to Adjust Reimbursement for Chiropractic Services	DEAD	This bill requires health insurers to provide the same benefits for chiropractic services as other similar services and requires health insurers to make available to chiropractors quality or performance measures used to establish rates of reimbursement.	N/A

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">1052</a>	An Act to Expand Good Samaritan Protections for Naloxone Hydrochloride Administration	<a href="#">Signed into Public Law 06/12/23 with amendments</a>	This amendment does the following.1. It clarifies language by changing the word "listed" to "described." 2. It adds language clarifying that a person provided immunity under the bill, with respect to the provision or administration of naloxone hydrochloride, is a person who is not otherwise authorized to possess, obtain, store, administer or dispense naloxone hydrochloride under current law.	<a href="#">Tori Stierwalt, OMS</a>
<a href="#">1098</a>	An Act to Restore Religious and Philosophical Exemptions Regarding Immunization Requirements	DEAD	This bill reinstates the religious and philosophical exemptions.	<a href="#">Dr. Hermann</a>
<a href="#">1209</a>	An Act to Reinstates the Religious and Philosophical Vaccine Exemptions for Private Schools and Virtual Public Charter Schools	DEAD	This bill reinstates the religious and philosophical exemptions for students enrolled in private schools or virtual public charter schools.	<a href="#">Dr. Hermann</a>
<a href="#">1215</a>	An Act to End the Sale of Flavored Tobacco Products	On Unfinished business in House Calendar #10 pending acceptance of either report	This bill prohibits the sale and distribution of flavored tobacco products, including flavored cigars and electronic smoking devices.	<a href="#">N/A</a>
<a href="#">1323</a>	An Act to Amend the Opioid Education Requirements	DEAD	This bill reduces the number of hours of continuing education on the prescription of opioid medication a health care provider who prescribes opioid medication must complete from 3 hours every 2 years to one hour every 2 years.	<a href="#">MOA Testimony</a>
<a href="#">1360</a>	An Act Requiring Training Regarding and Screening for Adverse Childhood Experiences	On Unfinished business in House Calendar #10 pending	This bill requires a health care provider licensed under the Maine Revised Statutes, Title 32, chapter 31, 36 or 48 to receive training on adverse childhood experiences and resources in the State for survivors of domestic violence and sexual assault	N/A

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
		acceptance of either report		
<a href="#">1400</a>	An Act to Allow Social Workers to Diagnose Organic Mental Illnesses	<a href="#">Signed by Gov into law 06/26/2023</a>	This amendment clarifies the provision of the bill that removes the prohibition on social workers' diagnosing organic mental illness and adds an emergency preamble and emergency clause to the bill.	N/A
<a href="#">1407</a>	An Act to Amend the Maine Insurance Code Regarding Payments by Health Insurance Carriers to Providers	Carry Over Requested	This bill amends the Maine Insurance Code.	<a href="#">MOA Testimony</a>
<a href="#">1453</a>	An Act to Amend the Physical Therapist Practice Laws	<a href="#">Signed by Gov into law 06/26/23 after amendments</a>	This amendment makes changes to the conditions under which a physical therapist must refer a patient to an advanced practice registered nurse, certified nurse midwife, physician assistant, naturopathic doctor or a licensed doctor of medicine, osteopathy, podiatry, dentistry or chiropractic. The amendment also provides that the authority to request criminal history record information for an applicant for a license as a physical therapist or physical therapist assistant from the Federal Bureau of Investigation is contingent on approval and authorization from the federal Department of Justice.	N/A
<a href="#">1496</a>	An Act to Prohibit Noncompete Clauses	CARRY OVER	This bill prohibits an employer from requiring or permitting an employee to enter into a noncompete agreement with the employer, regardless of the amount of the employee's earned wages.	<a href="#">Dr. Sharkey &amp; Dr. Gurenlian</a>
<a href="#">1498</a>	An Act to Create an Advocacy and Complaint Process for Health Care Providers Within the Bureau of Insurance	CARRY OVER	This bill establishes the Health Care Provider Assistance Division within the Department of Professional and Financial Regulation, Bureau of Insurance	<a href="#">MOA Testimony</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">1547</a>	An Act to Temporarily Prohibit the State from Mandating COVID-19 Vaccinations	DEAD	This bill prohibits mandatory vaccinations for COVID-19 for 5 years from the date of a vaccine's first emergency use authorization by the United States Department of Health and Human Services, Food and Drug Administration in order to allow for safety testing and investigations into reproductive harm.	<a href="#">Dr. Hermann</a>
<a href="#">1598</a>	An Act to Allow an Exception to Immunization Requirements for Health Care Workers for Vaccines Approved Under Emergency Use Authorization	DEAD	This bill allows an exemption from immunization requirements for health care workers	<a href="#">Dr. Hermann</a>
<a href="#">1619</a>	An Act to Improve Maine's Reproductive Privacy Laws	<a href="#">PASSED</a>	This amendment, which is the majority report of the committee, clarifies that an abortion may be performed after viability only when the abortion is necessary in the professional judgment of a licensed physician. In making this professional judgment, the physician must apply the applicable standard of care. The amendment also clarifies that a person who performs an abortion without being licensed as a physician, physician assistant or advanced practice registered nurse may be subject to criminal prosecution for committing the Class E crime of unlicensed practice of medicine and may also be subject to additional civil or criminal penalties under other provisions of law.	<a href="#">Dr. McDonald</a>
<a href="#">1639</a>	An Act to Address Unsafe Staffing of Nurses and Improve Patient Care	On Unfinished business in House Calendar #10 pending acceptance of either report	This bill establishes the Maine Quality Care Act in order to ensure adequate direct-care registered nurse staffing assignments in health care facilities, including hospitals, freestanding emergency departments and ambulatory surgical facilities, to provide safe and effective patient care. It establishes minimum direct-care registered nurse staffing requirements based on patient care unit and patient needs, specifies the method to calculate a health care facility's compliance with the staffing requirements, protects direct-care registered nurses from retaliation and includes notice, record-keeping and enforcement requirements.	<a href="#">MHA Coalition Ad</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">1735</a>	An Act to Safeguard Gender-affirming Health Care	CARRY OVER	This bill prohibits the enforcement of an order based on another state's law authorizing a child to be removed from the child's parent or guardian based on that parent or guardian allowing the child to receive gender-affirming health care or gender-affirming mental health care.	N/A
<a href="#">1736</a>	An Act to Advance the National HIV/AIDS Strategy in Maine by Broadening HIV Testing	<a href="#">Signed by Gov into law 06/23/23</a>	This amendment is the majority report of the committee and replaces the bill. The amendment requires a health care provider to include an HIV test in the standard set of medical tests performed on an individual with a possible sexually transmitted disease or infection.	<a href="#">Dr. Hermann</a>



Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">1797</a>	An Act to Expand Maine's Health Care Workforce by Expanding Educational Opportunities and Providing Tax Credits	<a href="#">PASSED, on appropriations table</a>	<p>This amendment does the following.</p> <ol style="list-style-type: none"> <li>1. It provides for \$1,000,000 appropriations in fiscal years 2023-24 and 2024-25 to the nursing education loan repayment program.</li> <li>2. It establishes the Maine Health Care Education Training and Medical Residency Fund as a 2-year pilot program and appropriates \$2,500,000 in fiscal years 2023-24 and 2024-25 to the fund to establish clinical training opportunities for 3rd-year and 4th-year medical students in the rural parts of the State.</li> <li>3. It provides for \$2,000,000 appropriations in fiscal years 2023-24 and 2024-25 to the Maine Health Care Provider Loan Repayment Program Fund.</li> <li>4. It provides for \$1,000,000 appropriations in fiscal years 2023-24 and 2024-25 to the Doctors for Maine's Future Scholarship Fund.</li> <li>5. It removes from the bill the new income tax credit of up to \$500 a year for new nurses, for 3 years per eligible nurse, for employment in a licensed health care facility in the State.</li> <li>6. It removes from the bill the \$300,000 in ongoing annual appropriations to support incentives for clinical preceptorships</li> </ol>	<a href="#">Austin Vaughan, OMS</a>

Bill #	Title	Status, with link to final text	Final text Summary	MOA Testimony
<a href="#">1964</a>	An Act to Implement the Recommendations of the Commission to Develop a Paid Family and Medical Leave Benefits Program	<a href="#">PASSED, on appropriations table (Gov has indicated she will sign)</a>	<p>This amendment is the majority report of the committee. The amendment changes the title and makes the following changes to the bill.</p> <ol style="list-style-type: none"> <li>1. It establishes minimum criteria for the evaluation of proposals if the Department of Labor uses a competitive bidding process to contract with a 3rd party for claims administration for the paid family and medical leave benefits program.</li> <li>2. It authorizes a tribal government to elect to participate in the program.</li> <li>3. It clarifies the definition of "wages."</li> <li>4. It clarifies the definition of "qualifying exigency" related to a request for leave necessitated by a family member's active military service.</li> <li>5. It reduces the maximum amount of family leave and medical leave that an individual may take in a year from 16 weeks to 12 weeks.</li> <li>6. It reduces the maximum weekly benefit amount from 120% of the state average weekly wage to 100% of the state average weekly wage and provides that the determination of the weekly benefit amount is calculated in a manner to ensure that an individual receives wage replacement at a rate of 90% for the portion of the covered individual's average weekly wage that is equal to or less than 50% of the state average weekly wage and at a rate of 66% for that portion of the covered individual's average weekly wage that is more than 50% of the state average weekly wage up to the maximum weekly benefit.</li> <li>7. Except for an employee who has not been employed for at least 120 days, the amendment provides that an employee is entitled to the same position or an equivalent position upon return to work from family leave or medical leave.</li> <li>8. Absent an emergency, illness or other sudden necessity for taking leave, the amendment requires an employee to give reasonable notice to the employee's supervisor of the employee's intent to use leave and specifies that use of leave must be scheduled to prevent undue hardship on the employer.</li> <li>9. It makes changes to the membership of the Paid Family and Medical Leave Benefits Authority, provides that the authority owes a fiduciary duty to the program and requires the initial appointment of members no later than January 1, 2024.</li> <li>10. It makes technical changes regarding the administration and oversight of the program.</li> <li>11. It requires the State Controller to transfer \$12,000,000 on or before October 31, 2023 and \$13,000,000 on or before July 31, 2024 from the unappropriated surplus of the General Fund to the department to provide funds for the initial start-up costs of the program. It also adds an appropriations and allocations section.</li> </ol>	<a href="#">N/A</a>