



# 132nd MAINE LEGISLATURE

## SECOND REGULAR SESSION-2026

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**Legislative Document**

**No. 2105**

H.P. 1420

House of Representatives, January 7, 2026

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### **An Act to Update Maine's Mandated Reporting Laws**

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Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in black ink that reads "R. B. Hunt".

ROBERT B. HUNT  
Clerk

Presented by Representative MEYER of Eliot.  
Cosponsored by Senator INGWERSEN of York.

1       **Be it enacted by the People of the State of Maine as follows:**

2           **Sec. 1. 10 MRSA §8003-B, sub-§2-A, ¶D**, as amended by PL 2001, c. 345, §1, is  
3       further amended to read:

4           D. The disclosure is necessary under Title 22, section 4011-A 4011-D concerning  
5       reports of suspected child abuse or neglect; or

6           **Sec. 2. 18-C MRSA §9-304, sub-§1, ¶B**, as enacted by PL 2017, c. 402, Pt. A, §2  
7       and affected by PL 2019, c. 417, Pt. B, §14, is amended by amending subparagraph (6) to  
8       read:

9           (6) Information obtained pursuant to this paragraph is confidential. The results of  
10      background checks received by the court are for official use only and may not be  
11      disseminated outside the court except as required under Title 22, section 4011-A  
12      4011-D.

13           **Sec. 3. 20-A MRSA §13004, sub-§2-A, ¶B**, as amended by PL 2017, c. 235, §3  
14       and affected by §41, is further amended by amending subparagraph (5) to read:

15           (5) Report child abuse or neglect under Title 22, section 4011-A 4011-D.

16           **Sec. 4. 22 MRSA §3028, sub-§7**, as amended by PL 2013, c. 113, §10, is further  
17       amended by amending the first blocked paragraph to read:

18           If an investigator reports suspected abuse, neglect or exploitation to the Chief Medical  
19       Examiner, the Chief Medical Examiner, by reporting that information to the department on  
20       behalf of the investigator, fulfills the medical examiner's mandatory reporting requirement  
21       under section 3477 or 4011-A 4011-D.

22           **Sec. 5. 22 MRSA §4002, sub-§6-A**, as enacted by PL 1985, c. 495, §16, is amended  
23       to read:

24           **6-A. Licensed mental health professional.** "Licensed mental health professional"  
25       means a psychiatrist, licensed psychologist, licensed clinical social worker ~~or~~, certified  
26       social worker or community service provider as defined in Title 5, section 20003,  
27       subsection 4.

28           **Sec. 6. 22 MRSA §4008, sub-§3, ¶L**, as amended by PL 2023, c. 151, §7, is further  
29       amended to read:

30           L. To a licensing board of a mandated reporter, in the case of a mandated reporter  
31       under section 4011-A, subsection 1 4011-D who appears from the record or relevant  
32       circumstances to have failed to make a required report. Any information disclosed by  
33       the department personally identifying a licensee's client or patient remains confidential  
34       and may be used only in a proceeding as provided by Title 5, section 9057, subsection  
35       6;

36           **Sec. 7. 22 MRSA §4009**, as enacted by PL 1979, c. 733, §18, is repealed.

37           **Sec. 8. 22 MRSA §4011-A**, as corrected by RR 2025, c. 1, Pt. B, §4, is repealed.

38           **Sec. 9. 22 MRSA §4011-C, sub-§2**, as enacted by PL 2025, c. 353, §5, is amended  
39       to read:

1           **2. Report.** When a health care provider suspects that an infant has been abused or  
2           neglected, the provider shall report to the department in accordance with section ~~4011-A~~  
3           4011-D, subsection 1, paragraph A. If the infant has a family care plan developed under  
4           section 4004-C, subsection 2, a copy of the family care plan must accompany the report.

5           **Sec. 10. 22 MRSA §4011-C, sub-§3**, as enacted by PL 2025, c. 353, §5, is amended  
6           to read:

7           **3. Definition.** For purposes of this section, "health care provider" means a person  
8           described in ~~section 4011-A, subsection 1, paragraph A, subparagraphs (1) to (10), (15),~~  
9           (17) to (20) and (22) licensed under Title 32, chapter 31, 36, 48, 56, 81 or 83 or any person  
10          who assists in the delivery or birth of a child for compensation, including, but not limited  
11          to, a midwife.

12          **Sec. 11. 22 MRSA §4011-D** is enacted to read:

13          **§4011-D. Reporting of suspected abuse or neglect**

14          **1. Required report to department.** A person who in the normal course of the person's  
15          professional duties interacts with children or with persons responsible for children shall  
16          report to the department at the first reasonable opportunity but no later than 48 hours if the  
17          person:

18           A. Suspects or has reason to believe that a child has been abused or neglected;  
19           B. Has knowledge of or observes a child being subjected to conditions that could likely  
20           result in abuse or neglect; or  
21           C. Knows or has reason to believe that a suspicious child death has occurred.

22          A person with first-hand information about the suspected child abuse or neglect must make  
23          the report.

24          An employer may not take any action to prevent or discourage an employee from making  
25          a report under this subsection.

26          **2. Required report to district attorney.** When a mandated report is made to the  
27          department under subsection 1, the department shall report to the appropriate district  
28          attorney's office any instance in which the reported child abuse or neglect or suspicious  
29          child death is caused by a person not responsible for the child.

30          **3. Disclosure to law enforcement officer.** Upon request of a law enforcement officer  
31          investigating a report of child abuse or neglect, a member of the staff of a public or private  
32          medical institution, agency or facility or person in charge of the institution, agency or  
33          facility or the designated agent who made a report pursuant to subsection 1 shall disclose  
34          to the law enforcement officer the same information the staff member or person reported  
35          to the department pursuant to subsection 1.

36          **4. Optional report.** Any person may make a report to the department if that person:

37           A. Suspects or has reason to believe that a child has been abused or neglected;  
38           B. Has knowledge of or observes a child being subjected to conditions that could likely  
39           result in abuse or neglect; or  
40           C. Knows or has reason to believe that there has been a suspicious child death.

1           **5. Mental health treatment.** When a licensed mental health professional is required  
2           to report under subsection 1 and the reportable information comes from the treatment of a  
3           person responsible for the child or the child who is the subject of the report, the licensed  
4           mental health professional may include in the licensed mental health professional's report  
5           a request that the department consider the impact of any resulting investigation or action  
6           on the licensed mental health professional's ongoing treatment of the person that is the  
7           subject of the report. The department shall take reasonable steps to engage with the  
8           licensed mental health professional to avoid impairing, to the extent possible, the licensed  
9           mental health professional's ongoing ability to treat the person involved in the report.

10           **6. Photographs of visible trauma.** Whenever a staff member of a law enforcement  
11           agency or hospital is required to report under subsection 1, the staff member shall make  
12           reasonable efforts to take, or cause to be taken, color photographs of any areas of trauma  
13           visible on a child.

14           A. The photographs must be taken with minimal trauma to the child and in a manner  
15           consistent with professional standards. The parent's or custodian's consent to the taking  
16           of photographs is not required.

17           B. Photographs must be made available to the department as soon as reasonably  
18           possible. The department shall pay the reasonable costs of the photographs from funds  
19           appropriated for child welfare services.

20           C. The staff member of a law enforcement agency or hospital shall notify the  
21           department as soon as reasonably possible if that person is unable to take, or cause to  
22           be taken, these photographs.

23           D. Designated agents of the department may take photographs of any subject matter  
24           when necessary and relevant to an investigation of a report of suspected abuse or  
25           neglect or to subsequent child protection proceedings.

26           **7. Permissive reporting of animal cruelty, abuse or neglect.** Notwithstanding any  
27           other provision of state law imposing a duty of confidentiality, a person required to report  
28           under subsection 1 may report a reasonable suspicion of animal cruelty, abuse or neglect  
29           to the local animal control officer or to the animal welfare program of the Department of  
30           Agriculture, Conservation and Forestry established pursuant to Title 7, section 3902. For  
31           purposes of this subsection, the reporter shall disclose only such limited confidential  
32           information as is necessary for the local animal control officer or animal welfare program  
33           employee to identify the animal's location and status and the owner's name and address.  
34           For purposes of this subsection, "cruelty, abuse or neglect" has the same meaning as in  
35           Title 34-B, section 1901, subsection 1, paragraph B. A reporter under this subsection may  
36           assert immunity from civil and criminal liability under Title 34-B, chapter 1, subchapter 6.

37           **8. Children under 6 months of age or otherwise nonambulatory.** A person required  
38           to make a report under subsection 1 shall report to the department if a child who is under 6  
39           months of age or otherwise nonambulatory exhibits evidence of the following:

40           A. Fracture of a bone;  
41           B. Substantial bruising or multiple bruises;  
42           C. Subdural hematoma;  
43           D. Burns;

1                   E. Poisoning; or

2                   F. Injury resulting in substantial bleeding, soft tissue swelling or impairment of an  
3                   organ.

4                   This subsection does not require the reporting of injuries occurring as a result of the  
5                   delivery of a child attended by a licensed medical practitioner or the reporting of burns or  
6                   other injuries occurring as a result of medical treatment following the delivery of the child  
7                   while the child remains hospitalized following the delivery.

8                   **9. Training requirement.** A person required to make a report under subsection 1  
9                   shall complete at least once every 2 years mandated reporter training approved by the  
10                   department.

11                   **Sec. 12. 22 MRSA §4021, sub-§3, ¶C**, as amended by PL 2023, c. 248, §3, is  
12                   further amended by amending the first blocked paragraph to read:

13                   Violation of this paragraph subjects any person involved in the violation, including  
14                   individual school personnel, to the penalty provided in section 4009. This section does  
15                   not apply to out-of-home abuse and neglect allegations as covered under subchapter  
16                   18.

17                   **Sec. 13. 22 MRSA §4093, 3rd ¶**, as amended by PL 2013, c. 368, Pt. CCCC, §4,  
18                   is further amended to read:

19                   The family support team shall provide a multidisciplinary approach for suspected child  
20                   abuse cases that are initially identified in hospital emergency rooms, inpatient pediatric  
21                   departments and ambulatory clinics. The child protective staff of the Office of Child and  
22                   Family Services shall participate on the teams. The team shall report immediately to the  
23                   department as required in section 4011-A 4011-D.

24                   **Sec. 14. 26 MRSA §833, sub-§3**, as amended by PL 2001, c. 345, §7, is further  
25                   amended to read:

26                   **3. Reports of suspected abuse.** An employee required to report suspected abuse,  
27                   neglect or exploitation under Title 22, section 3477 or 4011-A, 4011-D shall follow the  
28                   requirements of those sections under those circumstances. ~~No~~ An employer may not  
29                   discharge, threaten or otherwise discriminate against an employee regarding the employee's  
30                   compensation, terms, conditions, location or privileges of employment because the  
31                   employee followed the requirements of those sections.

32                   **Sec. 15. 32 MRSA §7005, last ¶**, as amended by PL 2001, c. 345, §9, is further  
33                   amended to read:

34                   Nothing in this This section may does not prohibit disclosure by a person licensed  
35                   under this chapter of information concerning a client when that disclosure is required by  
36                   law, and nothing in this section may does not modify or affect the provisions of Title 22,  
37                   sections 4011-A 4011-C to 4015.

38                   **Sec. 16. 32 MRSA §7361, sub-§1, ¶F**, as enacted by PL 2013, c. 316, §3 and  
39                   affected by §5, is amended by amending the first blocked paragraph to read:

40                   The duty to report provided in this paragraph does not abrogate any other duty an  
41                   examiner has to report by virtue of the examiner's profession pursuant to Title 22,  
42                   section 3477 or 4011-A 4011-D.

1                   **Sec. 17. 32 MRSA §13862, 2nd ¶**, as amended by PL 2001, c. 345, §10, is further  
2 amended to read:

3                   ~~Nothing in this~~ This section ~~may~~ does not prohibit disclosure by a person licensed  
4 under this chapter of information concerning a client when that disclosure is required by  
5 law, and ~~nothing in this section~~ ~~may~~ does not modify or affect Title 22, sections 3477 to  
6 3479-A and 4011-A 4011-C to 4015.

7                   **Sec. 18. 32 MRSA §18393, sub-§4, ¶D**, as enacted by PL 2015, c. 429, §21, is  
8 amended to read:

9                   D. There is not any privilege under this section as to disclosure of information  
10 concerning a patient when that disclosure is required by law, and ~~nothing in this section~~ ~~may~~ does not modify or affect the provisions of Title 22, sections 4011-A 4011-C to  
11 4015 and Title 29-A, section 2405.

## 13                   **SUMMARY**

14                   This bill makes the following changes to the mandated reporter law.

15                   1. It removes the list of specified mandated reporters and requires a person who in the  
16 normal course of the person's professional duties interacts with children or persons  
17 responsible for children to be a mandated reporter.

18                   2. It removes the penalty for violations of the mandated reporter law.

19                   3. It requires a report of abuse or neglect to be made within 48 hours.

20                   4. It requires the training for mandated reporters to be every 2 years instead of every  
21 4 years.

22                   5. It requires the person who suspects the abuse or neglect of a child to make the report.

23                   6. It requires the Department of Health and Human Services, rather than the mandated  
24 reporter, to report to the appropriate district attorney's office when the abuse or neglect is  
25 caused by a person not responsible for the child.

26                   7. It corrects cross-references to reflect the new section of law for mandated reporting.