

Annual List of Rulemaking Activity
Rules Adopted January 1, 2020 to December 31, 2020
Prepared by the Secretary of State pursuant to 5 MRS §8053-A sub-§5

Agency name: Department of Professional and Financial Regulation,
Bureau of Insurance

Umbrella-Unit: **02-031**

Statutory authority: 24-A MRS §§ 212, 2927(1)(D) and (5)

Chapter number/title: **Ch. 175**, "Private Passenger Motor Vehicle" Definition for Rental Vehicle Coverage (*New*)

Filing number: **2020-232**

Effective date: 11/17/2020

Type of rule: Routine Technical

Emergency rule: No

Principal reason or purpose for rule:

The rule clarifies the types of vehicles that a personal motor vehicle policy must cover when the vehicle is rented by an authorized driver under the policy.

Basis statement:

In this rulemaking, Superintendent of Insurance Eric Cioppa adopts ch. 175, "*Private Passenger Motor Vehicle*" Definition for Rental Vehicle Coverage. Pursuant to a July 1, 2020 Notice of Rulemaking, Superintendent Cioppa held a public hearing on July 21, 2020. The public comment period was open until August 3, 2020 at 4:30 p.m. The primary purpose of the proposed rule is to clarify the term "private passenger motor vehicle" as used in 24-A MRS §2927 to describe the types of vehicles that a personal automobile insurance policy must cover when the vehicle is rented by an authorized driver under the policy. Legislation enacted during the First Regular Session of the 129th Maine Legislature, Public Law 2019 ch. 376, "An Act To Update the Laws Governing Personal Vehicle Rental Coverage," specifically authorizes routine technical rules to achieve this purpose.

Fiscal impact of rule:

No fiscal impact on state government.

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Umbrella-Unit: **02-031**

Statutory authority: 24-A MRS §§ 212, 4303-E

Chapter number/title: **Ch. 365**, Standards for Independent Dispute Resolution of
Emergency Medical Service Bills (*New*)

Filing number: **2020-220**

Effective date: 10/24/2020

Type of rule: Routine Technical

Emergency rule: No

Principal reason or purpose for rule:

The purpose of the rule is to implement the Independent Dispute Resolution (IDR) process established by PL 2019 ch. 668, *An Act to Protect Consumers from Surprise Emergency Medical Bills*.

Basis statement:

In this rulemaking, Superintendent of Insurance Eric Cioppa adopts 02-031 CMR ch. 365, “Standards for Independent Dispute Resolution of Emergency Medical Service Bills.” Pursuant to an August 4, 2020 Notice of Rulemaking, Superintendent Cioppa held a public hearing on August 26, 2020, and the public comment period was open until September 8, 2020 at 4:30 p.m. The rule implements the Independent Dispute Resolution (IDR) process established by PL 2019 ch. 668, *An Act To Protect Consumers from Surprise Emergency Medical Bills*.

The Superintendent adopts the rule with miscellaneous, non-substantive editorial corrections, such as conforming capitalization, misspellings, and mis-numbered subsections or paragraphs. The Superintendent also adopts changes specifically in response to comments made during the public comment period. These changes are technical in nature and do not materially change the substance of the rule.

Fiscal impact of rule:

No fiscal impact on state government.

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Agency name: Department of Professional and Financial Regulation,
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Umbrella-Unit: **02-031**

Statutory authority: 24-A MRS §§ 212, 2772, 2774, 4218, 4218-A, 4222-A, 4303, 4309,
4309-A

Chapter number/title: **Ch. 850**, Health Plan Accountability

Filing number: **2020-120**

Effective date: 5/24/2020

Type of rule: Routine Technical

Emergency rule: No

Principal reason or purpose for rule:

The purpose of the amendments is to conform the rule to changes made to the *Health Plan Improvement Act* by legislation enacted during the First Regular Session of the 129th Maine Legislature. The legislation specifically authorizes routine technical amendments to achieve this purpose. PL 2019 ch. 171, amended the clinical peer requirements for carriers' medical reviews. PL 2019 ch. 238, amended the requirements for coverage of emergency services and defined "emergency service" and "emergency medical condition." PL 2019 ch. 273, amended the requirements for prior authorization of nonemergency services.

Basis statement:

In this rulemaking, Superintendent of Insurance Eric Cioppa adopts amendments to ch. 850, *Health Plan Accountability*. Pursuant to a November 27, 2019 Notice of Rulemaking, Superintendent Cioppa held a public hearing on December 17, 2019, and the public comment period was open until December 30, 2019 at 4:30 p.m. The primary purpose of the amendments is to conform the rule to changes made to the *Health Plan Improvement Act* by legislation enacted during the First Regular Session of the 129th Maine Legislature. The legislation specifically authorizes routine technical amendments to achieve this purpose. The legislation is as follows:

- PL 2019, ch. 171, "An Act To Ensure Protection of Patients in Medical Reviews by Health Insurance Carriers," which amended the clinical peer requirements for carriers' medical reviews;
- PL 2019, ch. 238, "An Act To Protect Patients and the Prudent Layperson Standard," which amended the requirements for coverage of emergency services and defined "emergency service" and "emergency medical condition"; and
- PL 2019, ch. 273, "An Act Regarding the Process for Obtaining Prior Authorization for Health Insurance Purposes," which amended the requirements for prior authorization of nonemergency services. In addition, an unallocated provision of Chapter 273 directed the Superintendent to amend Chapter 850 to replace the term "urgent care" with the term "exigent circumstances" and to require review within 24 hours in exigent circumstances.

Fiscal impact of rule:

No fiscal impact on state government.

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Agency name: Department of Professional and Financial Regulation,
Bureau of Insurance
Umbrella-Unit: **02-031**
Statutory authority: 24-A MRS §§ 212, 2188
Chapter number/title: **Ch. 950**, Navigator Certification and Training for Health Benefit
Marketplaces
Filing number: **2020-207**
Effective date: 9/22/2020
Type of rule: Routine Technical
Emergency rule: No

Principal reason or purpose for rule:

The purpose of the rule is to establish standards and procedures for the certification of navigators to perform the activities and duties identified in 24-A MRS §2188 and subsection 1311(i) of the federal *Affordable Care Act*.

Basis statement:

The Superintendent of Insurance hereby adopts as proposed 02-031 CMR ch. 950, *Navigator Certification and Training for Health Benefit Marketplaces*. The primary purpose of the rule is to establish standards and procedures for the certification of navigators to perform the activities and duties of identified in 24-A MRS §2188 and subsection 1311(i) of the *Affordable Care Act*. Ch. 950 is authorized by 24-A MRS §§ 212 and 2188.

Pursuant to an August 4, 2020 Notice of Rulemaking, published in the Secretary of State's August 5, 2020 Weekly Notices of State Rulemaking, on August 5, 2020, the Superintendent held a public hearing on August 27, 2020. The public comment period was open until September 8, 2020 at 4:30 p.m. No member of the public offered comments at the public hearing, and the Bureau of Insurance did not receive any written comments from the public before the comment period ended.

Fiscal impact of rule:

No fiscal impact on state government.