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Legislative Document

No. 784

S.P. 343

In Senate, March 4, 2025

An Act to Require Health Insurance Coverage for Specialized Risk Screening for First Responders

Received by the Secretary of the Senate on February 26, 2025. Referred to the Committee on Health Coverage, Insurance and Financial Services pursuant to Joint Rule 308.2 and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator BAILEY of York.

Cosponsored by Representative COPELAND of Saco and

Senators: NANGLE of Cumberland, TIPPING of Penobscot, Representatives: MATHIESON of Kittery, SHAGOURY of Hallowell.

3 4	§4317-F. Coverage of specialized risk screening associated with health of first responders
5 6	1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.
7 8 9 10	A. "First responder" means an employee or occasional employee or volunteer that is a member of a state, county or municipal government entity that provides or has the authority to provide fire, emergency medical, emergency communications, correctional or police services.
11 12	B. "Specialized risk screening" means any of the following standard, medically accepted tests:
13 14	(1) Tests for evidence of any cancer with a known employment-related risk of exposure for a first responder;
15 16	(2) Blood tests, including tests conducted for a complete blood count, comprehensive metabolic panel, renal panel and hepatic panel;
17 18	(3) Mammography, colonoscopy or prostate examinations regardless of the age of the person who is the subject of the examination;
19 20 21	(4) Tests of any measure of serum activity of lipoprotein-associated phospholipase enzyme A2, oxidized low-density lipoprotein or additional indicators of endovascular inflammation; or
22	(5) Tests to measure vitamin deficiencies, nutritional deficits and mineral levels.
23 24	2. Eligible enrollee. An enrollee is eligible for coverage under this section if the enrollee meets the following conditions:
25	A. The enrollee is a first responder;
26 27	B. As determined by the enrollee's provider, the enrollee's receipt of specialized risk screening has meaningful potential for preventive clinical benefit to the enrollee; and
28 29	C. The enrollee's provider has determined that specialized risk screening is medically appropriate based upon the satisfaction of the conditions in paragraphs A and B.
30 31 32	3. Coverage for specialized risk screening. A carrier offering a health plan in this State may not deny coverage to an enrollee for specialized risk screening recommended by a provider pursuant to subsection 2.
33 34 35	4. Limits on prior authorization. Notwithstanding any requirements in section 4320-A to the contrary, a carrier may not subject any specialized risk screening to any prior authorization requirement, except that:
36	A. A carrier may request verification of an enrollee's status as a first responder; and
37 38 39	B. A carrier may request prior authorization if the specialized risk screening will be conducted by a recognized first responder health or wellness care provider, as defined in rules adopted by the bureau, or a laboratory not affiliated with the enrollee's provider.

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

Sec. 1. 24-A MRSA §4317-F is enacted to read:

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Rules adopted pursuant to this paragraph are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

- 5. Cost sharing prohibited. A health plan may not impose any deductible, copayment, coinsurance or other cost-sharing requirement for the costs of specialized risk screening. This subsection does not apply to a health plan offered for use with a health savings account unless the federal Internal Revenue Service determines that the requirements in this subsection are permissible in a high deductible health plan as defined in the federal Internal Revenue Code, Section 223(c)(2).
- **Sec. 2. Application.** The requirements of this Act apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2027. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

13 SUMMARY

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For policies issued or renewed on or after January 1, 2027, this bill prohibits a health insurance carrier from denying coverage to an enrollee who is a first responder for specialized risk screening recommended by a health care provider. It limits the ability of a health insurance carrier to require prior authorization for specialized risk screening. It also prohibits a carrier from imposing any out-of-pocket costs for specialized risk screening except for high deductible health plans offered for use in connection with a health savings account to the extent required under federal regulations.