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STATE OF MAINE  
DEPARTMENT OF  
PROFESSIONAL & FINANCIAL REGULATION



Joan F. Cohen  
Commissioner

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**Joint Standing Committee on Health Coverage, Insurance and Financial Services  
February 17, 2026, at 10:00 am**

**Testimony of Kristina Lunner  
Department of Professional and Financial Regulation**

**In Support of L.D. 2082**

**An Act to Regulate the Use of Artificial Intelligence in Providing Certain Mental Health Services**

Senator Bailey, Representative Mathieson, and Members of the Committee, my name is Kristina Lunner, and I am the Deputy Commissioner for the Department of Professional and Financial Regulation (the Department). Thank you for the opportunity to share testimony in support of LD 2082 on behalf of DPCR, the Office of Professional and Occupational Regulation (OPOR) and two affiliated licensing boards—the Board of Licensure in Medicine and the Board of Nursing. Collectively, these licensing boards represent licensed mental health practitioners including social workers, counselors, alcohol and drug counselors, psychologists, psychiatric mental health nurse practitioners, adult psychiatric mental health clinical nurse specialists, child and adolescent mental health clinical nurse specialists, and psychiatrists.

I would first like to thank the sponsor for taking the time to have several productive meetings with representatives of our Department. We appreciate and share the sponsor's desire to ensure the proper use of AI, particularly for vulnerable citizens facing mental health challenges. While we recognize the importance of safeguards to ensure its safe use, we also recognize that the use of AI in mental health is a fast-evolving area of innovation and cautioned against rushing into regulations that may stifle innovation. Additionally, we noted that the Department only has jurisdiction over those individuals that it licenses and does not have jurisdiction over the technology itself. The sponsor listened thoughtfully and incorporated our suggestions into this amendment.

The proposed amendment focuses on patient consent and ensuring that there is a human in the loop overseeing any clinical decision making by our licensees. It appropriately places the regulation within each of our licensing programs enabling statutes.

Finally, we appreciate and thank the sponsor for not including a rulemaking requirement in the bill. Our licensing boards are not experts in this technology. They would likely need to rely on the development of national standards from their respective national associations and organizations rather than develop state specific standards.

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We offer a few technical suggestions for your consideration. First, the Board of Licensure in Medicine (BOLIM) notes the following:

- The bill appears to contain the incorrect statutory citation. Title 32 section 3300-G is already used for the “prohibition on providing conversion therapy to minors.” Therefore, a new reference (perhaps 3300-J) may need to be created.
- The language in section 2, “A person licensed under this chapter may provide therapy or psychotherapy services through the use artificial intelligence as long as the licensee acts within the scope of practice of the licensee's license, in accordance with any requirements and restrictions imposed by this subchapter and in accordance with standards of practice” may lead to confusion and enforcement issues depending on its interpretation. BOLIM believes the intent of the bill is to limit the use of AI to administrative and supplementary support and recommends the language be changed to, “A person licensed under this chapter may provide **administrative or supplementary support as part of** therapy or psychotherapy services through the use artificial intelligence as long as the licensee acts within the scope of practice of the licensee's license, in accordance with any requirements and restrictions imposed by this subchapter and in accordance with standards of practice.”

The Office of Professional and Occupational Regulation (OPOR) notes that the bill amendment appears to have incorrect and missing statutory citations, and requires language to clarify if all levels of licensure within the behavioral health boards are contemplated. To address these challenges, OPOR offers the following clarifications for your consideration:

- Section 1 of the amendment: Clarify whether all levels of licensure, including temporary and conditional licensees, are permitted use of AI in delivery of mental health services.
- Section 5 of the amendment: Clarify whether psychological examiners are included in the authorized use.
- Section 6 of the amendment: 32 MRSA §6207-D is incorrectly identified as applying to licensed social workers. Either amend the proposal to reflect a new provision under Title 32, Chapter 83 governing social workers or amend the reference to alcohol and drug counselors. Also clarify if all levels of licensure are authorized.
- Section 7 of the amendment: Clarify whether pastoral counselors and conditional licensees are to be included in the use of AI in the delivery of mental health services.
- Proposed new Section 8 to the amendment: Use this section to reference either Title 32, Chapter 83 to reflect social workers or Title 32, Chapter 81 to reflect alcohol and drug counselors to further clarify intent of Section 6. Clarify also whether all levels of licensure are included.

Thank you for the opportunity to testify and I would be happy to answer any questions.