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Testimony In Opposition to L.D. 2199

An Act to Prohibit Interference with the Professional Judgment and Clinical Decisions of Licensed Health Care Professionals as Recommended by the Commission to Evaluate the Scope of Regulatory Review and Oversight over Health Care Transactions That Impact the Delivery of Health Care Services in the State

February 18, 2026

Senator Bailey, Representative Mathieson, and Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services:

My name is Dan Demeritt, the Executive Director of the Maine Association of Health Plans. Insurance coverages offered or administered by our member plans provide access to care and better outcomes for many of the Mainers who receive coverage through an employer plan or the individual market. Our mission is to improve health by promoting affordable, safe, and coordinated health care.

The Maine Association of Health Plans is speaking in opposition to L.D. 2199 as drafted because the legislation may inadvertently interfere with utilization management tools, including prior authorization and post-payment review, that public and private health plans use to ensure that patients are getting medically necessary and affordable health care.

Commission Targets Private Equity and MSO Practices and Policies

The concerns expressed in the development of the recommendation that led to L.D. 2199 centered on the management practices or policies of private equity companies or management service organizations and the potential impact they could have on the professional judgment or clinical decisions of health care professionals in Maine.

Exemption for Utilization Review as Defined in 24-A §4304

Utilization management was not included among the concerns identified in the Commission's Report. However, the conduct described in §1730-B (2) could be read as including coverage decisions that are made through the utilization review process, including whether a treatment or service is medically necessary.

If the Committee is interested in advancing this legislation, we urge you to include language that makes it clear that nothing in this section is intended to limit utilization management as outlined in the Maine Insurance Code (Title 24-A, §4304).¹

¹ <https://www.mainelegislature.org/legis/statutes/24-a/title24-Asec4304.html>

Health Plan Utilization Review Does NOT Undermine Professional Independence or Judgement

Determinations reached by the medical professionals working for public or private health plans doing utilization management review may differ from the health care provider's recommendation. These differences in clinical judgment do not threaten the employment of the providing health care professional or otherwise undermine their independent practice authority, nor do they prohibit a provider from rendering those services—utilization management only determines whether the service will be covered.

Utilization management is used to determine whether care is medically necessary and to ensure that members receive the most appropriate care.

We would also remind the Committee that Maine law provides health plan members with a process for appealing claims decisions. When a medical claim is denied by a health plan licensed in Maine, there is an opportunity for a peer-to-peer reconsideration of a denied claim. Members also have the option to pursue two levels of appeal and an external review by an independent review organization.²

As the Committee is aware, it has regular and appropriately focused opportunities to monitor and consider changes to utilization management.

Including an explicit exemption for utilization review as defined in the Maine Insurance Code for both health plans and utilization management organizations would prevent unintended limitations or complications on the work public and private payers do to ensure care is medically necessary and cost effective.

Thank you for your consideration.

²<https://www.maine.gov/pfr/insurance/consumers/health-insurance-for-individuals-and-families/complaints-appeals-external-reviews>