

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

Senate Legislative Record
One Hundred and Twenty-Fifth Legislature

State of Maine

Daily Edition

First Regular Session
December 1, 2010 to June 29, 2011

Pages 1 - 1494

Resolve, To Encourage Business Development by Creating Limits on the Time Certain Utilities May Hold a Business Customer's Deposit

H.P. 882 L.D. 1191
(C "A" H-127)

FINALLY PASSED and having been signed by the President Pro Tem were presented by the Secretary to the Governor for his approval.

All matters thus acted upon were ordered sent down forthwith for concurrence.

Senator **TRAHAN** of Lincoln was granted unanimous consent to address the Senate off the Record.

Senator **ALFOND** of Cumberland was granted unanimous consent to address the Senate on the Record.

Senator **ALFOND**: Thank you Mr. President. Ladies and gentlemen of the Senate, I'd like to bring everyone's attention back to item 1-8, which recognizes Coach Dick Whitmore who, after 40 years of coaching and being the Athletic Director at Colby College, is retiring. I speak about Coach Whitmore as wearing many hats. Many of you might not know but my first passion growing up was playing basketball. Coach Whitmore, every Summer, would teach me not only about the fundamentals of basketball but also about the fundamentals of life. He was fair, firm, respected the game of basketball, and his players respected him. You look at his accomplishments during his 40 year career and it is just remarkable. Twenty-seven times reaching the post season, 31 seasons having a winning season, reaching the NCA's twice, and Coach of the Year. Every single accomplishment that you could ever have he has received. I also would just like to say that Coach Whitmore has also become a friend. After I didn't grow past 5' 8" I knew my basketball career was done but Coach Whitmore still stayed with me and I still see Coach Whitmore all the time. He is just a great human being and I really wish him all the best in his next career with his family and friends. Thank you, Mr. President.

Senator **PLOWMAN** of Penobscot was granted unanimous consent to address the Senate on the Record.

Senator **PLOWMAN**: Thank you Mr. President. Ladies and gentlemen of the Senate, today we enacted item 7-5, An Act Establishing a Vietnam War Remembrance Day. I congratulated my friend, Don Simoneau, on the work that he's put in today but I'd like to also recognize him as an adjunct member of the Veterans and Legal Affairs Committee and the Legal and Veterans Affairs Committee as a regular. Today I'm very proud that he was here when we did this and I would urge everyone on the way out to shake the hand of one of our great veterans who has not stopped serving his county or his state. Thank you.

Off Record Remarks

RECESSED until the sound of the bell.

After Recess

The Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

Senator **COURTNEY** of York was granted unanimous consent to address the Senate off the Record.

Senator **ALFOND** of Cumberland was granted unanimous consent to address the Senate off the Record.

RECESSED until 4:30 in the afternoon.

After Recess

The Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

The Chair noted the presence of the Senator from Oxford, Senator **PATRICK**.

ORDERS OF THE DAY

The Chair laid before the Senate the following Tabled and Later Today Assigned matter:

HOUSE REPORTS - from the Committee on **INSURANCE AND FINANCIAL SERVICES** on Bill "An Act To Modify Rating Practices for Individual and Small Group Health Plans and To Encourage Value-based Purchasing of Health Care Services"
H.P. 979 L.D. 1333

Majority - **Ought to Pass as Amended by Committee Amendment "A" (H-186)** (7 members)

Minority - **Ought Not To Pass** (6 members)

Tabled - May 11, 2011, by Senator **WHITTEMORE** of Somerset

Pending - **ACCEPTANCE OF EITHER REPORT**

(In House, May 10, 2011, the Majority **OUGHT TO PASS AS AMENDED** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-186).**)

(In Senate, May 11, 2011, Reports **READ**.)

On motion by Senator **WHITTEMORE** of Somerset, the Majority **OUGHT TO PASS AS AMENDED** Report **ACCEPTED**, in concurrence.

On motion by Senator **BARTLETT** of Cumberland, the Senate **RECONSIDERED** whereby it **ACCEPTED** the Majority **OUGHT TO PASS AS AMENDED** Report, in concurrence.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Somerset, Senator Whittemore.

Senator **WHITTEMORE:** Thank you Mr. President. Ladies and gentlemen of the Senate, we have before us a very important decision to make. L.D. 1333 has been the subject of much discussion in the past few weeks, as it should be, due to the fact it has the potential of being one of the most important pieces of legislation this 125th Legislature will legislate. Maine's per capita income is approximately \$19,500 per year. Maine's per household income is approximately \$46,500 per year. A basic \$500 deductible, \$1,000 co-insurance health choice plan for a single 30 year old is \$677 per month, or \$8,124 a year, which equals 41% of the annual income. The same plan for a family of four, parents aged 30, is \$1,711 a month. That's \$20,552 a year, which is 44% of that family's household income. Ladies and gentlemen of the Senate, this is not right. As they say at NASA, Houston we have a problem. For the last 15 years or so the Maine legislature has had good intentions in trying to address this very serious problem but have failed. For those who are employed by the State, municipalities, federal government, and large corporations and have a large portion of their health insurance paid for haven't felt the financial squeezes. Make no mistake about it, it's costing us all a lot of money. I hear people blaming the insurance companies for the high cost of insurance. Although they do require a profit for the valuable service they provide, the lion's share of cost is health care itself. A very small example of this would be going to the store for a box of tissue and paying a few dollars compared to seeing on your hospital bill the same box of tissue costing nearly five times as much.

L.D. 1333 will not fix the high cost of health care itself but will lower the cost of health insurance for all Maine citizens. It will guarantee issue for all who want health insurance. It will provide affordable insurance for the 133,000 Maine people who currently have no insurance due to affordability. It will guarantee issue to people with pre-existing conditions and their premium, or cost, will be the same as someone without a pre-existing condition. It will allow competition from New England states insurance vendors. It will encourage new business to come and existing ones to stay. It will lower the cost of insurance for all Maine people through increased competition and acceleration of the number of people going into the insurance pool. It will provide many other benefits which are not available with our current insurance offerings.

During my campaign I told people that I could make no promises, without a magic wand or a crystal ball that is. I did tell them, however, that I would pledge four things: I will listen, think, find balance, and act with moral conviction. The dictionary says

morality is to do the right thing. I invite all my Senate colleagues to join me and do the right thing. Vote for L.D. 1333. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Brannigan.

Senator **BRANNIGAN:** Thank you Mr. President. Men and women of the Senate, this has been an experience that I have hoped I'd never go through, never thought I'd go through, in the Senate. I've been in the business here of being a legislator since 1980. Took a few years out. I've been a Chair since 1982. Never has anything been pushed and ramrodded like this one. I couldn't believe it when we were told a week ago Friday that we had to vote on that that day. We were voting on things we hadn't seen or just seen a few hours before. I think the people in our committee were not free. It seemed to be some pushing from the outside, possibly even from outside the legislature. This isn't ordinary. Our Chairman has just told you that it's very important. It's something people have been working on for years. Why would you push it through in a day? That's what it was. It made some of us look foolish because over the weekend many things changed. We were saying one thing. The Cancer Society came out strongly, going with what they saw on Friday and the weekend. Now they are being criticized because they were wrong. Well they were only wrong because this thing was bullied through. I'll try not to keep harping on all of that, but it does permeate everything we've done because we had to immediately turn to try to defeat this rather than to try to understand it and to try to cooperate and collaborate. We couldn't do that because this is serious and will undo many of the things that we worked so hard to do to protect our people in the area of health care.

I envy the L.D. 1 people. When you guys got up and said how you operated, it was just totally opposite from what we were allowed to do in an important area, just the same as yours was important. I think it all started with New Hampshire envy. Somehow we envy New Hampshire and their less expensive liquor, their cigarettes, their washing machines with no tax. For years people have been talking about why can't we buy insurance in New Hampshire where it is cheaper. This has been a mantra. All of a sudden we are going to ram through a way to do it. We're not going to do it. It isn't done anywhere. Why is it \$130 for a young person in New Hampshire but they move to Maine and it's \$400? That's right. Why wouldn't we envy that? It's because we protect everybody within a pool. People can't keep their New Hampshire insurance when they come here because insurance is regulated by the State, just the same as they can't keep their New Hampshire drivers license. They have to get a new drivers license after, I think, ten days of gainful employment in Maine. Those are things that are regulated by the State. They should stay that way for the time being. We fought to have them kept that way. It's not going to happen but somehow that idea is driving some of this.

The people in our committee who are pushing this are really concerned. When the Senator from Somerset, Senator Whittemore, says how concerned he is, he is. He was telling us during this time that it's going to be okay because this is being done in Idaho. We heard a lot about Idaho that day. Did we have time to check on Idaho? No. Have we had time since? A bit but we've been working to try to defeat this effort. Let me tell you a little bit about Idaho, things that we would have discovered, and we would have discovered more. They are different in Idaho.

Quite a bit different. Their demographics are different. They are much healthier. People say, "How come they are much healthier? How come their insurance is lower?" One of the reasons, some people speculate, is that they, as a group, have a great deal of interest in the Mormon faith. As Mormons they have more children, they say. Therefore they are younger. As Mormons they lead, probably, a better life, a cleaner life. Therefore they don't drink as much, don't smoke as much, don't do other things as much, except have children. It's a different demographic. In Idaho their median age is 34. Ours is 43. One in 3-1/2 residents are under 18. Here it is one in five. I do have some information, as you can see, and I'm trying to find it. Their cancer incidents are the fifteenth lowest. We are the highest. Cancer deaths, they are seventh lowest. We are ninth highest. I'm going to be talking about a couple more things. Their median age is nine years younger than ours. Cancer incidents and death rates are some of the lowest. Maine has some of the highest. I'm just repeating myself, but I find this interesting. We're being assured because Idaho is doing okay. We haven't been able to check to see but we believe their number of uninsured is more than ours. I saw some figures saying they were 15% uninsured. We're 10%. Anyways it is not the way to happiness. Just because they took our potato designation, now they are going to take our health.

One of the things this bill does is takes away our State plan, we don't do that any more. It takes away the Oversight Committee, which has been very helpful to help people. Gone. We're going to go to this, what I would call, high risk pool. We've all, for years, have been concerned about putting all of the unhealthy people together in one pool. It's now called a guarantee association, because that is what they call it in Idaho. In Idaho they pay \$4 for every person that has insurance, every person, per month. It is \$4 per month per person. That is supposed to fund this pool. Some would say, "Oh, that's not a pool, that's not a high risk pool, it's a guarantee association." I have a e-mail from someone at CMS, which is the overriding federal group, and it says, "CMS has approved Idaho's reinsurance pool as its alternative mechanism for providing coverage to HIPAA eligible individuals." How it works in Idaho is that the health insurance issuer in the individual market must offer certain products to the HIPAA eligible individuals. For these products, the State provides reinsurance through a risk pool. In essence, what Idaho has is really considered to be a high risk pool since the products for the reinsurance is only offered to HIPAA eligible individuals and to others who meet certain criteria. Anyways, so even though I am criticized all the time for calling it a high risk pool, I fear that it has those elements.

I'll be offering an amendment later and will like to describe to you at that time about the high risk pool that we are being presented here with and how it is going to be funded, if it is going to be funded. I am begging you not to approve this bill. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Woodbury.

Senator WOODBURY: Thank you Mr. President. Senate colleagues, I have struggled with this bill and I must say I'm pleased to have had a week to evaluate it and understand the details and feel for our colleagues on the other end of the hall who didn't have that luxury. Let me share with you the concerns that I've had with this bill and how I've been reassured, as I've

dug into more of the details. First thing I want to talk about is the fact that I don't think that anyone would really disagree that our individual and small group insurance markets in Maine are not working very well. The symptoms of them not working well are high premiums relative to many other states and not a lot of choice, or to put it another way, not a lot of competition in the health insurance market for individual and small group buyers. The reason I think we have these problems are really two-fold. One is that we've decided in Maine, and all with good intentions, to impose certain regulations that have gone well beyond the national mainstream. The consequence of that has been many health insurance carriers deciding not to offer policies in Maine and so our competitive environment has been reduced. We've had fewer people who have wanted to offer health insurance in Maine. The other thing that has happened is, by having both the lack of competition and having the very narrow community rating bands that we require in Maine, that the resulting high premiums have led many who are younger and healthier buyers, who would like to buy health insurance and would like to participate in the health insurance market, to look at our health insurance premiums and say, "I'm just not going to pay that." They choose to be uninsured. That has the problem of those people being uninsured on the one hand but it also has the problem of its feedback into the market because those who are left in the pool being insured are a more expensive group and that, in turn, leaves the premium to be that much higher again. This has been called a death spiral in the insurance market. The bottom line is that our premiums end up being higher than we certainly would like them to be and we have an individual and small group market, overall, that just isn't working well. The status quo certainly is not the answer and this bill is designed to address those issues.

I believe this bill works well, or works, because it dovetails with some of the changes that are being made at the national level. In effect, this bill allows us to transition into the new national landscape. In particular, it allows Maine to step back from the Maine specific policies that have made us an outlier in the past, knowing that there are some basic protections that are now going to be provided at the national level. We don't need to impose these regulations any more. We can rely on the fact that there is a better national environment out there to deal with the worst abuses in the industry. I'll mention what in my mind are two key things that are part of that national landscape. One is a community rating limit that is 3-1. This is an age rating band of 3-1, meaning older participants can be charged up three times as much as younger participants. That's the range of what premiums can be. I think it's important to have a community rating so that those who are in these older stage categories are not terribly harmed by the inequality across what it costs to provide health care to people of different ages. I'm relieved to know that in this national landscape there is a 3-1 limit. It's higher than Maine's current limit, which is 1.5-1, we can have 50% higher, but it is a limit. It is a limit that provides some restriction on what I believe would be the worst abuses that exist now in the industry. The second thing that is happening nationally is guaranteed issue. Guaranteed issue means that if you apply for health insurance you can't be denied coverage just because you are in bad health. It stops companies from cream skimming only the healthiest people and allows insurance to really be insurance as it's insuring you against the possibility that you do, in fact, have high health care costs. Guaranteed issue, to me, is another aspect of the national landscape that I think is critical in allowing

us to move forward with this bill. I would ask you, in sort of thinking about a context for evaluating this bill, to think about it in the context of the fact that we now have these basic national protections.

Now I will turn to the reservations that I had and how I was reassured. There are aspects of the bill that raised some red flags for me but on each one, when I pressed on the details and actually I think some were mistakes in earlier drafts, I was reassured that this bill is actually doing okay in each of these criteria. Let me go through them one at a time. The first one is the community rating allowance, that I already mentioned. Maine currently has this 1.5-1 allowance, meaning an older person would be charged 50% more than a younger person. That's the band. The new national standard is 3-1. The bill seemed to talk about this. Even the very first item number one in the summary was that Maine was going to go to a 5-1. I was concerned that this was higher than I thought was reasonable. A really big change for me. I was concerned that it seemed inconsistent with what the federal law was now, which was the 3-1. As I've pressed on that particular issue, I am comfortable that the intent of this bill is to go only to a 3-1 band, assuming that this is what the federal national mainstream is going to be. It is going to be a 3-1 across the country and we're going to conform to that. The only time, and I believe this may be included in an amendment that is coming that makes this more explicit, Maine would ever go to a community rating band that is more diverse than that is if the federal government changes to a more diverse standard. I'm more comfortable. Frankly, I still wish the 4-1 and the 5-1 ratios were not in the bill at all. I wish we just talked about the 3-1 rate and said we were conforming to the national standard. In any case, I'm somewhat comforted by the fact that clearly the intent is not to go there unless the national system goes there.

Second concern relates to the other thing that I brought up, the guaranteed issue piece. I have always understood guaranteed issue to mean what I just described. If you apply for a health insurance product you have to be accepted regardless of your health. An earlier version of this bill, which actually was distributed early on which is why I think I had my misunderstanding, seemed to redefine guaranteed issue not as you had to be accepted into any plan that was offered but rather that every insurer had to offer some plan, that I would refer to as this guaranteed access plan, in which was the guaranteed version but they could have other plans that were not guaranteed. I now have looked that the distinct differences between the earlier version of the bill that gave me the misperception and the current version of the bill which I believe, and I would like to hear confirmation from others on this, now it is the intent of this bill is, in fact, to retain the definition of guaranteed issue that has been Maine law and that will become federal law in 2014. The guaranteed issue that is if you apply for coverage under any plan that is offered you can't be screened out because of your health. That was concern number two.

Concern number three related to out-of-state purchases. I know that the inherent appeal of being able to look around the country at plans that have lower premiums and giving people the opportunity to shop for those premiums has huge appeal. What I worried about when I initially looked at this bill was that it was in effect a way around the guaranteed issue component, meaning that you could go and look at a low premium being offered in another state and you could buy that plan even in a state that didn't have guaranteed issue so it could be a plan that did this health related cream skimming and trying to get all healthy

people. When that happens, by the way, all the healthy people in Maine would go and buy these products in another state where there is no guaranteed issue and we'd be left here in Maine with all the high cost, less healthy group and the premiums for those Maine-based policies would go up a huge amount. How did I get reassured on this issue? I'm reassured on this issue because the out-of-state purchases doesn't begin until 2014 and 2014 is precisely when guaranteed issue is required at the national level. As long as that continues to be the law, I know there are issues related to that, and as long as guaranteed issue is going to become the national law in 2014 than I think buying across state lines, knowing that these national protections are in place, seems reasonable to me.

The last thing, and this isn't really a different issue from the three that I've mentioned already, is that the notion of what this guaranteed access plan is. In particular, I think, because of some of the bills that have been like this in the past and have talked about high risk pools and kind of a different plan where people went into a high risk pool, I had some initial sense that people were going to get set aside into a different plan, what we would have called this guaranteed access plan. Again, as I've dived into the details and really tried to understand this bill, I've found that it is not all a separate plan. In fact, this whole notion of guaranteed issue means that everybody is applying for the same plans and the only difference is that an insurer who insures somebody who is determined to be high risk in this whole umbrella of plans that are already out there is going to get some subsidization for the fact that they are insuring somebody who is high risk. It's this reassurance aspect that is happening through the guaranteed access system, not the creation of any kind of a separate plan. It's not a separate plan at all. It's all the same plans that exist for everybody else, same coverage and so forth. It's just that there is a subsidy attached that comes from this new system.

Having studied these pieces and recognizing the real problems that we have in our individual and small group market and knowing that now is the time that we have to put in place laws that will transition us to the new national landscape which takes full effect in 2014 and we want to move into that landscape in a way where we don't still stand out in ways that I think are bad, I think this bill is a quite reasonable approach and I'm very optimistic that it will be effective. I'm going to be voting in support of the motion. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. As we embark on this debate I think what I find deeply disturbing is the process by which we've gone through. We seem to be on an artificially compressed timeframe. We're not adjourning tomorrow or next week. There is plenty of time to work this bill thoroughly, to make sure that every one of us understands it, and even to find areas of compromise. Even at the end of the day if we didn't agree on every provision, we could probably make it better by working together. Most of the folks in this Chamber have had an opportunity to Chair a committee at one time or another. I was Chair of a committee for four years. I remember coming in to work sessions with one or two amendments based on testimony I'd heard and based on input I'd heard from committee members on both sides of the aisle. I was frequently asked by the Minority party to give them a day because they needed time to consult their own experts, they wanted to talk about this amongst

themselves, or they wanted to get a sense of their caucus before they committed to something. Sometimes I'd find that frustrating as a Chair, but at the end of the day I'd always relent because I understood that there was fair play here, that everybody should be informed about what they are voting on and have an opportunity to try to reach agreement. The funny thing that happens when you do that is that you get agreement a lot more often. I won't say every time we've put off a vote for a day or two we've gotten a unanimous report, but more often than not we found mistakes in the bill or we found avenues to better consensus by taking that time. It is inconceivable to me that a bill as significant and as historic as this would be dropped on a committee with the expectation that you would vote that day. I've been having a hard time today understanding some of the amendments that are only a few pages long to this bill let alone trying to understand something so complicated. While some of these issues may have been kicked around in years past, there are an awful lot of new people in this Chamber and at the end of the hall who deserve an opportunity to understand what they are voting on. Once it left committee, in one day there were other changes that were found. The bill was not revoted when there were subsequent amendments made and it came upstairs. Even here today we are on a very tight timeframe, coming back in this afternoon at 5:30. We do appreciate having a few hours to look at possible amendments. That's not a lot of time when you are also trying to finish your committee work by the end of the week, as most of us spent our afternoon doing. My appeal today is to let the process work. What does it harm to give this another day, another week? I think progress has been made. I've looked at some of the amendments, some of the amendments that I've heard the other party may support and that members of our party may support and that our Independent may support. We've made progress but we're not going to get there in a few hours, particularly while we're out running around doing a lot of other work. What does it hurt to let this sit for the weekend and give ourselves a chance to fix some of the mistakes? We've all seen bills that have come out of here, some that were passed, only to find out that we've made some mistake or that there were some unintended consequences because it wasn't vetted as thoroughly as it could have been. That's on small pieces of legislation. This is historic. In light of these deep concerns, I move that this bill and its accompanying papers be recommitted to the Committee on Insurance and Financial Services.

Senator **BARTLETT** of Cumberland moved the Bill and accompanying papers be **COMMITTED** to the Committee on **INSURANCE AND FINANCIAL SERVICES**.

On motion by Senator **COURTNEY** of York, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#56)

YEAS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, GERZOFSKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER

NAYS: Senators: COLLINS, COURTNEY, DIAMOND, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

ABSENT: Senator: BLISS

11 Senators having voted in the affirmative and 23 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **BARTLETT** of Cumberland to **COMMIT** the Bill and accompanying papers to the Committee on **INSURANCE AND FINANCIAL SERVICES**, **FAILED**.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Lincoln, Senator Trahan.

Senator **TRAHAN:** Thank you Mr. President. Ladies and gentlemen of the Senate, I did want to rise. I'm not an expert on this bill but I did want to rise and address a couple of issues; the ramrodding issue and then another that related to my constituents and what I believe was an injustice that was done to them. I have been here a while and I have seen bills go through here a lot quicker than what is currently before us. I was involved in a recent repeal of a sales tax expansion that went through here much, much quicker. I don't want to revisit that but I just want to say it is not unprecedented to see a bill go through here too quickly. I do want to say, after hearing the concerns of the Minority, there were many of us that wanted to buy more time so that we could thoroughly understand this issue. I believe we have done that. It did go quickly through the other Chamber but it has been a period of time that has passed. Many of us stepped up and wanted more time and I think now there has been many letters in the newspapers and there has been editorials, there have been several stories written about this bill, and I think the public and the legislature better understands it. For that, I think the Minority Party is due some respect. I think you have achieved buying more time. One thing that I believe was an injustice was what did occur with the Maine Cancer Society. On Monday, the day after this bill came out of committee, one of my constituents, a skeleton of a man who I have known for a long time, demonstrated down on the second floor and on this floor too. He demonstrated because he believed that his insurance was being taken away. This man has been through something that I hope nobody in this Chamber or anybody that I know or anybody that I care about ever has to endure, and that is treatment for cancer. He was shaking and to look into that man's eyes was horrifying to me. I couldn't answer his questions and I believed, as a Senator, it was my duty to buy some time until I could. What was said was not true. This man was scared, trembling in front of me, thinking that his insurance was going to be taken away. I want to tell you why that reinforced for me the need to do something with insurance. This man was afraid that he was going to lose his

care. He desperately needed it. What is sad is that there are tens of thousands of people who do not have any insurance at all. Cancer is not discriminatory. It doesn't affect just those with insurance. It affects those without insurance. What about the tens of thousands of people that are affected who do not have insurance and they lose everything, their homes and all of their possessions, when they get sick? They don't have the luxury of insurance because it's unaffordable in this state. We must do something to change course. Insurance is too expensive. What I have seen as a legislator is it's become about the haves and the have-nots when it comes to insurance. You have government folks who have been lucky enough to get insurance. You have businesses that can afford to give insurance to their employees. Then you have the rest. It is a hodgepodge of insurance. It's large deductibles. It's catastrophic plans. It's poor coverage. It's no coverage at all. We have to do something to change course. I think for those people who are getting a little older, like myself, who are now starting to see health issues arise, the lack of health insurance is causing people to make decisions that are not good for their lives. People are working in jobs solely to keep insurance. Not jobs that make them happy or help their families in other ways, but simply to have their insurance. I think if you think about all the decisions being made by families that are based on health insurance coverage you'll find, and you will agree with me, that we have to do something. When I looked into that man's eyes, my constituent, and I saw the fear that losing his insurance struck it dawned on me that we have no choice. Our system is broken, it's unaffordable, and we have to do something different. To the Minority, I heard your message and so did some members of my caucus and we did take the time to think through and to examine the items that were in this proposal. It's still going to be a little bit longer before it goes through this Body and the other. I hope that if there are any more concerns we can learn what they are. I believe, after thoroughly reviewing it, caucusing on it, and getting experts in here, that we have a pretty good document. I hope that this discussion will be about how to get more affordable insurance to more people. This debate, I believe, for the next two or three decades will affect this state in a positive way. I agree with some of you that there may be some problems that have to be fixed. We'll fix those when the day comes. It's broken. We have to do something and I believe this gets us going in a new direction. We have an opportunity to possibly make it more affordable for more people. One last thing, I remember the discussions around insurance at the federal level. It's not much different from the discussion we're having here. One party was going to push through one proposal. What happens when that debate gets flipped? We all get to learn a valuable lesson. Both parties have good ideas. Both parties can come up with solutions to problems. That does not fall on my deaf ears. That's why we bought some time. I hope, folks, that we can come out of here with a good product. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Sullivan.

Senator **SULLIVAN:** Thank you Mr. President. Men and women of the Senate, I want to explain what I'm going to do. I'm going to save you from two different times of my standing up to speak about this. I hope you appreciate that. I'm actually going to vote against this motion because I believe there are other things coming up that I would like to be positive on. Rather than say all

the reasons why I'm going to do that I just want you to know what I'm planning to do so that we can all go home and eat. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Androscoggin, Senator Craven.

Senator **Craven:** Thank you Mr. President. Men and women of the Senate, I was listening very carefully to the good Senator from Yarmouth until he hit the part that says that the intent of the bill would be to have a band rating of 3-1 but in the bill it says 5-1. I thought it's in black and white and that threw me off and it reminded me of the conversation we was having in our caucus. People were saying that maybe it's this and maybe it's that and maybe it's something else. All of that without the input of our insurance bureau. That's their job. That's what they know best. That's what they are supposed to be doing. It's my understanding that they were not invited to have any input in this conversation. This bill is bad news for many Mainers. Some people will see their rates go down and that's good for them. I'm really happy that we can include young people. For example, if you are a young, healthy man in Portland your rates could fall somewhat. If you are older, like myself, or much younger, I mean 48 or more which I consider middle age, or live in eastern or central or northern Maine then you had better watch out because your rates could be as much as five times higher than the lowest rate. Because Maine is the oldest state, with an older population, in this country this will impact a large part of our population. While we did discriminate against younger people before this bill, we are now discriminating against older people.

It's not just age that impacts this rate increase but health status as well. Even though you may be healthy initially, and paying to the lower rate, you are only one trip away from the hospital to becoming a high risk patient. This bill will allow other unpleasant effects as well that are prohibited under the current law, including health tracking. This allows the insurance companies to identify the people it wants to fill out a special health status questionnaire so it can track their claims separately. Combine that with changes to the law that allows insurers to change prior authorization conditions when they want, opening the door to huge abuses and claim denials for cancer or other preexisting conditions.

I just came up from Appropriations to hear from the public about cuts to MaineCare and SCHIP parents. It's going to be about 33,000 of those people. That doesn't include the 44,000 people, senior citizens, that are going to be losing their Drugs for the Elderly once the budget is passed. It is my opinion that this administration and the Majority Party would love to see everybody without insurance because that's what thousands and thousands of people are going to end up experiencing once this session is over. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Alfond.

Senator **Alfond:** Thank you Mr. President. Ladies and gentlemen of the Senate, I first want to thank the Majority Party for the discussion. It's been rich. I would also agree, I would like to have more time. I think when you are looking at a 45 page document that's complicated, health care is a complicated subject, and I wish we had more time. I don't see the hurry. I don't see the urgency. I, again, think it's too bad that we're here.

We all know that health care is a critical conversation here in the state of Maine and in this country. I think that there are many laudable ideas in 1333 and you've heard some. Let's lower the cost. No one could argue that. Let's create more competition. No one could argue that. However, what you could start scratching your head about and arguing is around what this might do to the state of Maine. If you live in certain parts of the state this bill looks very good. Southern Maine, where I'm from. Mid-coast Maine. Looks very good. If you are from other parts of the state, Downeast or North/Central or even Northern Maine, for both your individual rates and your small business rates it doesn't look so good. Downeast individual rates have the possibility of going up 22% for individuals. North/Central individual rates have a possibility of going up 11%. Northern part of Maine individual rates have a possibility of going up 19%. Small business, we all would not argue that we want small businesses to succeed, if you are from certain parts of the state it looks very good. This bill is good for Southern Maine or Mid-coast Maine but again for Northern Maine or North/Central or Downeast Maine it doesn't look so good.

If you are a young person, boy this bill looks great. If you are under 30 years old it has the potential to drop your rates and now potentially it could be something that you might actually engage in. You might have health care for the first time and that is a laudable goal. However, if you are over 48 this bill doesn't look so good for you. Essentially, just in these two parts, geography and age, we are creating discrimination and not uniting the state of Maine. We're creating north versus south, young versus old. Again, laudable goals to have more competition and decreasing health care but I don't see this as a win-win for the state of Maine.

Next let's talk about this bill, the Majority Report, and what it says about occupation. I have a hard time understanding how if you are deemed a person in a high risk occupation this bill essentially allows you to have your premium be at least 3-1 and then maybe more and then the Bureau of Insurance might get involved because you now pay more than 3-1. Why would an occupation give you the luck, if you are a lobsterman or if you work in the woods, to be charged more just because you have chosen that profession? Under this bill that's what we're going to get.

Next, this bill assumes that as soon as this goes into place Maine will become this competitive marketplace. I look forward to understanding which insurance company is now going to come to Maine and when they are going to come to Maine. I'd love anyone to let me know how many companies are needed to come to Maine in order to create this robust marketplace. What happens if no companies come? What happens if we just have the current companies that are here in Maine with this bill? Will that create competition in itself? I don't know.

Next, this bill, again a laudable goal, seeks to get young people involved in health care. Get them lower rates so that they can get into the marketplace. Terrific. Well, these invincibles, these young people, even at rates of \$125 and \$150 a month, it doesn't mean they are actually going to make that commitment. It doesn't mean they don't have other fiscal pressures on their lives. They have to pay rent. They have to pay for their food costs. They have their student loans. They have a variety of other issues that potentially make them look at this health care cost of \$125 to \$150 but does it actually get them over the edge to get health care and how many young people would we actually need to engage in this plan in order to create this robust marketplace? I don't know and neither does the Majority Party because we

haven't run any of the numbers. We have no idea. We are in the dark. We are blindly going down this path because we don't know. If someone does know how many young people we need to actually create this robust marketplace I'd love to know the answer. Is it 1,000 or 10,000? Is it 25,000? I don't know.

The other thing that is confusing is why no one is concerned about, or at least there isn't more conversations about, our rural critical access hospitals. Under this Majority Report you are eliminating a provision called 850. No longer will you have the voluntary choice to go to your local hospital to get the services that you want. Under this bill you will be told, there will be a mandate, that you will now go to Portland or go to Bangor. You go where the carriers tell you that you have to go. I don't remember this place being a robust of mandates. Right now, under 850, eliminating it and eliminating the parts that came in 2009. We now are telling people in rural Maine that they can't go to the more convenient place and they will have to go to the place that we, as a carrier, tell them they have to go. Let's play this out. Now you live in rural Maine, you can't go to your local critical hospital, and so demand goes down for your hospital, your critical access center. What's going to happen next? Probably some pink slips are going to start happening. Now we have made it a hardship for families, potentially, to get their care and now we're losing jobs in rural Maine, potentially. This is how the bill reads. I am just reporting my concerns.

The next thing we have in this bill is that we are creating a non-profit. We're going to have a \$4 assessment or a new tax that is going to create \$24 million of new money coming in for this high risk pool or this reinsurance. I still can't find anywhere in this bill that this tax will end at \$4. Maybe someone will tell me differently, but there are 600,000 Mainers right now that we are playing kind of roulette with. You're going to get a \$4 tax and it could be more because there is nothing in here that said any increases can't happen. Without any warning these increases can happen. Without any oversight of the Bureau of Insurance these increases can happen. Thus we have this runaway tax that we are voting on today too.

I probably could talk about ten more things and maybe the Majority Party wishes I wouldn't and I won't. There are plenty of things in here that create uncertainty with me and some of my colleagues. I've even heard it from some in the Majority Party. If all of your uncertainties are gone because one more day has occurred then terrific but these are 45 pages of complex issues. We have five weeks left in this session. There is no need for us to be ramrodding this bill right now. We could take our time. We could be thoughtful. We could work on this together. Instead we have this patchwork, it's a patchwork of trying to figure out what is the worst parts of this bill and trying to make it better before we vote on it instead of being therapeutic, holistic, or smart. Instead we're being asked to vote on this today. Thank you, Mr. President.

Senator **SNOWE-MELLO** of Androscoggin requested and received leave of the Senate that members and staff be allowed to remove their jackets for the remainder of this Session.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Kennebec, Senator Katz.

Senator **KATZ**: Thank you Mr. President. Men and women of the Senate, I think this is a good bill. I think it's been made better by comments and amendments offered by people from both sides of the aisle. Let me mention a few things that I've heard that I don't believe are entirely accurate. First of all I've heard that someone in Ft. Kent is now going to be forced to not go to the hospital in Ft. Kent and that they are going to be forced to go to the hospital in Portland. With all due respect, it's my understanding that this just isn't so. Anybody who has a policy of insurance, if this should pass, can go to whatever hospital they want to go to. If they want to go to their local hospital, that maybe more expensive or that may have less good outcomes, they can still do it and there will be no penalty whatsoever for doing that. What the bill does provide is a system whereby the company can incent the person, offer them something special, to go to a hospital that provides better service and cheaper service. A waiver of the co-pay, for instance, or some other economic incentive to go and then it will be up to the patient to decide. I don't want to cast any aspersions on the hospital in Ft. Kent. People will have the same choice to go to the same hospital that they do today.

Second, I've heard that as people get sicker they will see their premiums go up. As I understand it, that is just absolutely not so. In fact, somebody who was in this high risk pool, or whatever it is called, won't even know that they are in it. They will be paying the same premium for the same plan that everybody else does for that plan and the subsidy that helps allow them to get that insurance will be a secret to them. They won't even know that they are in that plan.

Third, I've heard a lot about Idaho and how it's different from Maine. In many ways we are similar. There are things that are different. We're older than they are. They are poorer than we are. In other respects they are very comparable and the goal here is to become like Idaho where an older person, with a system very much like this, now pays less in many cases than a younger does in the state of Maine. I've heard that this horrible \$4 assessment may go up without any further action. First of all the \$4 is going to raise much less money from Maine premium payers than Dirigo does today. Less money out of people's pockets than they are being forced to pay through Dirigo today. Any increase above the \$4 is subject to further review before it could possibly go into effect. By the way, there is not even any indication that it will be \$4. That's a cap. It might be \$4, it might be \$3, it might be \$2 depending on how it plays out.

I'm a little perplexed when I hear all the criticisms of the potential problems with this plan. The question that arises in my mind is where is the alternative? I think we all agree that we're too expensive and we have too little competition. Let me say that I think we all are here for the same reason, we were sent to do the people's business and maybe we have different definitions of what that means. To me, knocking on doors last Fall, it was to do everything we can to create an environment where ourselves and our neighbors and our children and our grandchildren, even if we don't have any yet, will be able to stay here and thrive. We have impediments to that happening now. We have energy costs that are too high. We have taxes that are too high. We have a regulatory environment that is too uncertain. I think we took a big step today to fix that. We have the high cost of health insurance in the individual and small business market and the lack of competition. Those are impediments to capital development in Maine. I think we all know that. We talk to people who ask, "Why won't businesses come to Maine?" One of the reasons is the

high cost of health care insurance. If we fail to address that in this session then I would suggest that we have failed our constituents and this bill gives us an opportunity to do that. I'll leave it to others, the Senator from Somerset, Senator Whittemore, and the Senator from Cumberland, Senator Woodbury, who have beautifully described the details of this bill. With guaranteed issue; the rating band reformation; with the opening up to allowing Maine residents to finally be able to shop for insurance out-of-state; with protecting consumer choice in rural areas and this bill protects consumer choice and patient choice in rural areas; and with the increasing of the band rating, not to 5-1 because the federal law says we can't do it. If the federal law changes to 5-1 then maybe we'll go to 5-1. The federal law says 3-1. With all of those changes, I have every expectation that we will get more people insured and the more people we get insured who are healthy eventually the cost will come down for all of us. When we do that the great beauty of this state and the work ethic of our people, which are right now just not enough to attract capital investment, we'll have another advantage. We'll have an environment that delivers low cost, quality health insurance. It will be one more arrow in our quiver as we try to attract business development and jobs in the state of Maine. I commend the Insurance Committee for they work they did and all the people they worked with to get to this point. I commend my friends on the other side of the aisle who have offered constructive and productive amendments to this bill and I hope we will vote for it. I am really sure that when all of us have left service here, and we look back on our time here and what we were able to do, we will look back with pride to this day. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Schneider.

Senator **SCHNEIDER**: Thank you Mr. President. I hope this won't be the only time I get to stand up and speak this evening, given things that are coming to my desk as we speak, to try to clarify some of the issues that are before us. First of all, I want to thank leadership on both sides of the aisle for taking the time with me, as a Senator who does not have expertise in this area. This is completely outside my area of understanding and so it's been an immense learning curve for me to really get my hands around this issue. It's really why, as a Senator, I like the really heavy lifting on legislation to be done within the committee of jurisdiction. I know that didn't happen and on occasion that doesn't happen for a whole host of reasons, which I believe are counterproductive to the people of the state of Maine. When we have big pieces of legislation I would much prefer to see the people weigh in on the legislation because this went from a three page bill to a multi-page bill, close to 40 some odd pages. I understand that this doesn't always happen and we end up on the floor in this posture. I am also concerned, and I just wanted to share these concerns with you, about the speed at which we are moving. I have found that when we move at such a rapid pace that mistakes can be made and that can happen on both sides. I don't think they are intended but thoughtful deliberation, where neither side is pushing, I find is the best way that achieve consensus and we achieve the best policy. Those are concerns I wanted to raise. I'm not going to point fingers because I don't think that that is productive, but I would much prefer it if things were slower and we were a little bit more methodical in our procedural deliberations.

There are a lot of things that have been said that I agree with, or I think I agree with. One was by the Senator from Kennebec, Senator Katz. I understand what is being proposed, that there seems to be an understanding that what is in this legislation is that we will not be charging four times the amount to a citizen in our rural districts versus in our urban districts. I'm saying this on the record because I am not at all convinced that it's in black and white. That concerns me so I'm putting it out on the record because it's my understanding from the Senator from Kennebec, Senator Katz, that he believes that too. I believe that this is the intent of this Body.

I also think it is not the intent to force citizens to travel great distances in order to get care if they don't choose to do that. I am concerned that this may not be reflected adequately, at least not yet, in this legislation.

There is a piece that has been mentioned already about the fee, the fee which currently in the Majority Report says is \$48 annually or not to exceed \$48 annually. If the reinsurance pool were to go dry that this fee, or whatever you want to call it, a fee or a tax or an offset, I don't know what you want to call it, whatever that is or however you want to look at it, that amount of money goes dry that they cannot go back, the insurance companies cannot go back, and get an unlimited amount more. I'm going to try to address that later on because I don't want that to be an unlimited amount more. I understand if that was to go dry that there maybe a reason to go back and ask for more money to try to elevate that reinsurance fund so that we can provide our citizens with that way to offset the high cost of their insurance.

Those are some of the concerns that have been really gnawing at me as we go forward and I decided that it was important for me, as a legislator, to reach out across the aisle and share those concerns with some of my colleagues because I did not ever come here to jockey politically. I came here because I wanted to raise prosperity in this state for the citizens, as a whole, of the state of Maine and because I wanted to make the best public policy I could for the people of this state, not at the expense of some to others but for everybody to improve their lives, and because I believed I could be a good advocate for those people in my district and I would work very hard for them. That's why I'm here. I want you to understand the reason why I'm not going to support the pending motion, because I think that we can improve this by future offerings coming to us. I am not going to be an obstructionist. I am going to try to work with colleagues. I wanted to put those remarks on the record because I believe that is the intent, although I do not fully comprehend it based on the varying things that have been said to me by analysts and by advocates. I just wanted to make it clear that if there is a situation where our seniors in rural areas are getting charged an exorbitant amount more that we will all make a commitment to come back here and solve that and fix that, if that is what we end up with, because they are going to look at all of us as the responsible people who put through policies where we made a mistake. If that is what happens we've got to make a commitment to fix it together. I appreciate the time and I'm waiting for an additional amendment that is still being worked on. I appreciate the efforts of people who have been really working hard to try to make this policy better in this Chamber. Thank you very much, Mr. President, and I think you are doing an outstanding job on a very difficult day.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Brannigan.

Senator **BRANNIGAN:** Thank you Mr. President. May I pose a question through the Chair?

THE PRESIDENT PRO TEM: The Senator may pose his question.

Senator **BRANNIGAN:** Thank you Mr. President. These assessments that we will all have to fill out regarding our health, which will lead to a decision on whether there will be reimbursement to us as a high risk person, will these go to the MIB, Medical Information Bureau?

THE PRESIDENT PRO TEM: The Senator from Cumberland, Senator Brannigan poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from Hancock, Senator Rosen.

Senator **ROSEN:** Thank you Mr. President. I rise to speak to the motion, not to respond to the question. I feel as though I'd like to take the opportunity to speak to the motion because my sense, from some of the debate, is that we're confronting the natural human reaction when anytime we consider reform or change that is a departure from what we know. Sometimes what we know, even if it isn't working and in this case I think it is clearly demonstrated even to the point of feeling as though we're holding onto an anchor as it is moving to the bottom of the ocean, it's still hard to let go of the anchor and float to the top and break through and take a breath of air because that takes change. That's the moment, I think, that we are at now, to let go of the anchor.

The individual and small group markets aren't working and the previous speakers, the Senator from Somerset and the Senator from Kennebec and the Senator from Cumberland, have already made that case as they walked through the bill. It reminds me, particular, of some of the concerns raised by the Senator from Cumberland, Senator Alford, walking through the what ifs, this could happen, that could happen, we don't know this, we don't know that. It reminds me of previous debates here and in other Bodies when we have had other previous legislators and members of deliberative Bodies at the national level have been faced with the question of reform and change. President Clinton, with a Republican Congress, put forward welfare reform. Huge changes. Remembering the articles and the comments in the press of all of the terrible outcomes that would come from that. Yet it passed and was adopted and for 15 years it was a tremendous success. A major reform. A major success. A major success for Maine. A major success nationally. When the previous Governor was elected for his first term and he put forward his health care package, his reforms, the Dirigo package, I was a member of the other Chamber. I voted for it. We didn't have all the answers but we knew the system was in trouble, people were suffering, insurance rates were too high, and we adopted a package of reforms. Many elements of that turned out not to work as well as we'd hoped. Some of the elements worked. Early on there were voluntary commitments to maintain growth among the hospital communities at 3% and they adhered to that. That was effective. We didn't have all the answers at the time but we had enough, we had a plan, we were satisfied that a change needed to take place, and we adopted the reforms. President Bush passed the Medicare Drug Benefit and when

Congress passed that and it was signed into law the state of Maine and many other states braced ourselves, saying it was impossible to implement and seniors would be confused, that they couldn't choose among a variety of different drug plans, and that we needed funding to be able to cover all the calamities that would take place. There was a six month or eight month period that was a rough patch but once the program was integrated and up and running things became very quiet and in a year, two years, three years later it was interesting. It worked very well. The money that we set aside to cover some of the worries proved to be unnecessary or more than we really needed. The consumer was actually able to make a choice and by in large the program has worked.

I go through that list just to let you know that I'm comfortable with this. I'm comfortable with the product that is in front of us. I'm comfortable not knowing all the scenarios of the what ifs and I have faith based on those previous reforms. Some have worked, some haven't worked. At the end of the day the current system is not serving the people of the state of Maine. It doesn't serve members of the individual market. It doesn't serve small business.

The guaranteed access plan, the reinsurance component of this, there are many variations of that in many states. New York has an interesting application of it. They actually take their tobacco settlement money and they fund a reinsurance back-up plan for a segment of their population in New York State that are not eligible or just above the eligibility limit for their Medicaid program but their means are so modest that they are individuals that really can't afford a plan on their own. We've heard about the Idaho model and the way they use the reinsurance back-up. The concept of reinsurance, backing up the costs, is utilized in a variety of other states and I think it's a great concept and I think it will be successful for Maine. That's my two cents and I hope we are able to continue to make expected improvements this evening and then move on to pass the bill. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you Mr. President. Ladies and gentlemen of the Senate, I wouldn't tell anyone that I know a lot about this issue as far as the rating bands or anything like that. I don't even claim to be remotely an expert. Some of the comments that were mentioned about anchors and letting go of anchors, I would love to let go of the anchor. I honestly would but I can't help but feel that the anchor might be thrown onto other people at this point. Maybe I'm wrong about that but I think that illustrates part of the problem. I just can't get a clear answer on this issue. A lot of us come here, and I've been here for a while now, and people know you by issues and things that are important to you. I would say that a lot of people in this Chamber and in this capital know that this logging issue is always a big issue for me because of my area. Even more important, even more of a reason that I wanted to get to the legislature, is health care. I didn't come here thinking that I could solve it but I wanted to lend my voice to it. I wanted to give my encouragement to it for people that were smarter, knew the issue better, and could work on it because I think health care is a real, real problem in the state of Maine. It's a real problem nationally. It's such an important thing for people overall to have, to have affordable health care. I can't think of a single issue that I would rather see worked on. It was talked about people's constituents and stuff like that.

I remember, I think it was the second session in my first term down here, a guy that I had actually been involved with regarding the border issue, one of the guys that had spent the week there. He was 29 years old at the time. I spoke about him on the floor. I got a call while I was down here. He had been complaining about chest pains. Because he was so young and really looked so healthy and he was active, it seemed like when he went to the emergency room they told him that he had GERD and that is what was causing his chest pains. They sent him home. One morning he went to work and right off he didn't feel well. They gave him a ride out of the woods to his vehicle and he drove down. About two miles outside of Ft. Kent his heart exploded and he died. That obviously bothers me today. Health care, for me, is really important. Two years after that I had my own heart trouble. Luckily for me, we were in this Chamber, well I wasn't in this Chamber, I was in the other Body, and I felt poorly all week. After numerous people convinced me, because I had this idea in my head that if I could just get home I'd feel better, I drove myself over here to the Augusta hospital and walked. Within the first 15 minutes there were people running like crazy and I was really scared. My heart was beating at 27 beats per minute and they said I had to have a pace maker implanted immediately. I don't tell you that for any sympathy or anything other than the fact that my only reason, probably, for standing here today is the fact that I was so close to a hospital. I think back on that and I know, because I'm not a rich man and many of the people I represent aren't rich men or women, that if I had been home I'd waited it out, especially if I had thought that going to a hospital at home in Ft. Kent would have cost me a significant amount of money to in because I didn't have pain. I could walk. I just was tired. I didn't feel right. I would have tried to sleep it off because I probably couldn't have afforded to go into the hospital and waste another \$100 in co-pay, which is about what it probably would cost if I didn't have any insurance or even if I did have insurance. That is what concerns me about this.

Currently, as a State employee, and I've got to say I'm so happy to be a legislator for all the things I can do for the people in my district and the honor of representing the people back home is such a great thing, it affords me health care. When I go home, and I just called Frank Johnson about an hour before we started this debate, there is only one hospital in the county that's on the preferred provider list. That is the one in Caribou. They just recently got back on to it. Before that, last year at this time, there were no hospitals that were on the preferred provider list. You have to pay a higher deductible to go to those hospitals in the county. Every one that is not on the preferred provider list. You have to pay a higher deductible to go to those hospitals. Like I said if I knew that then I probably wouldn't have went because I was young and foolish and maybe not a lot different than now. That extra \$100 or \$200 or whatever probably would have made a difference to me. We only do that because we have an exemption for State employees under this Rule 850. I could probably support this overall bill if I knew that this Rule 850 is not being taken out but I'm not getting that. I'm getting that answer from anyone. I'm getting, "Well, things make it better or make it like 850," and stuff like that. I don't know what the incentive is. Right now the incentive is to not go to that hospital because it's going to cost you more. That's the incentive. I don't know what the amount is going to be. No one can tell me that. Is it going to be \$1,000 deductible to go to those hospitals that aren't preferred providers? That's going to force people to not want to go there and, even though the law doesn't say that, it's going to

make people think that they have to go to Bangor for a fair shot if they can wait. That's not right. If 850 is supposed to be back in the bill than put 850 back in the bill, not this attempt or not this other language. Put 850 back in the bill and then we know that people can actually go to the hospitals and not have to worry about paying these outrageous deductibles. No one can tell me. You can say it's only going to be a little bit higher. I don't know, no one knows what that is going to be. It isn't spelled out. I'm not the only one voting, maybe it will be 34 to 1. I don't know. You can't ask me to go back to Aroostook County not knowing what people are going to pay to go to those hospitals. I know that they are going to pay more because as a State employee I'm paying more right now at those hospitals. That's because we've taken 850 out. This law is going to take 850 out.

Honestly I'd rather put an amendment on here to give Aroostook County to Canada because then we'd have health insurance and I wouldn't have that trouble with the logging and I'd be able to work. Honestly, this is a huge issue. I'm not trying to stand in the way. I just can't support it without knowing what detriments it's going to have for the people in Aroostook County and other rural areas. Obviously I represent Aroostook County but I'm concerned about people all over the state. God bless you if you live in an urban area. God bless you if you are a young person. God bless you if you are healthy because we could have a real problem here for those that aren't. I won't be supporting this but I would really, really ask and encourage in the short time that we have here this week that this 850 problem could be fixed. It isn't fixed, as far as I can tell, right now. At least it's open for interpretation and here in Augusta that is a problem.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. Listening to the comments that I've heard I want to be very clear that I, for one, am not opposed to health insurance reform. It's something that I've been working on and fighting for since I got here. We've actually had opportunities to vote on health insurance reform bills in the past. I want reform. There is no question that health insurance premiums in this state are too high. There are a lot of ways to get there. I'm not even opposed to a number of elements that I see in this bill. I think a reinsurance pool may well be a good idea. What I am concerned about is not having the numbers to prove it. Most importantly, though, I think we need reform that's good for everybody in the state of Maine. I don't want to vote for a reform bill that pits old versus the young, urban Maine versus rural Maine, or industries and occupations against each other. It turns out that both the urban and rural divide and the occupational categorization are outside the bands. There can be unlimited differences between a lobsterman or logger or a manufacturer and a banker or an insurance company executive or a lawyer. It's literally pitting the blue collar versus white collar. Those are the kinds of disparities that deeply concern me. I believe that we are one Maine and we should be looking for a proposal that satisfies all of Maine. We are in this together. We all want reform. We all want more affordable health insurance. We all want access to care. Let's do it in a way that everybody can win.

Some questions have been raised about why we would be so concerned about the process and the speed of it. If you look at some of the folks who spoke at the public hearing and how they spoke it becomes readily apparent that some red flags start going

up. Speaking in opposition to L.D. 1333 was the Maine Medical Association, the Maine Hospital Association, the American Cancer Society, all consumer groups that testified against it. Speaking neither for nor against were the Chamber of Commerce and the National Federation of Independent Businesses. Their concern was that we hadn't run the numbers yet. We need to run the numbers and see how this is going to work. That's our Chamber of Commerce and the National Federation of Independent Businesses. Speaking in support of this bill was the insurance industry. When you have the insurance industry lining up in support of something and everybody else either saying they don't have enough information or that this is the wrong proposal for Maine how can red flags not go up? The insurance industry has not done a lot of good for the people of Maine. Why in the world are we going to trust them with our reform proposal? Let's do a proposal that protects consumers as well as insurance companies. I don't want to just raise the bottom of insurance companies in this state or anywhere else. I want to make sure that Maine people are better off from one end of the state to the other, from the young to the old, the rich to the poor, and blue collar versus white collar. We are one Maine. We are in this together. Let's find a reform that works for everyone.

On motion by Senator **BARTLETT** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Androscoggin, Senator Snowe-Mello.

Senator **SNOWE-MELLO:** Thank you Mr. President. Distinguished members of the Maine Senate, I stand here today to mark a momentous occasion. Today is the day of new beginnings. A day of hope. A day of renewal. Today is the day we begin the process of making health insurance more affordable and more affordable for everyone. Maine has some of the most expensive health insurance rates in the country despite having health care costs that are in line with other states. Maine's policies have made health insurance unavailable and unaffordable. It is so unaffordable that currently 133,000 people in Maine are without health insurance. What do people do when they do not have health insurance? Some show up in the emergency room. Others do not receive any health care at all, preventative or diagnostic. Many find themselves with chronic debilitating medical conditions that could have been avoided or other conditions could not have been controlled with regular often inexpensive treatment. Unaffordable health insurance denies people access to health care. Let me repeat that, unaffordable health insurance denies people access to health care. This is unacceptable and I'm sure you agree. I ran for the Maine Senate again last Fall on behalf of many of those families who face catastrophic risk every day, living without access to health insurance. I ran for the Senate to fight for the thousands of people who are unemployed, underemployed, or unable to earn enough money to achieve the American dream because our business climate is dead last in the country. As I traveled throughout District 15 I heard from countless small businesses that health insurance costs are real job killers. High insurance costs negatively impact the health of our constituents and their ability to earn a living and support their families. I pledged to help bring commonsense solutions to Augusta if elected. This

includes market based health insurance solutions that ensure that everyone has access to health insurance that is more affordable.

Insurance is designed to protect all of us from catastrophic risk by spreading it over a broad population. It is only affordable if the pool of premium payers includes younger, healthier adults to off set those with high health care costs. Right now the monthly premium for a 20 year old male or female is \$718. How many 20 year olds do you know that can afford to pay almost \$9,000 a year for health insurance? Yet if that same 20 year old was allowed to purchase health insurance in New Hampshire the monthly premium would be \$190. Just how bad is that private insurance market? Anthem has only 163 individual policy holders ages 18 to 24 in Maine. In New Hampshire, right next door, that company has 1,727. In the past I stood with others to offer many of the proposals contained in this bill, including allowing Mainers to purchase health insurance from across state lines. Countless individuals and businesses are crying out for relief in the face of rising energy, living, and now food costs. The change in leadership last Fall gave us the opportunity to adopt fresh, market based solutions that will lower premiums, protect Maine's most vulnerable citizens, and guarantee access to all, regardless of health conditions. The Affordable Care Act, ACA, has created a huge amount of uncertainty in the health insurance market. Rather than wait until that debate is resolved we need to create certainty and make health insurance more affordable for everyone now. The Maine Guaranteed Access Plan is within the framework of the Affordable Care Act if that law survives. The Maine Guaranteed Access Plan will provide a sound structure to lower health insurance costs if perchance the ACA is struck down. It will lower insurance rates and deductibles for everyone. It will also protect people with catastrophic illnesses and ensure access to quality care in rural areas. Right now Maine's private insurance market is a failure. It fails to cover over 130,000 people. It fails because, like a vampire, high insurance premiums drain precious dollars from family budgets. It takes food from our mouths, oil that heats our homes, and resources that should go towards the American dream. It fails for small businesses struggling to keep their doors open. It fails for people looking for businesses that are hiring. For too long failure has been an option around here. Failure moves Maine one stop closer to a government take-over of our health insurance system. Continued failure moves us towards a one size fits none health care system. If you are happy with the status quo and you want complete failure then vote against L.D. 1333. I support this plan because I want Maine to succeed and I hope you also do. I came here to bring commonsense market based reforms to Maine to move Maine forward. L.D. 1333 is a major step forward for all of us. Please stand with me today and the Insurance and Financial Services Committee members in supporting a commonsense market based approach that will lower rates for everyone, offer consumer choice, and guaranteed access for all. Your vote in support of L.D. 1333 will help bring hope, renewal, and change to Maine. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Alfond.

Senator **ALFOND:** Thank you Mr. President. Ladies and gentlemen of the Senate, I don't think anyone on either side of the aisle is urging the status quo or suggesting the status quo. To further cement that, I hope that the Majority Party will allow one of our amendments to be heard and also to be voted on because I

think you'll very quickly see the status quo is not part of that amendment and I look forward to that debate.

I do want to go back, since there is very little real information out there about what this could do. We have some preliminary numbers. This is December 2010 enrollments of premium revenues in Anthem's 5000 deductible plan. This is applying the 3-1 rate band, the geography assessed inside the rate band, and amended outside the rate band as originally proposed. Just to note that over 45 year olds represent over 78% of our market. I've heard a bunch of numbers and let's just look at Downeast Maine and Southern Maine as this is preliminarily put in front of us. For those ages 30 and under, and this is where the exciting part of this bill is and I am very excited about the possibility of this, in Downeast Maine currently, under the enrollment plans from 2010 in December from Anthem's website, 4% of the market is under 30 years old. Right now they are paying \$322. I know there is a discrepancy from what we just heard from the previous speaker. Under the projections of 1333 that would drop to \$155. Great, that's terrific. In Southern Maine 5% of their marketplace again it's \$322 a month and it would drop to \$114. Terrific, I mean no one could argue that. Those are good patterns. We are excited about that. Remember that 78% of our subscribers in the individual marketplace and the small business marketplace are 45 and older. Let's look at what happens to those people 45 and older. If you look at the 55 plus, which is 53% of our market, in Downeast Maine right now you are paying \$482 but under this plan you now move to \$695. I guess I'm failing to see how that is going to help lots of people in Downeast Maine. In Southern Maine the story is a little bit better, 55 plus is 48% of the market and you go from \$482 to \$512. Not that big of an increase but still you are going to be paying more under this plan with these preliminary numbers. Again, I wish I didn't have preliminary numbers. I wish the Bureau of Insurance actually could put factual information in front of us based on better assumptions than we are working on now.

Mr. President, I'd like to pose a question. Could anyone answer, and I'd love to know the answer, are legislators and State employees exempt from L.D. 1333?

THE PRESIDENT PRO TEM: The Senator from Cumberland, Senator Alfond poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. Men and women of the Senate, I rise to speak to just a couple of comments. First of all I'd like to congratulate my colleagues on the tone of the debate. It's been very passionate and I'll try to make sure I'm brief and do it justice. I really want to thank my colleagues because I know we have passionate feelings on both sides of the aisle.

I would just like to briefly address something. I'm not exactly sure where the good Senator from Cumberland, Senator Alfond, is coming up with his numbers but I think there was one very important thing that was left out of it. That was that you leave out the fact that with the guaranteed access plan you take out most of the claims, the serious claims. You take out those so you are driving down the entire cost. With respect to if you drive down that 20 year olds premium, if you drive it down to say \$136 like you do in New Hampshire, guess what? That 3-1 isn't so bad because that 3-1 is about \$400 a month and currently a 60 year old is paying over \$528 a month. This has been proven to work in

other states and I think this is a terrific step forward. This isn't blindly going down a path. This is looking at processes that exist in other parts of the country and it's actually taking it to the next level. It's taking it to the next level with the guaranteed access plan so that no one is left uncovered. I think it's very, very important. I just also want to comment on the good Senator from Aroostook, Senator Jackson. I was really touched by his remarks tonight. I really understand the value and I appreciate it. I'm sorry he's not here right now. I appreciate his perspective because it's right. Having health insurance saved his life and that means so much. There are 130,000 people in this state that don't have that same opportunity. I assure you that this is not going to increase the cost for rural people compared to what they are paying today. It's going to reduce the cost for rural people. It's going to reduce the cost for all Mainers. Let's take this step. We've tried it the other way. We have some of the highest insurance rates in the country. Let's just take this small step forward to driving down these rates. We really want to work together in a bi-partisan way. That's why President Raye and I have been meeting with leadership on the other side of the aisle all day long and we held this vote back so that we could make sure that we were able to have those conversations and we appreciate the dialog and we will continue to work. If someone has a constructive piece that they want to add to it our door is always open. With that, Mr. President, I want to thank you all.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK:** Thank you Mr. President. Ladies and gentlemen of the Senate, colleagues, and friends, I guess I just want to start out as some others have. I ran this time for the Senate in hopes to make a difference for the people of the state of Maine and I am happy that this bill is before us, not today because I wish they would have been started maybe two or three or four weeks earlier because I think something of this importance shouldn't be just rushed through. I have heard an awful lot of things today in facts and figures and this and that and the other thing. I will say, like my colleague to my right, the good Senator from Allagash, that I have very little experience in the insurance field myself. In not knowing very much I was actually able to ask some experts on their opinions about what is in here and what is not in here. I actually heard quite a different story on certain aspects, which bothers me. I've heard an awful lot of other things that some I agree with and some I disagree with. Like young people. I was young once myself and I know I didn't get insurance myself until I matured. Some will say I never matured. I'm a firm believer. I've two children that went to college. One is now 29 with no health insurance and my baby is 26 who just got married. If you ever stop by my desk I have a beautiful picture of her, Emily. She just got insurance but she went through three years working without insurance because of her low pay and the cost of insurance. That bothers me. Another thing that bothers me, we talked about the 130,000 people who presently have no health insurance. I wonder how this plan is going to affect them when I'm sure part of the problem with the 130,000 that have no insurance is the cost of health insurance as it is now and will it actually get low enough and because of the low wages we pay in Maine will they have enough money to buy insurance then?

One of the things I hear all the time is, "Wow, we've got to get to be able to buy insurance across state lines." Benny Caruso, a friend of mine who, for 40 years, was a Democrat but is

now a Republican, called me up and said, "John, I want you to support that 100%." I said, "Gee, Benny, do you know all about the bill?" He said, "Yes, we're going to be able to buy insurance across state lines." I've heard from certain aspects that this is basically a political ploy and that insurance companies in other states don't go across state lines because the complexity of every state's insurance system is different from state to state. In fact, I'm a little dismayed and I hope this, in fact, is point that they will be able to. I actually doubt it based on what I was told.

Besides the 130,000 without health insurance, I'm not sure what the number is but I'll tell you one thing right now, I have a lot of my constituents that have \$5,000, \$10,000, \$15,000 deductible insurance and all that is is catastrophic insurance. It's not health care because I don't know anyone in my district that can afford \$10,000 or \$15,000 going to the hospital. Is that going to cure this? I sure hope so because it sounds like a market based panacea and wow, we're going to let it rip and the market's really going to do good for the people of the state of Maine. I look at market reforms and say to myself what is deregulation done to electric costs in America? Has it helped the state of Maine? I doubt it. What has the saving and loans business done for the state of Maine, otherwise from the savings and loan scandals years ago? The recession, what has our banks done for the United States of America? Darn near bankrupt us. Then we had to turn around and bail them out. That was the wrong thing to do because I think the money should have gone to citizens to pay health insurance or get lower health insurance, but it didn't. I will be one to stand up here and say I don't necessarily think the market based system is the best in the world because a lot of times the market base eats their own young. When I buy gas in Rumford it's awful funny that I go to one station and it's \$3.99 and the next one is \$3.99 and the next one is \$3.99. How does that happen? Market based.

There are so many parts of this that bother me, or at least three I'll say. I will say one thing, in my eight years in the other Body I made two votes that really bothered me. One of them was the expedited wind power bill because I'll tell you one thing right now if you go into Oxford County and most towns will tell you that they wished I hadn't voted for that because they don't think they even come close to dotting our I's and crossing our T's because there is so much wrong with that. That's why there were 15 to 17 bills in there trying to slow things down and trying to change things. I don't want to make that same mistake this time around. I, too, have been a Chair for four years when I was in the other Body. Legal and Veterans Affairs Committee. There were a couple of times we had some blow outs but we got over it and we changed things. We were able to get the legislation passed. There were two reports. I will say this time I'm extremely pleased with the Senator from Kennebec, Senator Martin, and the Senator from Penobscot, Senator Farnham. We don't always agree but we work well and if I ask for some extra time or ask for help I get it. I'll tell you the way this came through, I'm pretty disappointed.

I told my folks when I was going door to door that the Chief Executive had some things that were right because everyone in the state of Maine wanted changes. I say you were right. I'm a Democrat and I've been blamed for being in power for 30 years although I've only been involved for nine. We've been involved for 30 years and some things we did well and some things we did lousy. Part of the political process is that I'm going to make you look bad and you are going to make me look bad and that's not what this bill is about. This bill is, like someone said, that we've got to do it for the betterment of Maine. Dirigo Health, we brought

that up. That was actually basically a bi-partisan bill. After it was passed the other side did everything they could to tear it down and make it look bad, make us look bad. Did the full benefit of that actually get realized? I don't think so. Whatever happens with this I will pledge that I am going to work as hard as I can to make significant changes to make it better because I actually can count at least to 20. I do understand math a little bit. I do know how to get my check to come out right. With that, I'm going to sit down for now and would wish that we could actually try to come together on the ideas. I think our leadership have brought forward with at least three ideas. I know there is talk of an amendment that will come forward. I'm really hoping that this can become a bi-partisan bill because I would like nothing more than to be part of history and to do something for the state of Maine to move us forward to where we have to be because that is what it's all about when all is said and done, and there will be more said than done. We've got to do this and we've got to work together. I don't care how much time it takes, this is too big of a deal to rush through so let's all work together, look at the amendments that may be coming forward and see if we can come together so we can get a 34 - 0 vote. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Androscoggin, Senator Craven.

Senator **CRAVEN:** Thank you Mr. President. I rise to answer the question that the good Senator from Cumberland asked earlier. His question was whether legislators were included in L.D. 1333. No, we are not. We're exempt from the entire bill, as are all of the other State employees, and we do not have to pay the fee. While I am standing, I Googled the bill from Idaho that we have heard so much about and according to the AARP Idaho they are being hit with soaring premium costs, high prescription costs, and unaffordable health care. There are 221,000 citizens who are uninsured in Idaho, 400 people spend 10% of their income on health care, and 100 people spend 25% of their income on their health care. I think if it's tried and true, and we are using them for a model, it's probably not the best model. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Somerset, Senator Whittemore.

Senator **WHITTEMORE:** Thank you Mr. President. I would like to try to address a few of the concerns that have been mentioned here tonight. First of all let's take a look at the 850 rule. I'll try to make it as simple as I can. If 850 goes away that doesn't mean that the hospital that somebody wants to go to with the 850 rule that they won't be able to do the same thing. That doesn't change that at all. They are not going to be forced to go to a hospital that they do not want to go to. What the removal of 850 will do, however, will allow the insurance companies to offer an incentive for those people who might want to go to a hospital of their choice because of a higher quality of care and is less expensive. That incentive could be paying their deductible or, in some cases, paying transportation to the hospital, etcetera. It's not going to hurt anybody above and beyond the way it is right now. That's 850.

I also was a little concerned about the phrase in reference to the \$4 assessment. That is what it is. It is an assessment. It's not a tax. It has a limit of \$4. The good Senator from Cumberland asked where that was in the bill. It is on page 14,

item 2, which says for maximum assessment each insurer much be assessed by the board an amount not to exceed \$4 per covered person.

In regards to the time and the rushing, I guess that bothers me a little bit. I am a freshman Senator, as you all know, so I haven't had the experience but I do understand that there have been many bills that have gone perhaps faster than this one. The bills that we have been processing so far I certainly don't have the time to read them all. I don't think anybody here does. We're not all experts on every single bill that comes before us. We have to rely on those who are better versed and more knowledgeable.

This bill is a good bill. This bill has been needed for a long, long time. The 133,000 people that are without insurance right now, ask anyone of them how much longer they want to wait. Is this a perfect bill? No. I don't think we've ever put a perfect bill through this legislature. This is a good bill and it will probably be worked on as time goes on. I urge you all to think about it very seriously. This bill needs to go forward and I ask that you please support it. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you Mr. President. Ladies and gentlemen of the Senate, I will just very quickly say that incentivizing can also mean that if you go to this hospital we won't charge you \$1,000 for a deductible or \$1,500 for a deductible. The lack of any clear understanding of what that is going to mean in this law makes it impossible for me to vote for it because currently the incentive is that you go to one of these hospitals and you won't have to pay a couple hundred dollars. I don't know what this is going to do. Even currently they could charge more. Until someone can tell me clearly that this isn't going to be \$1,000, because it certainly would be an incentive for me not to go to Ft. Kent hospital if I knew my deductible was going to be \$1,000 to go to another one. That would certainly incentivize me to go somewhere else or not go at all. I am very, very hesitant, not hesitant; I can't support it without knowing. I don't believe there is anything in this bill currently that clearly says or clearly gives a range at least, even, of what that is going to be. If it's such a big issue to not go to these smaller hospitals, I'm not sure what the problem is, but if it's such a big issue then I'm afraid that there is going to be a large incentive to not go to them for people that are driving this bill and I can't support it like that. If we had an idea. If it's not a problem then put 850 back in the way it's currently written in law now. Until that is resolved it's just a problem for me because I don't know what the amount's going to be and I can't go back and tell people if you want to go to Ft. Kent or if you want to go to TAMC it's not going to cost you \$1,000 or \$1,500 or whatever. Maybe it's only \$500 but \$500 or \$200 or whatever is more than it would be to go somewhere else. That's just not fair in my opinion.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Somerset, Senator Whittemore.

Senator **WHITTEMORE:** Thank you Mr. President. Let me try to help you with that. You are asking what that price is going to be. That price is going to be whatever policy a person chooses. If it's a \$500 deductible, a \$1,000 deductible, or whatever is stated in the policy. That is what the deductible will be. It won't be any higher or any lower if you choose to go to your local hospital that

is not a qualified hospital. If you choose to go to a hospital that the insurance company may or may not recommend that's when the incentive will be offered for good reason. This overall removal of 850 will lower the cost of insurance. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Sagadahoc, Senator Goodall.

Senator **GOODALL:** Thank you Mr. President. It's a pleasure to stand today to talk about this bill and share my concerns. Many of the concerns have been stated already on the record. Frankly, I am very close to the line of thinking the good Senator from Aroostook has articulated, being very close to supporting the bill because we need to lower the cost of health insurance in this state. I develop my decisions based on data and getting answers to my questions. Not antidotes, not theories. We need to make sure that we have the information in front of us in order to develop a thoughtful decision on this bill. I've reached out to employers in my district, a large employer. They don't necessarily know how this is going to impact them. The Senator from Cumberland, Senator Bartlett, went through the list of businesses and organizations that are neither for nor against this bill because they do not have the data to make a decision.

Earlier today I, along with the good Senator from Franklin spoke about L.D. 1. There were seven hearings across the state, over 20 work sessions and sub-committee work sessions, and two public hearings on the bill, one public hearing after we completely changed the bill because we wanted to make sure the public had an opportunity to be heard and we wanted to get it right. You know what? We got it right. That bill, hopefully, is going to pass unanimously in both Bodies.

We can get this right. We need to get it right. We have to drive down the cost of health insurance in this state. Companies and small businesses are being hammered with price increases year after year. We have to address it. It is a goal of every one of us in this room. We don't have the data at this time to assure all of us that some of these unintended consequences won't happen. Potentially, me, along with others, may see data and may be assured of certain concerns we have between tonight, I assume, and when enactment will be in the future. I hope that is the case. I hope the data will come to our desks. Frankly, the data that we have heard has come as outdated and it's very concerning to me. We have great concerns about geography, about 850, and many areas are open for interpretation. If we're so sure of it let's put it in the bill in black and white letters. Let's make sure it's there. I know some of us have nibbled around the edges about upcoming amendments. I've been guilty of that in the past as well, debating issues that probably aren't properly in front of us. I'm sure we are going to have a lengthy debate for the rest of the evening about those amendments. We can do this right. We need to do it right. Let's make sure we get the information before we enact this into law. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Plowman.

Senator **PLOWMAN:** Thank you Mr. President. Men and women of the Senate, I'm going to date myself here a little bit. I'm going to tell you when I made \$4 an hour I had health insurance, \$4 an hour. That was before we started playing with and forcing health insurance companies out of the state of Maine. In 2005, when we

went to preferred providers and preferred hospitals for the State employee plan I was quite concerned. I called the President of Eastern Maine Medical Center and said, "Dear God, do you know what this means?" She said, "Yes, I do. We've been given a list of objective goals on patient care, quality of care, reporting standards, and all kinds of objective goals to meet. If we meet those objective goals we get a star next to our facility and State employees will know that when they come here that we are not the cheapest place for them to come, we're not the best deal for them to come to, but this is where they will get the best health care." The other hospital in my town didn't have that rating. I did make a decision for a little while where I would go for my health care. I tell you what, that other hospital stepped up quicker than you can imagine and was pretty soon on equal footing with the other hospital. Then the local doctors started stepping up because they wanted to be a preferred provider. Pretty soon I was going and not paying any co-pays because all of my providers had risen to the level of the rank that they needed to in order to be able to be a preferred provider. It was because they had to meet objective goals about how they managed their resources and how they delivered health care. That was passed in 2005. You've all been exempt from 850 if you've had health insurance through the State of Maine. It's worked for six years. It has not only increased the efficiency and the quality of care at numerous providers throughout the state of Maine it has kept our health care increases, our premiums, to single digit increases as opposed to what is happening with other insurances. Rule 850 has been a success and if your hospital isn't doing it they are on their way. They are working on it. They are striving to meet the objective goals and I would think that this is an admirable goal to encourage. That's exactly what exempting the State employees from Rule 850 has done. If you don't believe me you can go over and talk to Mr. Johnson, who administers the program, and he can show you the data that you've been looking for. He can show you that we are getting a bang for the buck and it's working and every month that list of preferred providers increases. They are not preferred for any other reason than they have met objective goals regarding their performance. That's a win win.

Now I'm going to talk about what my hopes are for this bill. I've entered a new phase of my life. I'm listening to my grown children and their friends as we sit around at family events, such as weddings and baby showers. I'm hearing how trapped they are. I'm hearing how they have to turn down raises. They are not allowed to work overtime. They live on the edge of losing their MaineCare. They go deeply in debt when something happens to their home, their furnace, or their car because they are not allowed to increase their earnings because they need to keep MaineCare. They are trapped. They are trapped in poverty because they cannot afford to drop off the cliff into uninsured. They have raises that they turn down. They turn down time and a half over 40 hours. Their wives can't go to work. They watch everything stay in that one little avenue because they are desperate to maintain health insurance. Desperate. Do you know how many hours you have to work to make \$130 in a month? I think we talked about it a little while ago. I think these kids would much prefer to know that they can work 60 hours a week for the next few months and pay off that car repair than limp along. My heart hurts when I sit there and listen to our young people trapped in poverty because affordability of insurance keeps them from being insurable. They are insured. They certainly are in the most captive, restrictive kind of economic situation you can put them in. When I sit here and listen to the

nuances I think of the six kids that I listened to November, teaching each other how to apply for an Earned Income Tax Credit, teaching each other what they needed to know about the limits so one of them wouldn't accidentally fall off. They are not working the system. The system is defining how they live. If I could get health insurance making \$4 an hour when competition was good in the state of Maine somebody making \$15 an hour, with a health insurance group plan offered to them and with the participation rate, should be able to hold onto their dignity, pay their share, and earn the American dream. That's my hope. It is deep in here because I see these kids stifled. You can only imagine what it's like to be them, every day, day in and day out. They know why they need insurance. They have children. They have wives. They know they need it. They are not just young kids running around thinking they are invincible. These are the family people who desperately want to do something and I desperately want to help them. If this is how we do it, God bless us because I need to see a future for the people of the state of Maine, the few young people. We've heard it, 4% under 30. It's just sad to think that we're going to do this. I will stop now because I'm not making any good points anymore. I hope that you heard at the beginning. I always think that if I say one more thing one more heart will open up to hope that this actually will bring to the people of the state of Maine. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Washington, Senator Raye.

Senator **RAYE:** Thank you Mr. President. Men and women of the Senate, one of the most notable and sometimes disconcerting aspects of serving as the presiding officer is the inability to engage in debate. However, this piece of legislation is one bill that I felt the very strong need to be out here among you to be able to speak to this for the first time since my election as President of the Senate. I want to begin by congratulating the Senator from Somerset, Senator Whittemore, who as Chair of the Joint Standing Committee on Insurance and Financial Service has worked diligently to guide this vital bill through the committee process. His steady leadership, his level-headed and calm demeanor, and his grasp of the issues involved here have been enormously valuable in producing this thoughtful and balanced legislation. Likewise, the Senator from Androscoggin, Senator Snowe-Mello, who has worked on these issues for years as a member of the committee, has played a crucial role in this process. This bill seeks to address one of the most pressing problems facing our state. Maine people are reeling under the every growing pressure of annual double digit increases in the cost of health insurance. This is a crisis not only with respect to health care but with respect to jobs and the economy as small business people and self-employed struggle to stay afloat and to provide a meaningful level of health insurance coverage for themselves, their families, and their employees. It is a crisis that we are all familiar with. Along with overly burdensome regulations, energy costs, and our state tax burden, it poses a huge threat to Maine's economic future. It should surprise no one that health insurance reform is one of this legislature's key priorities this year. I know this bill has been the source of a lot of debate and discussion, both under this dome and beyond. That is healthy. That is as it should be. It is a weighty matter. Over the past couple of weeks this bill has been examined, scrutinized, and debated. Much of that examination, scrutiny, and debate has occurred between members of this Body. I'm very pleased that

Senators of both parties have engaged in respectful and constructive dialog to bridge differences in interpretation of provisions of this bill.

I do want to address some of the issues I've heard raised here today. The good Senator from Cumberland, Senator Alford; his description of this bill hardly sounds like a bill that is fully compliant with the federal Affordable Care Act. With respect to the impact of this bill on rural Maine; I would respectfully submit that if I had earned a reputation for anything in my seven years in this Body it is my passionate and forceful advocacy for the people of rural Maine. It drives me every day. It is absolutely false to suggest that there is anything in this bill that prevents people from going to their local providers. It is false. I repeat it for the third time, it is false.

As for the issue of whether or not legislators are exempt; good Lord, did the person who asked that question read this bill? Do they understand what we're talking about? We're talking about the individual and small group market. We're not in it. We're protected. We have not suffered as have those in the individual and small group market, the very people we are here to help. While that is a political shot, it is meaningless.

As for the allegation that we have ramrodded or bullied; how dare anyone suggest that. It has now been two weeks since we first heard that charge. Two weeks that have been available to members of this Body to have constructive dialog. It has occurred. I have been part of it with many of you in a good faith effort to resolve our differences. It's a far cry, I might add, from L.D. 1495 in a previous legislature. The Senator from Cumberland, Senator Brannigan, readily acknowledged that the effort the past two weeks has been to defeat this measure. That is absolutely within the right of any member of this Body. However, I'm sorry that more effort hadn't been expended by some in an effort to come to the table with constructive improvements.

We have a shared responsibility to end the status quo of sky rocketing insurance rates. We know, from the experience of other states, that the measure before us offers us an opportunity to do that for the people of Maine. It does so while insuring those with chronic health conditions will have access to affordable health insurance coverage through the new Maine Guaranteed Access Plan. It does so in a fashion that is fully compatible with the federal Affordable Care Act. I would submit that it deserves our support. The people of Maine are depending on us to do something. They are depending on us to stop this ongoing and ever growing crisis of unaffordable health insurance. While there may be differences in terms of our approach to how we want to do that, the suggestions and the falsehoods that have been leveled about this legislation are most unfortunate. I think, as a Body, we can do better than that and I hope, as a Body, before this evening is over that we will come together in at least some element of bi-partisanship and do the right thing for the people of Maine and move on to the amendments that lie ahead of us and further clarify concerns that I know some members have had and that we have readily agreed to make. I ask you to support the pending motion before us.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from Somerset, Senator Whittemore to Accept the Majority Ought to Pass as Amended Report. A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#57)

YEAS: Senators: COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, DIAMOND, GERZOFKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER, SULLIVAN

ABSENT: Senator: BLISS

21 Senators having voted in the affirmative and 13 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **WHITTEMORE** of Somerset to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED** Report, in concurrence, **PREVAILED**.

Senate at Ease.

Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

READ ONCE.

Committee Amendment "A" (H-186) **READ.**

On motion by Senator **BRANNIGAN** of Cumberland, Senate Amendment "F" (S-91) to Committee Amendment "A" (H-186) **READ.**

On further motion by same Senator, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Brannigan.

Senator **BRANNIGAN:** Thank you Mr. President. Members of the Senate, I present this amendment to, what I feel, help this bill in its final passage. I know everybody feels, and I hope you are all right, that this will be capable of fixing all the things we've heard tonight that are wrong. I believe this amendment will protect some of those that could be hurt. It puts geography back into the 3-1 band. It brings the band's expansions to 2014 when the ACA will provide some help to those whose rates can go up, as some of us fear, dramatically. With the ACA coming in there will be help for those people to pay their rates. The per member, per month fee would be set by the Bureau of Insurance, therefore

having the background of which they are capable of having. It would require that some members of the consumer folks be on the board that will deal with the pool. It will lower the number of insurance folk because this group, from what we understand, can raise the \$4 per member per month. If the insurance companies aren't making the profits that they are allowed or they think they should have for all of their needs this group can raise it under the present situation. Lastly, it leaves lots of other things as they are but it restores the State health plan, which we should have. I don't know why people are dumping that. The Advisory Council on Health Systems Development, everybody I talked to said they were a very helpful group. I offer this amendment. I hope you will support it. Thank you, Mr. President.

Senator **COURTNEY** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "F" (S-91) to Committee Amendment "A" (H-186).

On motion by Senator **BARTLETT** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK:** Thank you Mr. President. Ladies and gentlemen of the Senate, colleagues, and friends, I just go on record as supporting the amendment and I am going to be voting against the Indefinite Postponement because I think this amendment does take care of at least a couple of the issues that are near and dear to my heart. I think it is a good fit, at least from my standpoint. I would ask everyone to vote in opposition to Indefinite Postponement.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from York, Senator Courtney to Indefinitely Postpone Senate Amendment "F" (S-91) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#58)

YEAS: Senators: COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, DIAMOND, GERZOFKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER, SULLIVAN, WOODBURY

ABSENT: Senator: BLISS

20 Senators having voted in the affirmative and 14 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **COURTNEY** of York to **INDEFINITELY POSTPONE** Senate Amendment "F" (S-91) to Committee Amendment "A" (H-186), **PREVAILED**.

On motion by Senator **BARTLETT** of Cumberland, Senate Amendment "D" (S-84) to Committee Amendment "A" (H-186) **READ**.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. This amendment removes the assessment provisions from this legislation. We've already heard the debate concerning the \$4 assessment combined with the unlimited authority of the Board of Directors to impose an additional fee if necessary to cover their losses. This, to me, was the most striking piece of the bill when I first heard about it. Given the context of a lot of the other debates that have been happening around the State House, it certainly was in the context of a campaign in which a number of people, including folks in this Chamber, had taken pledges not to increase taxes. An assessment is a tax. We've heard that from the other side of the aisle for years whenever we've tried to call something an assessment. It's duly pointed out to us that when you are imposing an additional charge on something that is a tax. You can call it an assessment or anything else. If all it takes to get out of the tax box is to call it an assessment, well do I have some assessments for you coming up. Just kidding.

What is troubling to me about this is that unlimited authority of the board. Looking at it you have to first start by taking a look at who this Board of Directors is and how they get appointed. The Board of Directors has six members that are appointed by the Superintendent of Insurance. They are not appointed by the Governor and subject to confirmation in this Chamber. They are appointed by the Superintendent of Insurance. In the other boards we require Senate confirmation to make sure that the people who are administering functions are duly qualified. We're putting in place a board that doesn't go through any confirmation and they have the authority to impose a tax. It's an extraordinary delegation of power and I suspect it's an unconstitutional one as well, to delegate a legislative power of raising revenue to an unelected and even unconfirmed board of people with no legislative input. Another five members are appointed by member insurers. This goes back to who is speaking in support of this bill originally. The insurance companies get 5 out of the 11 votes on this board. Again we are giving the industry the authority to make the determinations. If you read on you then realize that, not atypically, these board members are provided immunity from suit at law or equity for their conduct performed in good faith in the scope of the board's jurisdiction. What do we do when the board members run into giant losses and then impose huge additional tax on top of the \$4 on our insurance premiums? This is an extraordinary delegation of power.

What my amendment does is simply strips off the assessment. Once that happens the process isn't over. This bill would simply be referred eventually, at enactment, to the Appropriations Committee. They would take a comprehensive look at what are the costs. Is the \$4 assessment was enough or not? We don't know because we haven't had time to get the numbers. They could look at that for starters. If not, they could

come up with a reasonable way of covering those costs, putting at least some upwards limit on the ability of an unelected, unconfirmed board to raise our taxes. I hope you can support me and this amendment. This does not destroy the bill. It simply says we're going to figure out a way to fund this that makes sense. As I said earlier, I'm not opposed to the reinsurance pool. I think that can have some positive effects. I don't think it should be funded this way. I think it's irresponsible and I also think it puts this legislation at risk in the courts as being unconstitutional. Thank you.

Senator **COURTNEY** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "D" (S-84) to Committee Amendment "A" (H-186).

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. I just want to comment very briefly on this amendment. This is the funding mechanism which will provide additional relief across the state. It will coincide with the decline of the assessment on the Dirigo Plan, so it will actually be a net benefit to the consumers. Without speaking to a future amendment, I think that there will be some protections coming forward from the other side that we're looking at in a future amendment. Thank you, Mr. President.

On motion by Senator **ALFOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from York, Senator Courtney to Indefinitely Postpone Senate Amendment "D" (S-84) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#59)

YEAS: Senators: COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, DIAMOND, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER, SULLIVAN

ABSENT: Senator: BLISS

21 Senators having voted in the affirmative and 13 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **COURTNEY** of York to **INDEFINITELY POSTPONE** Senate Amendment "D" (S-84) to Committee Amendment "A" (H-186), **PREVAILED**.

On motion by Senator **BARTLETT** of Cumberland, Senate Amendment "C" (S-83) to Committee Amendment "A" (H-186) **READ**.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT**: Thank you Mr. President. This provision deals with the issue about rural access to health care. The committee amendment repeals the requirement that standards adopted by rule assures geographical and transportation access to health care providers. That provision is eliminated. I understand there is an amendment coming that tries to deal with this but it doesn't restore this core requirement. If the purpose here is to provide incentives what I hope we could do is restore this language but simply add a provision with respect to incentives, saying nothing shall prohibit incentives that are reviewed and approved by the Bureau of Insurance to insure that they are not unduly imputative. It's a simple fix that will accomplish what everybody wants. A law putting incentive in the program but deal with the concerns that we're going to undermine access. It seems like a way to do it. This is designed to pull it off. I certainly would entertain any amendment to add incentive language to the bill.

Senator **COURTNEY** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "C" (S-83) to Committee Amendment "A" (H-186).

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY**: Thank you Mr. President. Men and women of the Senate, I just want to comment that I believe that in another amendment that I'm not supposed to talk about I think that it will more than adequately address the concerns of the good Senator and I actually want to thank the Minority Leader for the constructive help in putting that together.

On motion by Senator **ALFOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON**: Thank you Mr. President. Ladies and gentlemen of the Senate, I want to thank the good Senator from Cumberland for his amendment. I don't think where he's from is probably going to be as affected by this as where I'm from. I certainly thank him for doing all he can for helping the entire state of Maine. I would just say, again, that if there is no problem with having 850 in there and that we want to incentivize I can understand that. The current way that it is drafted, and I think the way that another revision might be coming, is not clear on that. I would urge your support.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from York, Senator Courtney to Indefinitely Postpone Senate Amendment "C" (S-83) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#60)

YEAS: Senators: COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, DIAMOND, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER, SULLIVAN

ABSENT: Senator: BLISS

21 Senators having voted in the affirmative and 13 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **COURTNEY** of York to **INDEFINITELY POSTPONE** Senate Amendment "C" (S-83) to Committee Amendment "A" (H-186), **PREVAILED**.

On motion by Senator **BARTLETT** of Cumberland, Senate Amendment "E" (S-85) to Committee Amendment "A" (H-186) **READ**.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT**: Thank you Mr. President. This amendment corrects one oversight that I felt wasn't included in the bill. The bill allows for purchase of insurance from a number of other states in New England. In fact, all other states in New England except for one, the state of Vermont. This simply adds Vermont back in. If there is opposition to this I'd be curious to understand why Vermont was excluded while all other New England states were included. It seems to me if they can offer insurance at a lower rate than any of the other five they ought to be able to buy that as well. Thank you.

Senator **COURTNEY** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "E" (S-85) to Committee Amendment "A" (H-186).

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY**: Thank you Mr. President. I believe that Vermont was left out because it is not likely that they would be

able to participate. I think they were moving in a direction of a single payer system.

On motion by Senator **ALFOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. I don't understand why Vermont could not participate in the event that they move to a single payer system. Just because Vermont has a single payer system doesn't mean that they could not choose to offer it to folks outside the state. If they did, and they could do it at a lower rate than anyone else could, why wouldn't we want to take them up on it? Just because it's just single payer and we don't like the words we're not going to buy cheaper insurance from them? Why shouldn't that system be able to compete with every other insurance company, the for-profit and the not-for-profits? I don't get it. It seems to me that if this is truly about letting Maine people buy the lowest cost insurance why do we care if it's a for-profit insurance company or a not-for-profit or a single payer system or something else. If they can provide the insurance for a lower price let Maine people buy it.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. Not to prolong the debate, but I would just suggest that if the good Senator from Cumberland is willing to support final enactment we'd be glad to entertain his amendment.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from York, Senator Courtney to Indefinitely Postpone Senate Amendment "E" (S-85) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#61)

YEAS: Senators: COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, DIAMOND, GERZOFKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, ROSEN, SCHNEIDER, SULLIVAN, WOODBURY

ABSENT: Senator: BLISS

19 Senators having voted in the affirmative and 15 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **COURTNEY** of York to **INDEFINITELY POSTPONE** Senate Amendment "E" (S-85) to Committee Amendment "A" (H-186), **PREVAILED**.

On motion by Senator **DIAMOND** of Cumberland, Senate Amendment "H" (S-96) to Committee Amendment "A" (H-186) **READ**.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Diamond.

Senator **DIAMOND:** Thank you Mr. President. Ladies and gentlemen of the Senate, this is a true bi-partisan effort. This amendment, which I hope you will vote to support and add to the bill, is the result of leadership from both parties working together and some others of us also being involved. I think it shows that we can work together on important issues. We've heard a lot of debate this evening and I think that debate shows clearly that people have passion for their position. This is one of those amendments, I think, that does address some of the points of concern. If I've learned nothing else in my time in this Body it's that when the two parties come together we get a better bill. We proved that for the last two years, passing five unanimous budgets. They would not have been anywhere near as inclusive or comprehensive or productive if one party had done it by themselves. This amendment addresses issues such as the 850 rule, the geography, and others. The reason that I have become involved in this more maybe than normal is because we have a system now that's not working. I've been a small business owner since 1980 and I used to be able to provide health insurance for my employees. Over the years that became more and more difficult. In the last few years it was actually impossible. This amendment clearly addresses the problems we are addressing now and that we now face every day as individuals and small groups and small businesses. I think, Mr. President and ladies and gentlemen of the Senate, that we do have to act now. We cannot wait and try to do something next year or the year after. We have federal legislation that is coming our way. I think the people of this state, especially the small business people, the individuals and the small groups, are asking for us to do something. I think this does it. I ask you all to join me in supporting this.

On motion by Senator **DIAMOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Sullivan.

Senator **SULLIVAN:** Thank you Mr. President. Men and women of the Senate, this is my 12th year here. I've served 10 years on IFS, it was Banking and Insurance when I first started. It was perhaps 7 years ago that, as Senate Chair, I went out on a report by myself. Keep in mind, Senate Chair. Carried a lot of influence. Worked on it the entire time because it was a problem then and it is a problem today. I chose not to speak on all the other ones. I stood up quickly to reassure people that I was going to support this amendment and in the end support the bill because I believe this bill has been made better. I want you to

know the reinsurance issue was on that bill that I supported back then. It is seamless. That is huge. What seamless means is you don't even know you are a high risk. It's huge. There is nothing worse than to go into your small company and have people talking about you because you are costing them more. It's a stigma. To be seamless is huge. It was seamless back then. It's seamless now. It is a better way. Reinsurance is something that P and C, Property and Casualty, has been doing forever. In fact your Property and Casualty premiums went up after 9/11, guaranteed, because then they had to refill that pool from all of that. The reinsurance is a win, win, win. It's a win for your side. I'm still going to take credit for that one report that I was on by myself and none of you are going to take it away from me because you don't live in my district. It's a win for the Maine people. No stigma and a way to have high risk/reinsurance, it's seamless. Don't care what you call it. It's the coverage that is given.

I was concerned with some stacking of the community ratings between age, rural, and all of that. This amendment takes care of it. Can't stack on. It is clear. I like the fact of going back to the affordable health care bill that has been passed. This is good. It's a win. This bill has been made stronger because we've worked together.

I put a bill in three days before this came out, by the way. I put it in prior to that. Three days before this bill was worked in committee. My bill was to sell insurance across state lines in only New England regions. I wanted to keep that sort of together. I got a nice letter from my friend and former colleague, the Attorney General, and there were some problems with it. It was the same bill that Representative McKane had put in for 99 million years. I might have used a little hyperbole there. It was not a problem back then. I couldn't quite figure that out. I was a little hurt. Remember, I've been Senate Chair with one vote. I said okay. We worked it out. I actually had a conversation with the President today. He was kind enough to call the Attorney General and we were able to get that explanation as to why my bill was categorically denied and this one was there. The fact remains that it is our right to be able to compete. I'm not sure we are going to be able to compete. People are going to want to buy insurance from out of state but they will be able to. If it floats your boat, go ahead, do it. You may want to stay with Maine though.

I'm also convinced that the mandate stay in. That was a huge piece to me. Huge. I believe the mandates are there. They came about when we first went to HMOs. Some of you young people, and I don't mean new here, I mean young, might not remember when HMOs first became available and the big thing was wellness. Those mandates really covered that. PSA testing, mammograms, pregnancies, all of those things that hadn't been in insurance before. The insurance companies really wanted those mandates. They begged for them because they knew it was cheaper to have a test, find out if you have colon cancer, cure it while it could be done, and be done with it. Eventually that stopped. They didn't save the money they wanted to because they were saving lives. I don't blame the insurance companies for that but now, all of a sudden, mandates were a liability to them. This bill keeps all of the mandates from chiropractic and anything else.

I'm trying to cover several things because I don't want to have to keep standing up and making you listen to me. My husband has to do it but you don't have to. I'm trying to make it easy. I am going to vote for this and then I am going to vote for the bill at the end. Is it everything I would have wanted? No. If

any of you think you can leave here and have one side of the aisle totally happy and the other side totally disgusted I want you to know it's not a good bill. No one should be singing Dixie on a bill. No one. If you think this one is hard, we've got a budget coming up. This bill was going to pass one way or another. It has always been my style, some people don't like it, I usually tell people where I'm at and what's happening. My style is that if I'm not at the table I haven't had a say. I want to be at the table. I believe I was allowed that opportunity with leadership on the other side of the aisle. I am humbled by the level that I was received. Let it be known that the President also shared jelly beans with me. Thank you, Mr. President, for that. I'm going to vote with this. If only it could have happened ten years ago, but it didn't. I'm not going to cry over that. It's going to happen tonight. I want to be part of it. I believe my colleague has made it better and I will vote for it knowing it's not everything but at 62 I believe we can make a difference. Thank you for listening to me. I'm going to try very hard not to speak again. I appreciate that. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. Men and women of the Senate, I rise in support of this amendment and I would really like to compliment the good Senator from Cumberland the good Senator from York on their leadership. I think it truly expands this bi-partisan effort that I trust and sincerely hope will expand as we get into final enactment. I think you guys have shown us the path of how to work together and I appreciate the Senator from Cumberland, Senator Diamond reaching out to me last week. I believe that this does address some of the concerns that we've heard earlier by other speakers today. I just want to thank them for their leadership.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Schneider.

Senator **SCHNEIDER:** Thank you Mr. President. Men and women of the Senate, I too rise in support of the pending motion and I wanted to say a few words of thanks, first to everybody who spent time working to craft an amendment that would make this a better bill, particular the Senator from Cumberland, Senator Diamond, for allowing me his ear frequently and working together to come up with something that we could support, and leadership, especially the Senate President, and the Senator from York, Senator Courtney, the Senator from Penobscot, Senator Plowman, the Senator from York, Senator Hobbins, and the Senator from Cumberland, Senator Alford, for really stepping up to the plate and listening constantly to concerns and trying to work to address some of those concerns. I've often thought of an analogy of getting to a place where your going, looking on a roadmap, and there are lots of different routes to take. I think that perhaps this might be another route to get us to where we're going, which is to lower health insurance for Maine people. I'm very hopeful that we will get to a place where all Maine citizens will reap the rewards of this mutual collaboration. If we find errors or we find things that are not working I hope that we will come back together and resolve those issues. I see heads nodding on both sides of the aisle, so that's also hopeful for me. I just want to say also on mic a thank you to the Revisor's Office for their tireless work and they really deserve a great deal of credit for their patience and kindness in working with us to get these

amendments done. Thank you very much. I urge your support of the pending motion. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Washington, Senator Raye.

Senator **RAYE:** Thank you Mr. President. Men and women of the Senate, I just wanted to rise for a moment to lend my support to the amendment before us and to urge the Senate to join with me in voting for its adoption. This is a very encouraging moment in this evening's debate. The Senator from Cumberland's amendment is an amendment that has strong support among the Majority leadership and the Majority caucus. It is designed to address some of the concerns that we've heard from both sides of the aisle in terms of providing a greater degree of clarity around the intent of the bill. It has the strong support of the good Chair, the Senator from Somerset, Senator Whittemore, and of the Senator from Androscoggin, Senator Snowe-Mello, as well, who have worked so hard to bring this bill to the floor. I want to compliment the Senator from Cumberland for presenting this and providing this opportunity for this Senate to demonstrate that we do listen respectfully to each other and that constructive dialogue with the goal of advancing the debate, addressing questions and concerns is welcomed and encouraged. This is how this process should work. I am very pleased to stand in support of this bi-partisan amendment that I believe will bring us to a bi-partisan conclusion to this very important debate and this very critically important work to solve a very serious problem that has been confronting the people of this state for a very long time. I hope you will join with me in voting in favor of adoption.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you Mr. President. Ladies and gentlemen of the Senate, I rise to say that I will support this amendment because it makes the entire bill better. I am still very, very concerned with where we are heading on this and what would have made the bill better would be to put 850 in there. This amendment doesn't do that. It seems to head towards there but it doesn't actually put 850 back. It doesn't take away the repeal of 850 and I have to wonder why. The clean and simple thing would have been to put 850 back in there and I have to wonder why that isn't done. There has to be a reason. That worries me greatly. I will support this amendment because overall it makes it better but I'm still very concerned about why we couldn't put 850 in its entirety back in.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Sagadahoc, Senator Goodall.

Senator **GOODALL:** Thank you Mr. President. Men and women of the Senate, it's getting late into the evening. I too rise in support of this amendment. I feel strongly that this amendment, and the efforts put forth, has driven this train in the right direction. I feel we are getting much closer to the station. However, I still, too, have a lot of concerns that were articulated by my good friend and colleague from Aroostook County. In addition to that, I think there are still opportunities to improve the bill and to address some of the more technical concerns that we expressed here on the floor this evening. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from Cumberland, Senator Diamond to Adopt Senate Amendment "H" (S-96) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#62)

YEAS: Senators: ALFOND, BARTLETT, BRANNIGAN, COLLINS, COURTNEY, CRAVEN, DIAMOND, FARNHAM, GERZOFSKY, GOODALL, HASTINGS, HILL, HOBBS, JACKSON, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PATRICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SCHNEIDER, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: None

ABSENT: Senator: BLISS

34 Senators having voted in the affirmative and no Senator having voted in the negative, with 1 Senator being absent, the motion by Senator **DIAMOND** of Cumberland to **ADOPT** Senate Amendment "H" (S-96) to Committee Amendment "A" (H-186), **PREVAILED.**

On motion by Senator **SCHNEIDER** of Penobscot, Senate Amendment "I" (S-99) to Committee Amendment "A" (H-186) **READ.**

Senate at Ease.

Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Schneider.

Senator **SCHNEIDER:** Thank you Mr. President. Men and women of the Senate, this is simply clarification to give comfort to those who are concerned that if the reinsurance pool were to go dry that there would not be an unlimited amount of fees put onto people's policies. What it does is, instead of allowing an unlimited amount, it maximizes the monthly amount to \$2 per month so that if the reinsurance pool, for some reason, runs out of money, which probably will not happen, hopefully, but should that occur they can go back to the Bureau of Insurance and ask for no more than \$2 per month on top of the \$4 that will already be paid per month. This is capping that fee and I do hope that you will support the pending motion and I appreciate your attention on the matter. I hope this gives comfort to everybody.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. Men and women of the Senate, I rise in support of this amendment and want to thank the good Senator from Penobscot for her bipartisan cooperation and clarification of the intent. It is the intent that it would never even have to go beyond the \$4 but we appreciate this additional intent. It also might be noted that it's the expectation that it will take much less than the \$4 assessment.

On motion by Senator **WHITTEMORE** of Somerset, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from Penobscot, Senator Schneider to Adopt Senate Amendment "I" (S-99) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#63)

YEAS: Senators: ALFOND, BARTLETT, BRANNIGAN, COLLINS, COURTNEY, CRAVEN, DIAMOND, FARNHAM, GERZOFKY, GOODALL, HASTINGS, HILL, HOBBS, JACKSON, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PATRICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SCHNEIDER, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: None

ABSENT: Senator: BLISS

34 Senators having voted in the affirmative and no Senator having voted in the negative, with 1 Senator being absent, the motion by Senator **SCHNEIDER** of Penobscot to **ADOPT** Senate Amendment "I" (S-99) to Committee Amendment "A" (H-186), **PREVAILED.**

On motion by Senator **SCHNEIDER** of Penobscot, Senate Amendment "J" (S-100) to Committee Amendment "A" (H-186) **READ.**

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Schneider.

Senator **SCHNEIDER:** Thank you Mr. President. Men and women of the Senate, there has been a lot of talk about what the term reasonable access is and this merely clarifies reasonable access in a definition section. It defines reasonable access to health care services as meaning that they may not require more

than 60 miles for specialty care and 30 miles of travel for primary. I'm hoping that this clarifies that issue and that those especially in the rural communities will feel that this gives them some comfort to their people in their districts. I hope that you will all support the pending motion. Thank you.

Senator **COURTNEY** of York moved to **INDEFINITELY POSTPONE** Senate Amendment "J" (S-100) to Committee Amendment "A" (H-186).

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY:** Thank you Mr. President. I think while this amendment has good intentions the reasonable access provision is set in the current law or through the Bureau of Insurance. Also I don't believe it is necessary because there is no penalty for going to your local hospitals.

On motion by Senator **ALFOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. Request to pose a question through the Chair.

THE PRESIDENT PRO TEM: The Senator may pose his question.

Senator **BARTLETT:** Thank you Mr. President. I am trying to understand this reasonable access issue. As I read the prior amendment that we adopted on reasonable access, it indicates that a carrier may provide incentives to use designated providers but may not require members to choose those designated providers. It seems to me that under that language you could simply not pay for non-designated. That could be your incentive. Is there some clarification that we could at least get on the record, some indication of what is and isn't allowed for that kind of incentive? Anyone who could shed some light on it.

THE PRESIDENT PRO TEM: The Senator from Cumberland, Senator Bartlett poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from York, Senator Hobbins.

Senator **HOBBS** of York inquired if the Senate was in violation of Senate Rule 514.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Plowman.

Senator **PLOWMAN:** Thank you Mr. President. What would be the proper motion for me to make to take a vote of the Body to continue our work past 9 o'clock. I understand it would need a majority vote of those present and voting. Would that be a roll call or a division?

Senator **RAYE** of Washington moved the Senate extend past 9:00 p.m., pursuant to Senate Rule 514.

Same Senator requested a Division.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK:** Thank you Mr. President. I am inquiring as to whether or not this is properly before the Body as it is after 9 o'clock?

THE PRESIDENT: The Chair would rule, as he's looking at the clock, it just struck 9 o'clock, so I would say it is properly before the Body.

At the request of Senator **RAYE** of Washington a Division was had. 32 Senators having voted in the affirmative and 1 Senator having voted in the negative, the motion by Senator **RAYE** of Washington to extend past 9:00 p.m., pursuant to Senate Rule 514, **PREVAILED.**

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Schneider.

Senator **SCHNEIDER:** Thank you Mr. President. Men and women of the Senate, I just want to speak one last time to urge your support for this clarification. I think it's an important one, especially for rural communities. I think it will give great comfort to some on this piece of legislation and I'm hoping that you will come along on this very, very simple clarification. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you Mr. President. Ladies and gentlemen of the Senate, I have to say again that I am very suspect as to why something like this cannot be put into this bill. It seems to be a very commonsense approach and I just am struck by why something like this couldn't be put in the bill unless there is someone somewhere out there that wants to charge rural areas more unless they go to urban areas. I'm going to support this and I hope you all do.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Washington, Senator Raye.

Senator **RAYE:** Thank you Mr. President. Men and women of the Senate, let the legislative record reflect that there is nothing in this legislation that would require anyone to travel to any particular provider. This is a well intentioned amendment that is completely unnecessary. While I appreciate the concern of the good Senator from Penobscot, let us be absolutely clear and let all those who shall interpret this law in future years be absolutely clear of the intent of this legislature. It is as the bill is written, there is no requirement for anyone to travel any number of miles to seek care.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON:** Thank you Mr. President. Ladies and gentlemen of the Senate, I would agree 100% with the previous speaker. Nothing makes anyone have to travel anywhere. My

concern is what people are going to be charged if they don't travel somewhere. I agree that they cannot be told to go anywhere, but I do believe that there is something here that would have people be charged, quite possibly, an exorbitant amount if they stayed with their local rural hospitals.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Bartlett.

Senator **BARTLETT:** Thank you Mr. President. I think the concern here, and I would agree with the Senator from Washington, is that there is nothing in the bill that denies coverage. The problem with the bill is by repealing 850 it appears that an insurance company could simply not cover certain providers. They could say they were only going to cover their preferred providers, which means you could end up having to travel a distance if there is nobody covering your area. I think the idea here, with this amendment, is to say they have to provide some coverage. They have to provide their lowest, they can still have incentives to go preferred members that may be a long drive away, but they at least have to provide some level of coverage within that 60 mile limit. I think is what the concern is, that under this law the insurance company could get around it that way. I know that isn't anybody's intent, but I do know insurance companies are very mindful of their bottom line. They are not always acting in the best interest of their customers in that regard. Thank you.

THE PRESIDENT PRO TEM: The Senator from Penobscot, Senator Schneider, requests unanimous consent of the Senate to address the Senate a third time on this matter. Hearing no objection, the Senator may proceed.

Senator **SCHNEIDER:** Thank you Mr. President. Men and women of the Senate, I just want to clarify, please vote against the pending motion, which is to Indefinitely Postpone. Please vote with my light. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Washington, Senator Raye.

Senator **RAYE:** Thank you Mr. President. Men and women of the Senate, again let the record reflect and let all those who shall interpret this record as well as interpret this law in the future very clearly understand that the intent of this legislature is, as the bill is written, that there is nothing to suggest that any carrier can make a denial such as was suggested by the Senator from Cumberland. I appreciate the opportunity to clarify, for the record for all those who shall look back through it over time to make interpretations, that the position of this legislature is crystal clear.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Sagadahoc, Senator Goodall.

Senator **GOODALL:** Thank you Mr. President. I request to pose a question through the Chair?

THE PRESIDENT PRO TEM: The Senator may pose his question.

Senator **GOODALL**: Thank you Mr. President. The question is, what is the harm of clarifying in the law this question specifically dealing with the amendment?

THE PRESIDENT PRO TEM: The Senator from Sagadahoc, Senator Goodall poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from Washington, Senator Raye.

Senator **RAYE**: Thank you Mr. President. I appreciate the opportunity to answer that question. The proposal before us, this amendment, is unnecessary and superfluous. I also wish to address the concern which has been expressed multiple times during this debate by the good Senator from Aroostook, Senator Jackson. I believe it's been answered before, but I am happy to repeat it. If any Mainer has an insurance policy they can go to any willing provider and the terms of their policy will be fulfilled. If you have 95% coverage you can go to your local hospital or any hospital you want to, regardless of cost or quality, and it will be covered under the terms of this law. The confusion appears to stem from the fact that if an insurance carrier wishes to offer an incentive to go to a higher quality, lower cost facility they are free to do so. That is not punitive to anyone. It is not punitive to anyone. You're insurance that you signed up for will be there for you. If you want to go to your local provider it is covered. If you want to take an incentive to go to a lower cost, higher quality facility, such as having your co-pay covered or something of that nature, that's fine. It is difficult, if not impossible, for me to understand how that could be considered punitive in any way to any insured person.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Sullivan.

Senator **SULLIVAN**: Thank you Mr. President. Men and women of the Senate, I'm sorry, I broke my promise. We already have a law that allows us to do this. It's a pilot program that any insurance company can do, to offer an incentive program. It's there. Law 850 was, at one time. Only two carriers have offered to offer that incentive program. While I understand the concern, and it was a concern earlier and it may be a concern of rural hospitals at some point in time. For the sake of the Maine citizen, we do allow that now as a pilot program. You have to go through the Bureau of Insurance for that. Sorry, I said I wouldn't stand up again. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Aroostook, Senator Jackson.

Senator **JACKSON**: Thank you Mr. President. Ladies and gentlemen of the Senate, I'm just going to say this, and I know it's the last time, but currently if someone goes to a hospital in Aroostook County, anyone last year and now this year this would take in Cary Medical Center, anyone who is a State employee or a legislator goes there they have to pay \$200 to go to one of those hospitals. If you go to Bangor you don't have to pay anything. Frank Johnson just clarified that 100% for me. This law, that we are going to do, is going to do the same thing to the private citizenry. If they go to a hospital that is not a preferred provider they are going to pay a higher deductible. What I'm not clear on is what the deductible is going to be. There is nothing in there that says how much is going to be charged. That is a

disincentive to go to your rural hospitals. It's just as simple as that. I don't know how else to say it. That's the way it is currently and this law is what we would be doing to the private citizens. Without knowing or taking that away and truly making it an incentive, or without knowing how high this deductible is going to be, that's a problem.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Somerset, Senator Whittemore.

Senator **WHITTEMORE**: Thank you Mr. President. I'd like to answer that for you. Whatever policy anyone chooses to purchase there will be a stated deductible, if there is one. That is all that they can charge for a deductible, what is stated in the policy. You'll know right up front what you will be paying.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Penobscot, Senator Plowman.

Senator **PLOWMAN**: Thank you Mr. President. I'm going to try to help a little with the 850. The deductible, as defined in your plan and policy and on your certificate of insurance, does not change. Everybody in your group continues to have the same deductible. What happens is that when you go to a preferred provider they have the ability to waive the payment of your deductible. Nothing goes up. You get a deal for going to the higher quality, better performing hospital. It's called an incentive to get the best health care for your money. There is no increase. Your deductible never changes. When you sign that contract for a year, your deductible will be whatever your plan negotiator negotiated for you. If it's a \$250 deductible it's a \$250 deductible. If you go to a preferred provider that meets the objective standards that have been set forth then you will get a deal on what you have to pay as part of your deductible. Your contract will never change, but you will get a discount, a deal, an incentive. The incentive is to make sure that when you get that treatment you don't need to be re-hospitalized, re-seen, or second guess the quality of care that you received or the level of testing and diagnostic material that has been provided to you to make that decision. It is not a subjective thing. It's an objective thing. You need to be confident in your contract that has been negotiated. It cannot change. The only thing that can change is the incentive that you are being offered to go to where it's best for the condition that you have and what you need to have done. It seems like that's what you would like you and your family to do. They encourage you to make sure that you don't have a re-cost because you didn't go to one of those facilities. Anyone who is not that facility is going to lose patients. If they want to get their patients back they will go to that objective list of criteria and they will start notching it off and getting themselves certified. It has been an incredible program so far. Again, your contract cannot change.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Androscoggin, Senator Craven.

Senator **CRAVEN**: Thank you Mr. President. May I pose a question through the Chair?

THE PRESIDENT PRO TEM: The Senator may pose her question.

Senator **CRAVEN**: Thank you Mr. President. The question that I have is, why is there so much resistance to adopting this amendment if there is no problem with adopting it? I just think that if there is no reason not to adopt it that we should.

THE PRESIDENT PRO TEM: The Senator from Androscoggin, Senator Craven poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from York, Senator Courtney.

Senator **COURTNEY**: Thank you Mr. President. Men and women of the Senate, I've had some time to kind of look this over through the eloquent debate on this amendment. I think one of the concerns is that perhaps it might interpreted that if you live less than 30 miles from your primary care physician that they might be able to require you to go more than 30 miles or go at least 30 miles. I think at this point that we ought to move forward.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Cumberland, Senator Alford.

Senator **ALFOND**: Thank you Mr. President. Ladies and gentlemen of the Senate, I also see no harm in adopting this amendment and I will be following the light of the good Senator from Penobscot. I also agree that the provider will honor policies but I wonder if, and this is a possibility in my mind because I don't see how it's spelled out, a policy could say that their going to provide zero percent coverage unless you go, or get yourself, to a preferred provider. What if that preferred provider is two hours away? Essentially, you are dictating, mandating, that people have to drive longer routes to get their health care. Again, I think was why we all are insistent that we should follow the light of the good Senator from Penobscot to insure that this is very crystal clear in this policy. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from York, Senator Sullivan.

Senator **SULLIVAN**: Thank you Mr. President. The incentives that were discussed many years ago, and probably would be still offered, would be if you were traveling any distance you would take your family. If it were a child, a parent could go down and stay free overnight or as long as the child was hospitalized. The incentive could be that, if it was your spouse, you could go down and stay. Another incentive that was brought was if you had an 80-20 split they might decide it would be better for them to pay 100% of your bill rather than the 80%. Back in the other Chamber when Representative Mayo, who was a Republican at that time and I was the Democrat, it was decided 100%. It was nothing more that you would pay. It was an incentive. They will pay 100% of it if you will go here. This was why I said some of the hospitals may not care for. This is where you would go like Maine Medical. Down where I live, if you had cancer and you wanted to go to Dana Farber they would send you there and they would give you an incentive to go there. They could not make you go. If you decided you wanted to go someplace else you could, you just wouldn't have the incentive. That's all it is, an incentive program. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK**: Thank you Mr. President. Ladies and gentlemen of the Senate, I was really hoping that the good Senator from York, the Majority Leader, would offer the offer he had earlier to support this and vote for the bill in its entirety. Well, I'm ready to drink the Kool-Aide. Thank you.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Lincoln, Senator Trahan.

Senator **TRAHAN**: Thank you Mr. President. Ladies and gentlemen of the Senate, I do rise to add something different to this discussion, a whole different perspective than the dollars we've been talking about and how they might affect individuals who travel to quality centers. Those of you who don't know it, years ago I was the driving force behind our state's medical errors reporting system that now exists and is seen as a model across the country for patient safety. This, to me, is not about money. I could care less about \$200 when it comes to the health care that my wife and family receives. There is an important piece of this whole discussion that hasn't been talked about. That is the experience and the expertise that comes with doing many, many procedures, the same procedures. Let's talk about rural parts of Maine, where the Senator from Aroostook represents. What if I said to you, Senator, that your constituents, if they traveled to Portland or Boston, could get a higher quality of care, have shorter recoveries, not have to go back to the hospital to deal complications related to the procedures, would the quality of that care matter? I think it would. I think it would for all of us. If we wiped out all of these provisions that restrict where you go, would it make the care better for your constituents? I bet we would all agree. I'd pay a little extra. When it comes to my wife's care, if she had a heart issue, I would want her to go to the best hospital. I don't care if it's in New Jersey or California and I don't want any restrictions.

I'm on the board of two hospitals; Miles and St. Andrews. We have an electronic monitoring system. Do you know what that system is for? It's to monitor patients that come into our rural hospitals by the people in Maine Medical, the people that see thousands of cases. Do you know why? Because they pick up minor, little things that physicians that only see a couple of cases would never pick up. Do you know what happens to those patients as soon as we pick up a problem? They go right down to Portland or they go to Boston, where they get the care quicker, they get it by more experienced physicians, and their cases are resolved quicker. I think what we're seeing is the growing pains of a world living through technology. We're having x-rays that are examined by people in India by radiologists. They are done overnight. The world's greatest experts are looking at our x-rays and telling us what's wrong with us. I want the best care. This actually corrects an inconsistency and unfairness that is in current law. Why should we, whose health care is exempt from 850, have better care than our constituents? I don't think we should. I think we should extend this benefit to both save money and get better care to all the people that live in Maine. That's all this bill does. If there are concerns about incentive, I would support incentives to send people down there. Do you know what the incentive is? It's to tell you where the best care is. I'll tell you right now, the specialists are in Cumberland County. Do you know why? That's where they want to live. They get together in Cumberland County. I just saw a neurologist a few days ago for an issue that I've had for a long time. I traveled to Portland. The building was full of experts in spinal surgery and neurology. I was

in and out of there and I had the best care that I could have imagined. I was glad to go to Portland. My point is, for me, this has nothing to do with money. This has to do with quality of care, patient safety, and reducing costs in our health care system by getting our patients to the best people for the quickest treatment. Thank you, Mr. President.

THE PRESIDENT PRO TEM: The pending question before the Senate is the motion by the Senator from York, Senator Courtney to Indefinitely Postpone Senate Amendment "J" (S-100) to Committee Amendment "A" (H-186). A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#64)

YEAS: Senators: BRANNIGAN, COLLINS, COURTNEY, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, CRAVEN, DIAMOND, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER, SULLIVAN

ABSENT: Senator: BLISS

22 Senators having voted in the affirmative and 12 Senators having voted in the negative, with 1 Senator being absent, the motion by Senator **COURTNEY** of York to **INDEFINITELY POSTPONE** Senate Amendment "J" (S-100) to Committee Amendment "A" (H-186), **PREVAILED**.

On motion by Senator **ALFOND** of Cumberland, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The pending question before the Senate is Adoption of Committee Amendment "A" (H-186) as Amended by Senate Amendments "H" (S-96) and "I" (S-99) thereto. A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#65)

YEAS: Senators: COLLINS, COURTNEY, DIAMOND, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SCHNEIDER, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK

ABSENT: Senator: BLISS

24 Senators having voted in the affirmative and 10 Senators having voted in the negative, with 1 Senator being absent, Committee Amendment "A" (H-186) as Amended by Senate Amendments "H" (S-96) and "I" (S-99) thereto, **ADOPTED**, in **NON-CONCURRENCE**.

Senator **ALFOND** of Cumberland **OBJECTED** to **SUSPENSION OF THE RULES** for the purpose of giving this Bill its **SECOND READING** at this time.

Same Senator requested a Division.

On motion by Senator **COURTNEY** of York, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The pending question before the Senate is Suspension of the Rules for the purpose of giving this Bill its Second Reading at this time. A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#66)

YEAS: Senators: COLLINS, COURTNEY, DIAMOND, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK, SCHNEIDER

ABSENT: Senator: BLISS

23 Senators having voted in the affirmative and 11 Senators having voted in the negative, with 1 Senator being absent, **SUSPENSION OF THE RULES** for the purpose of giving this Bill its **SECOND READING** at this time, **PREVAILED**.

Senator **COURTNEY** of York requested that H.P. 979 L.D. 1333 be **HELD**.

Same Senator requested a Roll Call.

Senate at Ease.

Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

Senator **COURTNEY** of York requested and received leave of the Senate to withdraw his request that H.P. 979 L.D. 1333 be **HELD**.

Under suspension of the Rules, **READ A SECOND TIME**.

PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-186) AS AMENDED BY SENATE AMENDMENTS "H" (S-96) AND "I" (S-99) thereto, in NON-CONCURRENCE.

Senator **ALFOND** of Cumberland moved the Senate **RECONSIDER** whereby the Bill was **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-186) AS AMENDED BY SENATE AMENDMENTS "H" (S-96) AND "I" (S-99) thereto, in NON-CONCURRENCE.**

Senate at Ease.

Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

On motion by Senator **ALFOND** of Cumberland, the Senate **RECONSIDERED** whereby the Bill was **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-186) AS AMENDED BY SENATE AMENDMENTS "H" (S-96) AND "I" (S-99) thereto, in NON-CONCURRENCE.**

On further motion by same Senator, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEM: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK:** Thank you Mr. President. Ladies and gentlemen of the Senate, colleagues and friends, I just want to go on record. I am actually feeling what I would call a little rushed and I wished I had the full ramifications of what all the amendments do in the totality of the bill. I'm hoping that it made it

better. With that being said, I don't feel confident enough or have enough knowledge of the whole thing to vote for it. Thank you.

THE PRESIDENT PRO TEM: The pending question before the Senate is Passage to be Engrossed as Amended by Committee Amendment "A" (H-186) as Amended by Senate Amendments "A" (S096) and "I" (S-99) thereto, in non-concurrence. A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#67)

YEAS: Senators: COLLINS, COURTNEY, DIAMOND, FARNHAM, HASTINGS, KATZ, LANGLEY, MARTIN, MASON, MCCORMICK, PLOWMAN, RAYE, ROSEN, SAVIELLO, SCHNEIDER, SHERMAN, SNOWE-MELLO, SULLIVAN, THIBODEAU, THOMAS, TRAHAN, WHITTEMORE, WOODBURY, THE PRESIDENT PRO TEM - CHRISTOPHER W. RECTOR

NAYS: Senators: ALFOND, BARTLETT, BRANNIGAN, CRAVEN, GERZOFISKY, GOODALL, HILL, HOBBS, JACKSON, PATRICK

ABSENT: Senator: BLISS

24 Senators having voted in the affirmative and 10 Senators having voted in the negative, with 1 Senator being absent, the Bill was **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-186) AS AMENDED BY SENATE AMENDMENTS "H" (S-96) AND "I" (S-99) thereto, in NON-CONCURRENCE.**

Ordered sent down forthwith for concurrence.

Senate at Ease.

Senate called to order by President Pro Tem **CHRISTOPHER W. RECTOR** of Knox County.

Senator **RAYE** of Washington was granted unanimous consent to address the Senate on the Record.

Senator **RAYE:** Thank you Mr. President. I cannot let this moment pass without extending my appreciation and my admiration to the President Pro Tem for the terrific and graceful job he has done a long and difficult day. Congratulations.

Senator **COURTNEY** of York was granted unanimous consent to address the Senate off the Record.

On motion by Senator **COURTNEY** of York, **ADJOURNED** to Thursday, May 12, 2011, at 11:00 in the morning.