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Bulletin 453

State Epidemiologist's Standing Order for COVID-19 Testing

(Supersedes Bulletin 451)

On March 12, 2020, under the powers granted by the Governor's emergency proclamation, I issued an order directing all carriers offering health plans subject to the Maine Health Plan Improvement Act, as defined at 24-A M.R.S. § 4301-A(7), to make medically necessary screening and testing for COVID-19 available with no deductible, copayment, or other cost sharing of any kind, including all associated costs such as processing fees and clinical evaluations. Carriers may not make first-dollar coverage under that order dependent on any prior authorization requirement, and may not make first-dollar coverage dependent on the use of network providers unless the enrollee is offered the service in-network without additional delay but chooses instead to visit an out-of-network provider or to be tested by an out-of-network laboratory.

On June 18, 2020, I issued Bulletin 450 to clarify the relationship between my March 12 Order and the Standing Order issued by the State Epidemiologist on June 8, authorizing SARS-CoV-2 molecular testing and laboratory analysis for anyone meeting one or more of the risk criteria described in the order. The Bulletin was reissued the next day as Bulletin 451 to address minor revisions to the Standing Order.

Today, a revised Standing Order was issued that makes any individual in Maine who is at least 12 months old eligible for testing.¹ Because the Standing Order no longer refers to defined risk criteria, those references in Bulletins 450 and 451 are now obsolete. However, the revised Standing Order does not change the obligations of insurance carriers or other third-party payers, and guidance issued today by the Department of Health and Human Services specifically clarifies that point.²

¹ Available online at <https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/documents/StandingOrder-Sept-2020-Update.pdf>

² Available online at <https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/documents/Standing-Order-FAQ-9-22-20.pdf>



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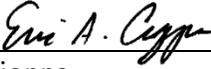
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As explained in Bulletin 451, coverage is only mandatory under my March 12 order for testing, screening, and related services that are “medically necessary” within the meaning of the Health Plan Improvement Act. This means they must be “provided to an enrollee for the purpose of preventing, diagnosing or treating an illness, injury or disease or the symptoms of an illness, injury or disease.”³ This requirement encompasses testing conducted in response to known exposure or to the elevated risk factors described in the prior version of the Standing Order, which “include, though are not limited to, seasonal and migrant agricultural workers, employees of lodging facilities, employees of businesses who have direct, daily contact with members of the public, people arriving from states with a COVID-19 prevalence higher than that in Maine, people participating in large gatherings, or other individuals who may be at increased risk of COVID-19 based on the duration and density of their recent, potential exposures.” As explained in the DHHS guidance, this does not include “surveillance testing[, which] is asymptomatic, community- or population-level testing to understand the incidence or prevalence of the disease in a group.... Insurance carriers are not required to cover periodic testing by employers, including testing which is federally required such as that of nursing facility staff.”

September 22, 2020



Eric A. Cioppa
Superintendent of Insurance

NOTE: This Bulletin is intended solely for informational purposes. It is not intended to set forth legal rights, duties, or privileges, nor is it intended to provide legal advice. Readers should consult applicable statutes and rules and contact the Bureau of Insurance if additional information is needed.

³ 24-A M.R.S. § 4301-A.