

MAINE STATE LEGISLATURE

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SECOND REGULAR SESSION

ONE HUNDRED AND NINTH LEGISLATURE

Legislative Document

No. 1693

S. P. 654

Office of the Secretary of the Senate

The Committee on Health and Institutional Services suggested. Approved for introduction by the Legislative Council pursuant to Joint Rule 26.

MAY M. ROSS, Secretary of the Senate

Presented by Senator Clark of Cumberland

Cosponsor: Senator Perkins of Hancock

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY

AN ACT to Provide Arthritic Drugs to Eligible Individuals under the Low Cost Drug Program.

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

Sec. 1. 36 MRSA § 6151, as enacted by PL 1977, c. 718, § 3, is amended to read:

§ 6151. Purpose

The purpose of this Part is to determine and certify the eligibility status of individuals for the elderly low cost drug program **and to expand the number of low cost drugs which are available to eligible individuals.**

Sec. 2. 36 MRSA § 6156 is enacted to read:

§ 6156. Expansion of drugs available

The Department of Human Services shall include for eligible recipients of drugs under the elderly low cost drug program, all arthritic drugs which are available under the State Medicaid Program.

Sec. 3. Appropriation. The following funds shall be appropriated from the General Fund to carry out the purposes of this Act.

HUMAN SERVICES, DEPARTMENT OF
Low Cost Drug Program

1980-81

\$240,000

STATEMENT OF FACT

The common treatment for rheumatoid arthritis is rest, physical therapy and aspirin (salicylates), the objective being the reduction of inflammation and pain. However, the high doses of aspirin which are necessary to achieve anti-inflammation cannot be tolerated by numerous individuals. Anti-inflammatory drugs, such as Motrim, Butazolidin, Indocin, Naprosyn, and Nalfon, can be tolerated in situations when high doses are necessary. Therefore, it is justified that these arthritic drugs be made available through the Low Cost Drug Program.

Furthermore, these drugs are made available to State Medicaid Program recipients. It seems that the prescribing of these drugs has been accepted by the State Medicaid Program and that the Low Cost Drug Program should provide the same drugs to eligible recipients.