

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)

SAC
ROS

L.D. 93

Date:

6/16/25 Majority

(Filing No. H-728)

HEALTH AND HUMAN SERVICES

Reproduced and distributed under the direction of the Clerk of the House.

**STATE OF MAINE
HOUSE OF REPRESENTATIVES
132ND LEGISLATURE
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT "A" to H.P. 58, L.D. 93, "An Act to Reduce Cost and Increase Access to Disease Prevention by Expanding the Universal Childhood Immunization Program to Include Adults"

Amend the bill by inserting after section 2 the following:

'Sec. 3. 22 MRSA §1066, sub-§2, ¶A-1 is enacted to read:

A-1. "AAF" means an assessment adjustment factor to adjust for variations between health insurance carriers to maintain equity in assessment allocations among assessed entities.'

Amend the bill by inserting after section 7 the following:

'Sec. 8. 22 MRSA §1066, sub-§3, ¶B, as enacted by PL 2009, c. 595, §2, is amended to read:

~~B. With the exception of the representative of the pharmaceutical manufacturing industry, who serves a one-year term, the~~ The term of an appointed member to the board is 3 years. All members, with the exception of the representative of the pharmaceutical manufacturing industry, may serve successive terms. A member whose term has expired may serve until the appointment of the member's successor.

Sec. 9. 22 MRSA §1066, sub-§3, ¶D, as enacted by PL 2009, c. 595, §2, is amended to read:

D. The board shall meet 4 not fewer than 2 times per year and when a meeting is called by the chair and shall oversee the fund and program and adopt policies and procedures to administer the program and the fund.

Sec. 10. 22 MRSA §1066, sub-§3, ¶E, as enacted by PL 2009, c. 595, §2, is amended to read:

E. By January 1, 2011 and annually thereafter, the board shall determine the list of vaccines to be made available by the program during the succeeding program year beginning July 1st. In making its determination, the board shall consider:

- 1 (1) Vaccines recommended by the advisory committee that are available under
- 2 contract with the United States Department of Health and Human Services, Centers
- 3 for Disease Control and Prevention, by direct manufacturer purchase, through the
- 4 Minnesota Multistate Contracting Alliance for Pharmacy or a successor
- 5 organization or by any other low-cost bulk purchase option;
- 6 (2) Recommendations of the department, ~~based on the department's review of the~~
- 7 ~~advisory committee recommendations;~~ and
- 8 (3) Clinical and cost-benefit analyses.
- 9 The board shall review new vaccines and update the list of vaccines to be made
- 10 available through the program on a timely basis in accordance with the considerations
- 11 described in this paragraph.'
- 12 Amend the bill by striking out all of section 8 and inserting the following:
- 13 'Sec. 8. 22 MRSA §1066, sub-§5, as enacted by PL 2009, c. 595, §2, is amended
- 14 to read:
- 15 5. Assessments. By January 1, 2011 and annually thereafter, the board shall determine
- 16 ~~an assessment one or more assessments~~ for each assessed entity in accordance with this
- 17 subsection. The board shall provide a mechanism to protect against duplicate counting of
- 18 ~~children individuals~~. The board may conduct an audit of the number of covered life months
- 19 ~~for children individuals~~ as reported by an assessed entity. An assessment determination
- 20 made pursuant to this subsection is an adjudicatory proceeding within the meaning of Title
- 21 5, chapter 375, subchapter 4.
- 22 A. In determining the amount of the assessment, the board shall, as it determines
- 23 appropriate following a public hearing, establish one or more subfunds by age and
- 24 coverage type and, for each subfund:
- 25 (1) Determine the total costs of the ~~fund~~ subfund for the succeeding program year;
- 26 (2) Add a reserve of up to 10% of the total costs of the ~~fund~~ subfund under
- 27 subparagraph (1) for unanticipated costs associated with providing vaccines to
- 28 ~~children individuals~~ covered by the assessed entity;
- 29 (2-A) Add an administrative allowance for the department of up to 10% of the
- 30 total costs of the subfund;
- 31 (3) Subtract the amount of any unexpended assessments collected in the preceding
- 32 year and any unexpended interest accrued to the ~~fund~~ subfund during the preceding
- 33 year; and
- 34 (4) Calculate the assessment on a monthly basis per ~~child~~ individual to be paid by
- 35 an assessed entity by dividing the amount determined in accordance with
- 36 subparagraphs (1), (2), ~~(2-A)~~ and (3) by the number of ~~children individuals~~
- 37 projected to be covered by the assessed entity during the succeeding program year
- 38 divided by 12.
- 39 B. The board shall provide the assessed entity with notice of the assessment amount
- 40 for each subfund established pursuant to paragraph A for the succeeding program year
- 41 no later than January 1, 2011 and annually thereafter.

1 C. Beginning July 1, 2011 2025, the assessment must be paid on a quarterly basis as
2 follows:

3 (1) An assessed entity shall pay a quarterly assessment for each subfund
4 established pursuant to paragraph A equal to the monthly assessment rate per ~~child~~
5 individual as described under paragraph A, subparagraph (4) multiplied by the
6 number of ~~child~~ individual member months covered by the assessed entity in the
7 preceding calendar quarter; and

8 (2) The assessment must be paid within 45 days following the close of the calendar
9 quarter.

10 D. After the close of a program year, the board shall reconcile the total assessments
11 paid by assessed entities, including interim assessments determined under paragraph
12 E, with the actual costs of vaccines provided under the program to ~~children~~ individuals
13 covered by assessed entities during that program year and the annual operating
14 expenses of the program during that program year. Any unexpended assessments must
15 be used to reduce the assessment for the respective subfund established pursuant to
16 paragraph A in the succeeding program year as required under paragraph A,
17 subparagraph (3).

18 E. The board may determine an interim assessment for new vaccines that the board
19 has made available through the program pursuant to subsection 3, paragraph E. The
20 board shall calculate the interim assessment in accordance with paragraph A, and the
21 interim assessment is payable the calendar quarter that begins no less than 30 days
22 following the establishment of the federal contract price. The board may not impose
23 more than one interim assessment per year, except in the case of a public health
24 emergency declared in accordance with state or federal law.

25 F. If the combination of funding available from the United States Department of Health
26 and Human Services, Centers for Disease Control and Prevention, Vaccines for
27 Children Program and the immunization grant program under the federal Public Health
28 Service Act, Section 1928 of the Social Security Act, 42 United States Code, Section
29 1396s is insufficient to provide coverage for vaccines for the children who qualify for
30 vaccines under the Vaccines for Children Program, money from the fund may not be
31 used to cover the cost of vaccines for children who would otherwise be provided
32 vaccines under the Vaccines for Children Program.

33 G. If the assessments under this subsection are insufficient to cover the cost of vaccines
34 to be provided to ~~children~~ individuals covered by assessed entities, the State is not
35 required to cover the cost of vaccines for those ~~children~~ individuals.

36 H. For any subfund established pursuant to paragraph A after June 2025, after one year
37 of operation and until discontinued by a 2/3 vote of the board determining that the
38 adjustments described in this paragraph are not needed to maintain equity in assessment
39 allocations among assessed entities, the following apply:

40 (1) Annually, assessed entities shall supply such data as may be determined by the
41 board to be necessary for the purposes of this subsection and reasonably convenient
42 for the assessed entities to supply in order to enable the calculations of the AAF
43 for each entity, to multiply by the otherwise applicable assessment amount to adjust
44 for variations between entities in the split between participating and

nonparticipating providers in vaccine costs of that entity's covered individuals.
The service agent shall compute the AAF annually for each entity based on
supplied data;

(2) Annually, AAF calculations must be completed during the first quarter of each
calendar year; and

(3) Each assessment amount otherwise calculated in accordance with this
subsection must be multiplied by the AAF for the respective entity to compute the
final assessment due.'

Amend the bill by inserting after section 11 the following:

'Sec. 12. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF

Maine Center for Disease Control and Prevention 0143

Initiative: Establishes 2 Public Health Educator III positions in the Maine Center for Disease Control and Prevention program, effective July 1, 2026, to expand the Universal Childhood Immunization Program to provide immunizations to and cover the costs of recommended vaccines for adults in the State and provides funding for related All Other costs.

FEDERAL EXPENDITURES FUND	2025-26	2026-27
POSITIONS - LEGISLATIVE COUNT	0.000	2.000
Personal Services	\$0	\$202,025
All Other	\$0	\$19,536
FEDERAL EXPENDITURES FUND TOTAL	\$0	\$221,561

Medical Care - Payments to Providers 0147

Initiative: Reduces funding to reflect cost savings in the Medical Care - Payments to Providers program resulting from the procurement of vaccines for adults in the MaineCare program at the discounted United States Centers for Disease Control and Prevention price beginning July 1, 2026.

GENERAL FUND	2025-26	2026-27
All Other	\$0	(\$302,107)
GENERAL FUND TOTAL	\$0	(\$302,107)

FEDERAL EXPENDITURES FUND	2025-26	2026-27
All Other	\$0	(\$482,180)
FEDERAL EXPENDITURES FUND TOTAL	\$0	(\$482,180)

**HEALTH AND HUMAN SERVICES,
DEPARTMENT OF
DEPARTMENT TOTALS**

2025-26	2026-27
----------------	----------------

GENERAL FUND	\$0	(\$302,107)
FEDERAL EXPENDITURES FUND	\$0	(\$260,619)
DEPARTMENT TOTAL - ALL FUNDS	\$0	(\$562,726)

Sec. 13. Effective date. This Act takes effect July 1, 2026.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

This amendment makes changes to the bill, which amends the law governing the Universal Childhood Immunization Program to expand the program to provide immunizations to and cover the costs of recommended vaccines for adults in the State. It removes references to the United States Centers for Disease Control and Prevention Advisory Committee on Immunization Practices. It specifies the process for distributing total annual program costs among payers by adding assessment calculation language. It adds other options for the purchase of low-cost vaccines, in addition to the federal Vaccines for Children Program. It adds an appropriations and allocations section and an effective date of July 1, 2026.

FISCAL NOTE REQUIRED

(See attached)

**132nd MAINE LEGISLATURE****LD 93****LR 253(02)****An Act to Reduce Cost and Increase Access to Disease Prevention by Expanding the Universal
Childhood Immunization Program to Include Adults****Fiscal Note for Bill as Amended by Committee Amendment****Committee: Health and Human Services****Fiscal Note Required: Yes****A (H-728)****Fiscal Note**

	FY 2025-26	FY 2026-27	Projections FY 2027-28	Projections FY 2028-29
Net Cost (Savings)				
General Fund	\$0	(\$302,107)	(\$553,935)	(\$553,935)
Appropriations/Allocations				
General Fund	\$0	(\$302,107)	(\$553,935)	(\$553,935)
Federal Expenditures Fund	\$0	(\$260,619)	(\$648,754)	(\$641,677)
Revenue				
Federal Expenditures Fund	\$0	(\$260,619)	(\$648,753)	(\$641,677)

Fiscal Detail and Notes

Expanding the State's Universal Childhood Immunization Program to cover the costs of recommended vaccines for adults will enable the Department of Health and Human Services to procure vaccine for adults in the MaineCare program at the U.S. Centers for Disease Control and Prevention discounted vaccine prices. The bill includes General Fund deappropriations to the Department of Health and Human Services of \$302,107 in fiscal year 2026-27 based on the cost savings from the discounted vaccine prices available to the MaineCare program. It also includes Federal Expenditure Fund deallocations for the FMAP match. Projected General Funds deappropriations and Federal Expenditure Fund deallocations are larger in future years as the changes in the bill are fully implemented.

The bill also includes Federal Expenditure Funds allocations to the department of \$221,561 in fiscal year 2026-27 for two federally-funded Public Health Educator III positions to implement the changes to the immunization program.

C"A"(H-728)

The bill is expected to increase costs to the State Employee Health Plan (SEHP) through the assessments collected from insurers for adult vaccines purchased by the Universal Childhood Immunization Program and reduce costs to the SEHP as adult vaccines covered by the program will be available to medical providers at no cost, reducing insurance claims for adult vaccines. A more precise estimate of the net fiscal impact cannot be determined at this time.