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L.D. 1661	1
Date: $(\ell \ell \ell) $ (Filing No. S-23)	2
HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES	3
Reproduced and distributed under the direction of the Secretary of the Senate.	4
STATE OF MAINE	5
SENATE	6
129TH LEGISLATURE	. 7
FIRST REGULAR SESSION	8
COMMITTEE AMENDMENT " A v to S.P. 538, L.D. 1661, Bill, "An Act To Create the Drug Donation and Redispensing Program"	9 10
Amend the bill in section 2 in §2700-B by inserting after subsection 5 the following:	11
6. Immunity from liability. A person may not be subject to any civil or criminal	12
liability, or to any discipline by a professional licensing board, for any action taken in good faith in accordance with this section.'	13 14
Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.	15 16
SUMMARY	17
This amendment adds a provision to protect a person from civil or criminal liability	18
and from professional discipline of a licensing board for actions taken by a person in	19
good faith in accordance with the requirements of the drug donation and redispensing	20
program established in the bill.	21
FISCAL NOTE REQUIRED	22
(See attached)	23

"Total of

(Tamper)

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COMMITTEE AMENDMENT



129th MAINE LEGISLATURE

LD 1661

LR 2470(02)

An Act To Create the Drug Donation and Redispensing Program

Fiscal Note for Bill as Amended by Committee Amendment "#" (Solar) Committee: Health Coverage, Insurance and Financial Services Fiscal Note Required: Yes

Fiscal Note

Current biennium cost increase - General Fund

Fiscal Detail and Notes

This bill establishes the drug donation and redispensing program under the Department of Health and Human Services (DHHS). The program collects donations of unused prescription and legend drugs from health care providers, health care facilities and other sources, including at drop-off locations throughout the State, and redispenses the drugs through participating pharmacies to qualified low-income persons. The DHHS would need to create a number of new positions to run the program, identify spaces for designated donation sites, obtain a warehouse to store drugs or contract with a third-party wholesaler, create a system to transport the drugs from donation sites to a central warehouse and to pharmacies or secure disposal sites, create an outreach program to acquire participating pharmacies and to acquire or increase liability insurance to mitigate the risks associated with the potential adverse affects of a recipient acquiring and ingesting drugs not intended for his/her treatment. Additionally, the DHHS is concerned that pharmacies will be unable to determine if a person's family income is equal to or less than 350% of the federal poverty level for most residents. As there are no programs currently handled by the DHHS similar to this program, many of these costs are unknown. No estimate of the costs of the program can be determined at this time.