

# MAINE STATE LEGISLATURE

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Date: 3/16/20

(Filing No. H-772)

**HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES**

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**STATE OF MAINE  
HOUSE OF REPRESENTATIVES  
129TH LEGISLATURE  
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 1493, L.D. 2096, Bill, "An Act To Save Lives by Capping the Out-of-pocket Cost of Certain Medications"

Amend the bill by striking out everything after the enacting clause and inserting the following:

**'PART A**

**Sec. A-1. 24-A MRSA §4317-C is enacted to read:**

**§4317-C. Coverage for prescription insulin drugs; limit on out-of-pocket costs**

**1. Definition.** As used in this section, "insulin" has the same meaning as in Title 32, section 13786-D, subsection 1, paragraph A.

**2. Limit on out-of-pocket costs.** A carrier that provides coverage for prescription insulin drugs may not impose any deductible, copayment, coinsurance or other cost-sharing requirement on an enrollee for that coverage that results in out-of-pocket costs to the enrollee that exceed \$35 per prescription for a 30-day supply of covered prescription insulin drugs, regardless of the amount of insulin needed to fill the enrollee's insulin prescriptions.

**3. Other cost sharing.** This section does not prevent a carrier from setting an enrollee's cost-sharing requirement for one or more insulin drugs at an amount lower than the maximum amount specified in this section.

**4. Rules.** The superintendent may adopt rules to implement and administer this section to align with applicable federal requirements. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

**Sec. A-2. Application.** The requirements of this Part apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2021. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

**COMMITTEE AMENDMENT**

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**PART B**

**Sec. B-1. 32 MRSA §13786-D** is enacted to read:

**§13786-D. Prescribing and dispensing insulin**

**1. Definitions.** As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

**A. "Insulin"** includes various types of insulin analogs and insulin-like medications, regardless of activation period or whether the solution is mixed before or after dispensation.

**B. "Insulin-related devices and supplies"** means needles, syringes, cartridge systems, prefilled pen systems, glucose meters and test strips. "Insulin-related devices and supplies" does not include insulin pump devices.

**2. Authorization.** As authorized by the board in accordance with rules adopted under subsection 3, a pharmacist may dispense emergency refills of insulin and associated insulin-related devices and supplies by prescription drug order or standing order or pursuant to a collaborative practice agreement authorizing insulin to be dispensed. The insulin dispensed under this subsection must be in a quantity that is the lesser of a 30-day supply and the smallest available package. The intended recipient shall provide evidence of a previous prescription from a practitioner and attest that a refill of that previous prescription may not be readily or easily obtained under the circumstances.

**3. Rules; protocols.** The board by rule shall establish standards for authorizing pharmacists to dispense insulin in accordance with subsection 2, including adequate training requirements and protocols for dispensing insulin. Rules adopted under this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.'

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

**SUMMARY**

This amendment replaces the bill. Part A provides that a health insurance carrier that provides coverage for prescription insulin drugs may not impose a cost-sharing requirement on an enrollee that results in out-of-pocket costs to the enrollee in excess of \$35 per prescription for a 30-day supply of insulin. The requirements apply to all health insurance policies issued or renewed on or after January 1, 2021.

Part B authorizes a pharmacist to dispense emergency refills of insulin and associated insulin-related supplies. The amendment requires that the insulin dispensed be in a quantity that is the lesser of a 30-day supply and the smallest available package. The amendment also requires the Maine Board of Pharmacy to adopt rules to establish adequate training requirements and protocols for dispensing insulin.

**FISCAL NOTE REQUIRED**  
(See attached)



# 129th MAINE LEGISLATURE

LD 2096

LR 3128(02)

## An Act To Save Lives by Capping the Out-of-pocket Cost of Certain Medications

Fiscal Note for Bill as Amended by Committee Amendment *A. (H-772)*  
Committee: Health Coverage, Insurance and Financial Services

Fiscal Note Required: Yes

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### Fiscal Note

Minor cost increase - All funds

#### Fiscal Detail and Notes

The bill provides that a health insurance carrier may not impose a cost-sharing requirement in excess of \$35 for insulin drugs for a 30 day supply. The Maine State Employee Health Plan has indicated that it does not anticipate a significant increase in costs as a result of this cost-sharing limit given the amounts that are currently charged. Any costs, which are expected to be minor, would likely be reflected through increased premium amounts in future fiscal years.

Additional costs to the Department of Professional and Financial Regulation and the Maine Board of Pharmacy associated with the rulemaking process can be absorbed within existing budgeted resources.