## MAINE STATE LEGISLATURE

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Date: 4/2/24

(Filing No. S-(65))

3	HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES
4	Reproduced and distributed under the direction of the Secretary of the Senate.
5	STATE OF MAINE
6	SENATE
7	131ST LEGISLATURE
8	SECOND REGULAR SESSION
9 10	COMMITTEE AMENDMENT "A" to S.P. 907, L.D. 2114, "An Act to Improve Patient Access to and Savings from Generic Drugs and Biosimilars"
11	Amend the bill by striking out the title and substituting the following:
12 13	'Resolve, Directing the Superintendent of Insurance to Collect Data from Health Insurers Related to Prescription Drug Coverage of Generic Drugs and Biosimilars'
14	Amend the bill by striking out everything after the title and inserting the following:
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	'Sec. 1. Superintendent of Insurance to collect data on prescription drug coverage of generic drugs and biosimilars. Resolved: That the Superintendent of Insurance shall request data from health insurance carriers that, at a minimum, provides information related to each carrier's placement of generic drugs and biosimilars on the carrier's prescription drug formulary, including whether a generic drug or biosimilar is available on the carrier's formulary with a lower out-of-pocket cost to an enrollee than the brand drug to which the generic drug or biosimilar is equivalent and whether the carrier imposes any limitation on coverage of a generic drug or biosimilar or imposes a restriction on a pharmacy that makes it more difficult for an enrollee to obtain coverage of or access to a generic drug or biosimilar than the brand drug to which the generic drug or biosimilar is equivalent. No later than February 15, 2025, the superintendent shall submit a report to the joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters that summarizes the data submitted by the carriers as requested, together with any findings or recommendations of the superintendent. The joint standing committee may report out a bill to the 132nd Legislature in 2025 based on the report.'  Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.
33	SUMMARY
34 35	This amendment replaces the bill with a resolve. The amendment directs the Superintendent of Insurance to request data from health insurance carriers related to each

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# COMMITTEE AMENDMENT " A" to S.P. 907, L.D. 2114 (5-651)

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carrier's placement of generic drugs and biosimilars on the carrier's prescription drug formulary, including whether a generic drug or biosimilar is available on the carrier's formulary with a lower out-of-pocket cost to an enrollee than the brand drug to which the generic drug or biosimilar is equivalent and whether the carrier imposes any limitation on coverage of a generic drug or biosimilar or imposes a restriction on a pharmacy that makes it more difficult for an enrollee to obtain coverage of or access to a generic drug or biosimilar than the brand drug to which the generic drug or biosimilar is equivalent. The amendment requires the Superintendent of Insurance to report on the data submitted by the carriers as requested, together with any findings or recommendations of the superintendent, no later than February 15, 2025. The joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters may report out a bill to the 132nd Legislature in 2025 based on the report.

### FISCAL NOTE REQUIRED

(See attached)

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## 131st MAINE LEGISLATURE

LD 2114

LR 2790(02)

An Act to Improve Patient Access to and Savings from Generic Drugs and Biosimilars

Fiscal Note for Bill as Amended by Committee Amendment '\( \frac{1}{5} \) Committee: Health Coverage, Insurance and Financial Services

Fiscal Note Required: Yes

### **Fiscal Note**

Minor cost increase - Other Special Revenue Funds

#### Fiscal Detail and Notes

Any additional costs to the Department of Professional and Financial Regulation from the provisions of this bill are expected to be minor and can be absorbed within existing budgeted resources.