

MAINE STATE LEGISLATURE

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131st MAINE LEGISLATURE

SECOND REGULAR SESSION-2024

Legislative Document

No. 2282

S.P. 996

In Senate, March 27, 2024

**An Act to Provide Greater Transparency About the Cost of Insulin
and to Promote the Availability of Low-cost Insulin in the State**

Reported by the Majority from the Joint Standing Committee on Health Coverage,
Insurance and Financial Services pursuant to Joint Order 2023, S.P. 968.

A handwritten signature in black ink, appearing to read 'D M Grant'.

DAREK M. GRANT
Secretary of the Senate

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

2 **Sec. 1. 22 MRSA §8731, sub-§1-B** is enacted to read:

3 **1-B. Category of insulin.** "Category of insulin" means rapid-acting, short-acting,
4 intermediate-acting, long-acting and premixed insulin for which at least 2 licenses have
5 been issued by the federal Food and Drug Administration and are actively marketed
6 pursuant to such licensure in a category.

7 **Sec. 2. 22 MRSA §8731, sub-§2-A** is enacted to read:

8 **2-A. Insulin.** "Insulin" has the same meaning as in Title 32, section 13786-D,
9 subsection 1, paragraph A and includes insulin or an insulin pen that is licensed under the
10 federal Public Health Service Act, 42 United States Code, Section 262(a) or 262(k).

11 **Sec. 3. 22 MRSA §8732, sub-§3** is enacted to read:

12 **3. Notification by manufacturers of wholesale acquisition cost for insulin.** No later
13 than February 15th of each year, a manufacturer of insulin shall notify the organization of
14 the wholesale acquisition cost per pricing unit for the insulin produced by the manufacturer
15 in each category of insulin.

16 **Sec. 4. 32 MRSA §13800-D, sub-§2,** as enacted by PL 2021, c. 303, §5, is amended
17 to read:

18 **2. Exception.** A manufacturer that is a nonprofit organization or whose aggregate
19 total of insulin sold, delivered or distributed in this State does not exceed 500,000 units of
20 insulin in the year in which a registration fee under subsection 1 is due is not required to
21 pay the registration fee. To qualify for the exception under this subsection, a manufacturer
22 must demonstrate to the board, by January 31st of the year following the year in which the
23 registration fee is due, in a manner determined by the board, that the aggregate total of
24 insulin produced by the manufacturer that was sold, delivered or distributed within this
25 State in the year in which the manufacturer seeks to claim the exception did not exceed
26 500,000 units. The board may adopt rules to implement this section. Rules adopted
27 pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375,
28 subchapter 2-A.

29 **SUMMARY**

30 This bill is being reported out by the Joint Standing Committee on Health Coverage,
31 Insurance and Financial Services pursuant to Joint Order 2023, S.P. 968. The bill requires
32 a manufacturer of insulin to notify the Maine Health Data Organization no later than
33 February 15th of each year of the wholesale acquisition cost for the insulin produced by
34 the manufacturer in each category of insulin. The bill also provides that a manufacturer of
35 insulin that is a nonprofit organization is not required to pay an annual insulin product
36 registration fee.

37 **FISCAL NOTE REQUIRED**

38 **(See attached)**



131st MAINE LEGISLATURE

LD 2282

LR 3161(01)

An Act to Provide Greater Transparency About the Cost of Insulin and to Promote the Availability of Low-cost Insulin in the State

Fiscal Note Original Bill

Committee: Health Coverage, Insurance and Financial Services

Fiscal Note Required: Yes

Fiscal Note

Current biennium revenue decrease - Other Special Revenue Funds

Minor cost increase - General Fund

Fiscal Detail and Notes

This bill exempts a manufacturer of insulin that is a nonprofit organization from paying the \$75,000 registration fee. It is unclear whether any such organizations currently manufacture insulin, but manufacturers of 500,000 units or less are already exempt from the fee. Any decrease in dedicated revenue to the Maine Board of Pharmacy within the Department of Professional and Financial Regulation cannot be determined at this time.

Any additional costs to the Maine Health Data Organization from the provisions of this bill are expected to be minor and can be absorbed within existing budgeted resources.