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February 12, 2025

Senator Margaret Rotundo, Chair
Representative Drew Gattine, Chair
Members of the Appropriations and Financial Affairs Committee

Senator Henry Ingwersen, Chair
Representative Michele Meyer, Chair
Members of the Health and Human Services Committee

RE: Testimony IN OPPOSITION - LD 210, Language Part "SS" Establishes a \$0.70 cents per pharmacy prescription assessment on pharmacy providers

Dear Senator Rotundo, Representative Gattine and members of the Appropriations and Financial Affairs Committee, and Senator Ingwersen, Representative Meyer and members of the Health and Human Services Committee:

My name is Douglas Edinger and I am a pharmacist at and owner of Seaside Pharmacy. I have been practicing pharmacy for 48 years. I am a resident of Stonington, Maine. I am submitting testimony in opposition of LD 210 part SS which establishes a \$0.70 cent per pharmacy prescription assessment on pharmacy providers.

It is well-documented that pharmacies are financially struggling and need relief from the practices of the pharmaceutical benefit managers. Researching my 2024 dispensing history, I find that 10.49% of my pharmacy claims were filled at a loss that averaged \$6.74 per claim. Additionally, a significant percentage of my pharmacy claims were paid at less than one dollar.

I filled a 90-day supply prescription today that the pharmaceutical benefit manager paid me a grand total of 56 cents. Without factoring the cost of the medication; the vial, cover, label, ink, bag, staple, switching fee, cash-out receipt costs me 82 cents. And now you want another 70 cents.

This is not sustainable. I think you will find that a significant number of small Maine pharmacies closed their doors in 2023 and most chain pharmacies announced store closings in 2024.

You may want to consider doing your own research on what I am about to suggest as I think it may be appropriate for you to consider a per prescription tax on the pharmaceutical benefit management companies. I have seen some evidence that suggests that they have a better per prescription margin than the retail pharmacies. While we survive on the thinnest of margins, the pharmaceutical benefit managers are doing quite well. It is my understanding that even the insurance brokers who sell plans that benefit the PBMs make a per prescription profit.

Thank you for considering my thoughts on this issue. I would greatly appreciate it if you would decide to not implement this assessment on the pharmacy providers.

Sincerely,

A handwritten signature in black ink that reads "Doug R Edinger, RPh". The signature is written in a cursive, slightly slanted style.

Douglas R. Edinger, R.Ph.