

Testimony of Anthem Blue Cross and Blue Shield

In Opposition to L.D. 582,

“An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances”

March 4, 2025

Good afternoon, Senator Bailey, Representative Mathieson, and Members of the Health Coverage, Insurance, and Financial Services Committee. My name is Kristine Ossenfort, and I am the Senior Government Relations Director for Anthem Blue Cross and Blue Shield in South Portland, Maine. I appear before you this morning to testify in opposition to L.D. 582, “An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances.”

L.D. 582 would require health insurance plans to provide coverage of testing for Perfluoroalkyl and Polyfluoroalkyl Substances or “PFAS” chemicals in the blood stream with no cost-sharing.

PFAS exposure is a significant issue here in Maine, but PFAS blood testing is a public health surveillance issue rather than a health insurance issue.

Our concerns with L.D. 582 include the following:

1. *The tests do not aid in diagnosis or treatment of a health condition.*

According to the Agency for Toxic Substances and Disease Registry, within the U.S. CDC, [w]hile PFAS blood levels do not predict future health outcomes, under certain circumstances, they might provide benefits to certain individuals. Test results will tell you how much of certain PFAS are in your blood, but they will not:

- Provide clear information about possible health effects.
- Pinpoint a health problem.
- Provide information for treatment.
- Predict or rule out future health problems due to exposure

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Since, these tests do not serve aid in diagnosis of a health condition or guide treatment decisions, it is inappropriate to require that they be covered by health insurance.

2. ***A requirement that these tests be covered with no cost-sharing treats them more favorably than diagnostic lab tests that do aid in diagnosis and guide treatment decisions.***

Diagnostic lab tests are subject to cost-sharing requirements. L.D. 582 would treat blood testing for PFAS, which does not aid in diagnosis or treatment, more favorably than diagnostic tests that do provide guidance in diagnosis and treatment.

3. ***The Bureau of Insurance mandate study, issued in January 2024, should be updated.***

The mandated benefit study conducted by the Bureau of Insurance assumed that cost-sharing would be allowed. It also assumed that medical management of the benefit, such as prior authorization would be allowed: “Since the bill does not include any language about the limitations of medical management, we assume this test will be subject to prior authorization and cost sharing similar to other laboratory tests.”¹

However, under L.D. 582 as drafted, cost sharing is prohibited, and health plans do not have the ability to apply medical management tools such as prior authorization or medically necessary criteria.

If the Committee is interested in pursuing L.D. 582, the study conducted by the Bureau of Insurance should be updated so that the estimates are consistent with the language of the bill.

4. ***Mandated benefits increase costs and reduce flexibility in plan design, increasing premiums.*** If someone cannot afford to purchase health insurance coverage, it does not matter what is covered under the plan.
5. ***This requirement would apply only to approximately 289,000 Mainers covered under plans subject to regulation by the Bureau of Insurance, or just 20% of***

¹ Review and Evaluation of LD 132, An Act to Require Health Insurance to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances, Maine Bureau of Insurance, January 2024, <https://www.maine.gov/pfr/sites/maine.gov.pfr/files/inline-files/LD-132-PFAS%20-Report.pdf>, p. 15.

Maine's population—it would not apply to self-funded plans, plans written outside of Maine, to Medicaid or Medicare plans.

6. If the Committee is interested in pursuing this legislation, we suggest the following:

- Amend the bill to clarify that the tests may be subject to the same cost sharing as diagnostic laboratory tests;
- Allow medical management of the benefit and limit eligibility to those with an elevated risk of exposure; and
- Updated the mandated benefit study conducted by the Bureau of Insurance.

Thank you for the opportunity to share our concerns with L.D. 582. We strongly urge you to vote “ought not to pass” on L.D. 582, and I would be happy to answer any questions you may have either now or at your work session.