

Testimony in Opposition of LD 627

An Act to Require Insurance Coverage for Glucagon-like Peptide-1 Receptor Agonist Medication

Kim Daigle

March 3, 2025

Senator Bailey, Representative Gramlich, and distinguished members of the Health Coverage, Insurance, and Financial Services Committee, my name is Kim Daigle. I am the Plan Administrator of Maine Credit Union League Insurance Trust, a non-profit self-insured MEWA (Multiple Employer Welfare Arrangement) in Maine that provides health insurance coverage for nearly 900 credit union employees and their dependents in Maine. I am submitting testimony today in opposition to LD 627, while strongly supporting access to compounded semaglutide instead as an affordable and effective alternative.

As someone who collects health insurance premiums and pays claims for a plan covering nearly 900 credit union employees and their dependents, LD-627 could significantly raise health insurance premiums for credit union employees and other Mainers who have health insurance.

GLP-1 medications, such as Ozempic, Mounjaro, Zepbound, Wegovy, and Saxenda, have gained significant attention in weight management and diabetes care. However, the cost burden these drugs impose on health insurance **premiums** is unsustainable. These brand-name medications can cost upwards of \$1,000 per month per patient, a price that will place considerable strain on Maine's healthcare budget if mandated for coverage. Health insurance carriers in Massachusetts that cover GLP-1 recently reported that these five medications accounted for nearly 20% of all the insurer's drug spending in 2024.

However, compounded semaglutide offers a more cost-effective and accessible alternative. Unlike commercially available GLP-1 drugs, compounded versions can be tailored to individual patient needs and produced at a fraction of the cost, ensuring broader access without overburdening taxpayers or insurance providers. I would, very much support a revised bill that allowed coverage for compounded semaglutide, rather than GLP-1 drugs.

I personally know the benefits of these compounded semaglutides. As someone who has suffered with joint pain for over 40 years, taking a semaglutide has changed my life. I am no longer in daily pain after being on a semaglutide for the last four months.

Many patients have already turned to these alternatives due to the high price and limited availability of name-brand medications. Supporting compounded options will expand access to effective treatment while maintaining fiscal responsibility.

For these reasons, I urge this committee to amend LD 627 to provide coverage of compounded semaglutide, rather than the mandatory coverage of GLP-1 medications as it's currently written. This approach balances cost-effectiveness, accessibility, and responsible healthcare spending.

Thank you for your time and consideration.

Kim Daigle

Kim Daigle

President and CEO of CU Insurance Solutions

Plan Administrator for Maine Credit Union League Insurance Trust

KimD@Ciscuso.com

207-712-1046