Janet T. Mills Governor

Sara Gagné-Holmes Commissioner



Maine Department of Health and Human Services Office of Health Insurance Marketplace 151 Jetport Boulevard Portland, Maine 04102-1946

Tel.: (207) 822-2022 TTY: Dial 711 (Maine Relay); Fax: (207) 822-2347

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Senator Bailey, Chair Representative Mathieson, Chair Members, Joint Standing Committee on Health Coverage, Insurance and Financial Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1310 – An Act to Amend the Laws Governing Insurance Coverage of Preventive and Primary Health Services

Senator Bailey, Representative Mathieson and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services, thank you for the opportunity to provide information in opposition to LD 1310, *An Act to Amend the Laws Governing Insurance Coverage of Preventive and Primary Health Services*.

While this bill intends to allow flexibility to allow carriers to offer co-pay only health plan benefit designs to Maine consumers, we caution that, as written, this bill may have unintended consequences for health plans offered through CoverME.gov. Our concerns are focused on Section 1 of the bill. More specifically, our office is concerned that this bill could create barriers to consumers seeking primary and behavioral health care and that could make it more challenging to educate consumers on the benefits of health coverage through CoverME.gov. The Office of Health Insurance Marketplace (OHIM) administers Maine's state-based health insurance marketplace, CoverME.gov, which offers health and dental insurance plans in the individual market, aiming to ensure low-barrier access to health coverage.

Section 4320-A, Subsections 3-A and 3-B of the Health Plan Improvement Act were added in 2021 to improve health care affordability and utilization of behavioral health services by reducing some of the financial barriers for Maine consumers. These provisions were built upon the original Subsection 3, passed into law as part of the Made for Maine Health Care Act, in 2019.

Excluding co-pay-only plans from adhering to the cost-sharing requirements within this section of the Health Plan Improvement Act could create unintended consequences in the individual market. As stated in former Superintendent of Insurance Cioppa's testimony in support of the Made for Maine Health Coverage Act, the original Subsection 3 of Section 4320-A was intended to relieve some of the out-of-pocket costs paid by Maine's health care consumers in the individual and small group market, especially for some of the most common medical visits. His testimony on this section describes this in more detail: "This initiative recognizes that affordability is not measured by premium alone, but also by out-of-pocket costs at the time of service. These are a real and growing concern for consumers. This bill helps to relieve those costs by making some of the most common medical visits less expensive. All health insurance plans for individuals and small businesses in Maine will cover the first primary care visit and behavioral health visit for free — with no cost sharing — just as they do now for specified preventive care services. Additionally, the second and third primary care and behavioral health visits would not be subject to the deductible, although they could have copayments."

While co-pay only health plans would comply with the provisions related to the second primary care and

behavioral health visits as these plans do not have deductibles, they would not be subject to the first visits being "free" and they would be allowed to charge a copay to consumers for that first primary care and behavioral health visit. While, to some, this may not be significant, research shows that even a small co-pay can result in consumers, especially low- and moderate-income consumers delaying or avoiding necessary care. Removing the cost barrier for someone to see their primary care doctor when something doesn't seem right or to explore an initial mental health or substance use visit may help consumers take that initial step that can build momentum to prioritize health and pave the way for health improvements. In some cases, it can even save a life. Former Superintendent Cioppa's remarks about the growing concern of out-of-pocket costs is supported by OHIM's surveys of CoverME.gov enrollees. Among those who enrolled in coverage during the most recent Open Enrollment Period, 78% of CoverME.gov consumers surveyed considered the overall affordability, including out-of-pocket costs, when selecting a plan.

In addition, the amended language passed into law in 2021 was intended to bolster state and federal laws related to mental health parity. Without assurances that these plans are required to have equal cost-sharing for behavioral health and primary care visits, it is possible that plans could have disparities in out-of-pocket costs for physical and mental/behavioral health care.

Finally, OHIM has been working to increase consumer awareness of the value of CoverME.gov coverage to encourage those who are currently uninsured to enroll in coverage and to help educate those who are currently enrolled about the benefits that are available to them. Many Mainers are not aware that almost all CoverME.gov plans cover the first primary care and behavioral health office visit for "free" and two additional visits of each for a copay, even if a consumer has not yet met their deductible. Currently, HSA plans are exempt from this requirement due to federal regulations. Any exemption makes it more challenging to educate consumers about benefits as the explanation needs to include nuances about the exemption. Adding additional confusion that co-pay only plans do not have to provide these benefits would make our efforts to educate consumers of the value of CoverME.gov plans more challenging.

For the above reasons, OHIM is in opposition to LD 1310 as currently written and recommends the removal of Section 1 of the bill or remove the inclusion of the individual market in the bill.

Please feel free to contact me if you have any questions during your deliberation of this bill.

Sincerely,
Hilany Klehneide

Hilary Schneider

Director

Office of the Health Insurance Marketplace

Maine Department of Health and Human Services