



January 20<sup>th</sup>, 2026

The Honorable Donna Bailey  
The Honorable Kristi Mathieson  
Members, Committee on Health Coverage, Insurance and Financial Services  
Cross Building, Room 220  
100 State House Station  
Augusta, ME 04333

**RE: LD 2005 An Act Regarding Mail Order Delivery of Prescription Drugs; Opposed**

Chair Bailey, Chair Mathieson and Members of the Committee,

On behalf of the Pharmaceutical Care Management Association (PCMA), we wish to share opposition related to LD 2005. PCMA is the national association representing pharmacy benefit managers (PBMs), which administer prescription drug plans for millions of Americans with health coverage provided through large and small employers, health plans, labor unions, state, and federal employee benefit plans, and government programs.

Many Americans rely on home delivery pharmacies because they provide convenient, safe, and affordable access to prescription drugs. Home delivery pharmacies offer many advantages, including improved health outcomes, by providing better adherence, greater access to care, and larger savings. Like other pharmacies, these home delivery pharmacies are licensed by state boards of pharmacy and the Drug Enforcement Administration (DEA) which regulate their safety and operations.

Receiving medications by mail can be more convenient, particularly for individuals with chronic conditions and those in rural communities. “Consistent and convenient access to chronic medications is noted as one of the key drivers of medication adherence, which is linked to improved outcomes.”<sup>1</sup> Before a home delivery pharmacy mails a prescription, pharmacists review the patient’s current medications to detect any potentially harmful drug interactions—visible to the pharmacy benefit company (also known as pharmacy benefit manager or PBM) even when the patient uses several different pharmacies. Pharmacists staffed by the home delivery pharmacy also provide clinical care management, patient education, and round-the-clock support. In 2021, an independent pharmacy accrediting body named URAC stated that accredited home delivery pharmacies filled prescriptions in 1.5 days on average, with 99.99% dispensing accuracy and 99.97% distribution accuracy.<sup>2</sup>

PCMA’s members request some changes to LD 2005 to prevent any further waste. In line 5 of the bill, PCMA requests that the bill be changed to “in-network pharmacies”. This is a safety and cost control measure to ensure patients are receiving their medications from pharmacies in the plan’s network. Next, in line 7 of the bill, PCMA requests that if the prescription is delayed by more than one day after the expected delivery date, the patient receive a three (3) day supply or the smallest

<sup>1</sup> “The Use of Medications in the U.S.” p. 15. IQVIA. 2021. <https://www.iqvia.com/insights/the-iqvia-institute/reports/the-use-of-medicines-in-the-u>

<sup>2</sup> URAC. 2022. “2021 Mail Service Pharmacy Aggregate Summary Performance Report.” [https://www.urac.org/wp-content/uploads/2022/02/2021\\_Mail-Service-Pharmacy\\_Aggregate-Report-1.pdf](https://www.urac.org/wp-content/uploads/2022/02/2021_Mail-Service-Pharmacy_Aggregate-Report-1.pdf).



prepackaged unit or dose. This prevents any waste as the mail-order drug, which is usually a 90-day supply, will eventually arrive. Finally, in line 8 of the bill, PCMA requests that if a drug arrives in an unusable condition, the patient can get up to a seven (7) day supply or the smallest prepackaged unit of use. Again, this is to prevent any further waste.

PCMA respectfully appreciates the opportunity to oppose LD 2005. We believe these suggested changes will ensure a more robust mail-order experience for Mainers.

Sam Hallemeier

A handwritten signature in black ink, appearing to read "Sam Hallemeier".

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