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February 10, 2026

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 2146 — *An Act to Increase Access to Critical Vaccinations*

Senator Bailey, Representative Mathieson and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services:

Thank you for the opportunity to comment on LD 2146, *An Act to Increase Access to Critical Vaccinations*.

The Maine Immunization Program, Maine CDC, and the Department are committed to providing clear, accurate, science-based guidance and access for people in Maine to immunizations so that they can make informed, self-determined decisions about their health with respect to vaccine-preventable illnesses. While we are strongly aligned with the sponsor's intent in this legislation, we are opposed due to specific concerns with the draft.

For background, the Maine Immunization Program works with the Maine Vaccine Board (MVB), an independent entity with appointed members, to make vaccines available at no cost to providers across the state. The Universal Vaccine Program was established in 2010 to ensure that children in Maine had equitable access to vaccines that were available through the U.S. Vaccines for Children (VFC) program for Medicaid-eligible, under or un-insured, and Native American Maine children. It is funded by a fee on covered lives by insurance carriers in lieu of reimbursement by encounter. The MVB votes annually to determine which vaccines are covered under this program and the annual assessment fee to be paid quarterly by Maine health insurers. Statutorily, insurers are required to cover all vaccines and assessment fees starting the quarter that follows a new assessment. In addition to the cost of vaccines, the annual assessment ensures the fund maintains a 10 percent reserve and covers the operations cost of the program. Maine recently passed legislation to expand the scope of the Universal Vaccine Program to include insured adults 19-64 years of age (Public Law 2025 c. 440, introduced as LD 93, *An Act to Reduce Cost and Increase Access to Disease Prevention by Expanding the Universal Childhood Immunization Program to Include Adults*, and enacted as amended).

LD 2146 seeks to require the Maine Vaccine Board to consider vaccines that are recommended by and available through the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AFP) or the American College of Obstetricians and Gynecologists (ACOG) or their successor organizations when making its annual determination of vaccines that must be

made available through the Universal Immunization Program. Additionally, if federal funding is not available for certain vaccines under the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Vaccines for Children (VFC) Program, the bill also authorizes the Maine Vaccine Board to request State funding to cover the costs of vaccines for children who qualify for vaccines under VFC for those vaccines that are recommended by the Maine Department of Health and Human Services or one of these additional medical organizations. This bill also removed a specific reference to the Advisory Committee on Immunization Practices (ACIP) to provide the MVB more discretion when using their expertise and judgment on which vaccines to include in the program.

For a few reasons, we believe that LD 2146 misses the mark in its noble goal to ensure access to immunizations:

First, naming AAP, AFP, or ACOG is an unnecessary change to statute due to the legislation passed in the first session specifically to ensure no organizations are named in this statute, federal or otherwise, that must be considered by MVB when making vaccine determinations, allowing for the board to remain neutral and consider all vaccine recommendations. Maine CDC would recommend against adding the proposed paragraph (4) under 22 MRSA §1066, sub-§3, ¶E, leaving the statute as it was amended in 2025 to maintain the important flexibility.

Second, we also have logistical concerns about the amendments proposed in Sec. 2 of the bill. For the Universal Immunization Program to be successful and responsive to real-time public health needs, timeliness is critical. For example, in 2024, a new vaccine was authorized to prevent respiratory syncytial virus (RSV) in infants. Upon FDA and ACIP approval, MVB held an interim assessment meeting, voting to include RSV on the approved vaccine list, authorized release of reserve funds for immediate purchase, and increased the annual assessment cost. The Maine Immunization Program (MIP) made RSV vaccine for insured children available to providers within one month of approval. Directing the MVB to request legislative appropriations in certain circumstances would eliminate the efficiencies enabled by the universal program and the fee structure. The Maine Vaccine Board may also be able to shed light on these considerations for the Committee.

It is important that everyone, including our most vulnerable populations, continue to access vaccines based on factual, scientific, evidence-based recommendation. While federal actions and turmoil make the future of the U.S. Vaccines for Children Program uncertain, and the Department strongly supports ensuring vaccine equity, Maine CDC does not agree that making changes to the Universal Immunization Program is a viable solution at this time.

In conclusion, Maine CDC recognizes the need to ensure vaccine access and equity for all Maine children and supports the intent of this bill. However, we oppose the bill as written, as it would interfere with the longstanding success of the Universal Immunization Program and the Maine Vaccine Board's ability to make decisions that immediately protect children from vaccine preventable diseases. In the Department's view, the MVB and MIP are sufficiently nimble at this time to meet these needs. The unknowns are too great at this time for the State to see benefit from these changes but should changes be needed in the near or distant future Maine CDC is a ready and willing partner to ensure access to effective and disease-preventing immunizations.

Thank you for your time and attention. The Maine Immunization Program and, we believe, the Maine Vaccine Board are very willing to work with the sponsors and advocates to ensure that vaccine access is maintained for the most vulnerable populations of Maine children without creating risk and uncertainty in the existing infrastructure. We will ensure that Maine CDC is available at the work session for additional discussion and questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Anthony Va.", is positioned above the typed name.

Puthiery Va, DO

Director

Maine Center for Disease Control and Prevention

Maine Department of Health and Human Services