

MAINE ASSOCIATION
OF
HEALTH PLANS

Testimony of Dan Demeritt 5/8/23
Joint Standing Committee on Health Coverage, Insurance, and Financial Services

In Opposition to LD 1577
An Act to Require Health Insurance Coverage for Biomarker Testing

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

My name is Dan Demeritt, the Executive Director of the Maine Association of Health Plans (MeAHP). Our plans include Anthem Blue Cross and Blue Shield, Cigna, CVS / Aetna, Community Health Options, Harvard Pilgrim Health Care, and United Health Care. Our private and non-profit insurance carriers provide or administer health insurance coverage to about 600,000 Maine people. Our mission as an association is to improve the health of Maine people by promoting affordable, safe, and coordinated healthcare.

The members of the Maine Association of Health Plans are opposed to adding additional mandates to Maine's insurance code and urge the committee to consider the cost to taxpayers and premium payers of expanding essential health benefits in Maine.

Biomarker testing is part of precision or personalized medicine according to the National Cancer Institute. It is an approach to medical care in which disease prevention, diagnosis, and treatment are tailored to the genes, proteins, and other substances in the body.¹

Biomarker testing is not an essential health benefit in Maine and would become an additional required benefit or non-EHB benefit if LD 1577 becomes law.²

State's adding coverage requirements beyond their federally approved EHB are subject to defrayal obligations to the federal government related to the cost of those plans sold on the individual exchange.

The Bureau of Insurance concluded that expanding Maine's required benefits to include access to fertility care would result in an obligation to the Federal Government.³ Governor Mills' 2024-25 Biennial Budget submission included \$7.6 million for this purpose.

¹ <https://www.cancer.gov/about-cancer/treatment/types/biomarker-testing-cancer-treatment#what-is-biomarker-testing-for-cancer-treatment>

² <https://www.maine.gov/pfr/insurance/sites/maine.gov.pfr.insurance/files/inline-files/maines-benchmark-essential-health-benefits-checklist.pdf>

³ <https://legislature.maine.gov/doc/9670>

Adding a statutory requirement for the coverage would first require a mandate study by the Bureau of Insurance. As part of the Bureau's statutorily required review and evaluation, we will learn more about the social impact of mandating the benefit, the financial impact, the medical efficacy of the benefit, and the effects of balancing the social, economic, and medical efficacy's considerations.⁴

Mandates enacted by the Maine Legislature since 1975 have contributed to a 12.64% increase in the healthcare premiums for groups of 20 or fewer consumers. The cost estimate comes from the Maine Bureau of Insurance's 2020 report on the cumulative impact of mandates in Maine.⁵

This 2020 report does not account for the six mandates added to Maine's insurance code in 2022, the largest one-year expansion in coverage mandates in almost fifty years.⁶

LD 1577 is one of several mandate bills before the committee this year. If the committee considers moving forward with biomarker testing or any other new mandate, it should consider looking at the costs and modern-day medical necessity of benefit requirements that first started appearing in Maine statute in 1975.

Thank you for your consideration.

⁴ <http://www.mainelegislature.org/legis/statutes/24-a/title24-Asec2752.html>

⁵ <https://www.maine.gov/pfr/sites/maine.gov.pfr/files/inline-files/LD1539-and-LD922-Mandated-Benefit-Analysis.pdf>, page 27

⁶ ² <https://www.maine.gov/pfr/insurance/consumers/consumer-guides/mandated-health-insurance-benefits>