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Testimony regarding LD 93 2/5/2025 Sydney R. Sewall, MD MPH (Hallowell)

Sen. Ingwersen, Rep. Meyer, and members of the HHS committee—

As many of you know, I have been a pediatrician in this area since 1982. In 2011-2012, I participated in the meetings that created the current universal immunization program in our state -- which pays the vaccine costs for ALL children through age 18. Months of discussions involving insurers, vaccine manufacturers, Mainecare, the Maine Immunization Program, and physicians (especially Maine AAP) led to the establishment of an efficient and smooth-running system that expanded access and lowered health care costs in the state. Remarkably, all the original players are still pleased with the outcome.

How does the system work? The CDC gets a substantial discount for its bulk purchasing of vaccines. The Maine Immunization Program pools funds from the Federal Vaccines for Children (VFC) program, Mainecare, and private insurers -- and uses these funds to buy products at these reduced prices. Insurers are happy since they pay less to provide a necessary preventive service. Vaccine manufacturers are happy, since the increased volume compensates for the decrease in unit price.

Pediatricians and FP physicians are enormously satisfied with the change. Prior to this law in my own practice, we needed to have separate storage for vaccines used for Mainecare kids vs. private pay patients. At one point we maintained 5 refrigerators and freezers in our office in Augusta to store and track the vaccines used for these different populations, even though the products were identical.

Billing was also complicated, and some families got hit with unexpected expenses -- or our office had to absorb the product cost without compensation. This scenario will be eliminated for adult practitioners with passage of LD 93 -- making Maine a more attractive site for young physicians to set up practice.

To give you an idea of the savings, here is a snippet from the CDC vaccine pricing web site:

| | | | | | | |
|--|----------|-----------------------|-----------------------------|----------|----------|---|
| Measles, Mumps and Rubella (MMR) [B] | M-M-R®II | 00006- 4681- 00 | 10 pack – 1 dose vial | \$25.684 | \$95.201 | 3 |
| Measles, Mumps and Rubella (MMR) [B] | Priorix | 58160- 0824- 15 | 10 pack – 1 dose vial | \$25.674 | \$92.494 | 3 |

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However, this level of discount is not applicable to most of the products – it's usually more in the 20-30% range. CDC pricing for products used in adults is also different than for children but the savings are substantial. Hepatitis A vaccine, for example, which might be indicated in an adult outbreak is priced at \$39.55 vs retail \$82.87. The meningococcal vaccine (also used in an outbreak, or for foreign travel) is \$79.95 vs. \$157.39. Typical flu shot costs \$13.92 vs. \$19.73.

I was concerned when I first heard of this proposal that the addition of adults to the Universal Purchase program would compromise the function of the childhood system. These concerns were allayed by discovering that similar programs exist in neighboring states without complications, and that the adult program will use a separate pool of funds, provided by assessing public and private insurance carriers based on # of adult covered lives – similar to the process already in use for the 0 – 18 program. The MIP has decades of experience dealing with CDC and already has the appropriate tracking systems in place to ensure funding is spent appropriately – and that policies comply with Federal regulations.

Advocates for public health typically argue that their proposals will lower the cost of health care in the future -- in the long run. This proposal is unusual in that it also lowers costs in the short run. I speak for myself, and for the Maine Chapter of the American Academy of Pediatrics when I urge you to vote in favor of LD 93. We believe in prevention for everyone – after all, our young patients need healthy parents!

Sincerely,

Sydney R. Sewall, MD MPH
Hallowell, ME