



Dan Demeritt  
Executive Director

P.O. Box 193  
Orono, Maine 04473  
Tel: (207) 852-2087  
Email: dan.demeritt@meahp.com

Testimony Neither For Nor Against LD 93  
An Act to Reduce Cost and Increase Access to Disease Prevention by  
Expanding the Universal Childhood Immunization Program to Include Adults  
February 5, 2025

Senator Ingwersen, Representative Meyer, and Members of the Health and Human Services Committee:

My name is Dan Demeritt, the Executive Director of the Maine Association of Health Plans. Insurance coverages offered or administered by our member plans provide access to care and better outcomes for many of the Mainers who receive coverage through an employer plan or the individual market. Our mission as an association is to improve the health of Maine people by promoting affordable, safe, and coordinated health care.

---

Private insurance provides access to care to approximately 694,000 Mainers through an employer plan or Maine's individual market.<sup>1</sup>

Maine's health plans and our association have been partners in Maine's universal childhood vaccination purchase program since its launch in 2012. There are three seats on the Maine Vaccine Board representing health insurance carriers.

I hold one of these seats but am speaking for the Maine Association of Health Plans and am not speaking on behalf of the Maine Vaccine Board today.

The Maine Vaccine Board considers the childhood immunization recommendations from the Advisory Committee on Immunization Practices and estimates the number of dosages needed for the coming year. The Board also sets the per-covered child per-month assessments that self-insured and fully-funded private health plans pay for every covered child.

Maine's Health Plans and their members and employer customers are currently paying \$12.68 per child per month to our state's universal childhood vaccination purchase program for each of the 133,716 Maine children covered with private insurance.

---

<sup>1</sup> ME Bureau of Insurance: Slide 4, January 2025  
<https://www.maine.gov/pfr/insurance/sites/maine.gov.pfr.insurance/files/inline-files/CHCD%20Slides%20for%20HCIFS%202025.pdf>

## **Operational Concerns and a Vaccination Assessment on 560,000 Adult Mainers**

The Department had not briefed Maine's health plans on this proposal prior to the bill being printed. More time is needed to understand the impact of the initiative and to make sure that expansion of the program and a new vaccination assessment delivers upon the promise of lower costs and avoids unintended consequences.

**Funding and Access for 100,000 Adults on MaineCare:** The federal Vaccines for Children program (VFC), an important financial contributor to Maine's childhood vaccination program, does not cover adults. Approximately 100,000 low-income adults, people with disabilities, and pregnant women could be excluded unless state resources are invested into the program.

**Double Dipping -- An Assessment and a Bill:** Nearly 60% of adults immunized for influenza in 2022-23 got their shot in a retail pharmacy.<sup>2</sup>

Unfortunately, there is not a single retail pharmacy among the 325 active VFC Provider Sites listed on the Maine Center for Disease Control and Prevention's website despite the important role these providers play in promoting immunization.<sup>3</sup>

Flu and COVID-19 vaccinations can be given without a prescription to children ages 3 and up. Thousands of these immunizations are likely being administered in Maine retail pharmacies to children who are covered with private health insurance. A "double dip" occurs because the billed health plans was already assessed \$12.68 per month for every child they cover.

Nationally, just 0.4% (160 of 37,714) of VFC providers are pharmacies. The National Academy for State Health Policy, with offices in Maine, recommends enrolling pharmacies in VFCs as a strategy for reducing disparities and increasing access and uptake.<sup>4</sup>

Maine should have a plan for increased pharmacy participation or design a mechanism to prevent double dipping before expanding its universal program to include adults.

**Estimated Savings:** The savings projections we have seen for Maine are based on the "private purchase cost" of immunizations compared to U.S. Center for Disease Control rates. An analysis should be undertaken, similar to a mandate study, to determine the impact of this proposal on health care costs and to ensure savings.

**Impact on Vaccination Rates:** Alaska, Rhode Island, and Vermont all established their adult universal vaccination funding programs in either 2014 or 2015. While there are many factors

---

<sup>2</sup> <https://www.cdc.gov/fluview/dashboard/adult-vaccinations-administered.html>

<sup>3</sup> <https://www.maine.gov/dhhs/mecdc/infectious-disease/immunization/active-vfc-provider-sites.shtml>

<sup>4</sup> [https://nashp.org/wp-content/uploads/2022/07/Increasing-Access-Routine-Vaccinations-VFC\\_07.2022.pdf](https://nashp.org/wp-content/uploads/2022/07/Increasing-Access-Routine-Vaccinations-VFC_07.2022.pdf)

impacting uptake, coverage for Pneumococcal Vaccination has gone down in two of the three states over the last ten years (Figure 2).<sup>5</sup>

Stakeholders in Maine need to understand how or if universal immunization programs impact participation.

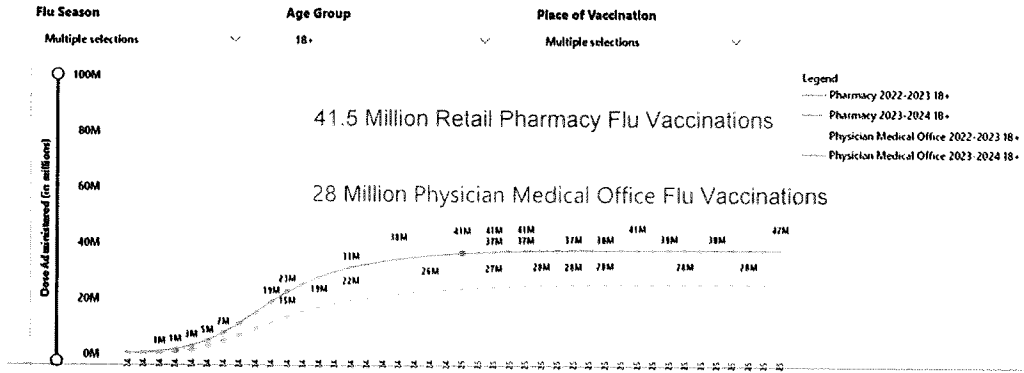
More time is needed to assess how imposing a new vaccination assessment on 560,000 Mainers will impact access to care and costs. We look forward to participating in additional conversations.

---

<sup>5</sup> <https://www.cdc.gov/adultvaxview/about/general-population.html>

**FIGURE 1: Vaccination Locations: Retail Pharmacy vs Physician Medical Office**

**Figure 7. Weekly Cumulative Estimated Number of Influenza Vaccinations Administered in Retail Pharmacies and Physicians' Medical Offices Among Adults 18 Years and Older, by Flu Season and Age Group\*, United States**  
Data Source(s): IQVIA LRx and Dx



**FIGURE 2: Universal Vaccination States -- Vaccination Coverage Example**

