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Testimony Neither For Nor Against LD 1100
An Act to Clarify the Requirements for Accessing
Nonformulary Drugs and Drugs Used to Treat Serious Mental Illness
April 1, 2025

Senator Bailey, Representative Gramlich, and Members of the Health Coverage, Insurance, and Financial 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 health by promoting affordable, safe, and coordinated health care.

The Maine Association of Health Plans understands the importance of maintaining access to medications needed to treat serious mental illness if there is a drug shortage.

Formulary Equivalent First

Health plan formularies are developed to provide members with access to medically necessary treatments at the best possible value. In the event of a shortage of prescription drugs used to treat serious mental illness, carriers should first have the option to direct patients and providers to an equivalent drug on the plan's formulary before requiring approval of an equivalent nonformulary drug.

We do not object to the intent of the legislation but believe that in the event of a shortage of a drug used to treat serious mental illness, a health plan should be permitted to substitute an equivalent drug that is on the carrier's formulary before being required to turn to a drug that is not on the formulary

We have shared this concern with the Bureau of Insurance and appreciate the Bureau's willingness to discuss this change and look forward to working with the Committee as part of the work session.