§4256. Coverage for medically necessary infant formula

(REALLOCATED FROM TITLE 24-A, SECTION 4254)

All individual and group health maintenance organization policies, contracts and certificates must provide coverage for amino acid-based elemental infant formula for children 2 years of age and under in accordance with this section. [PL 2007, c. 695, Pt. C, §16 (RAL).]

- 1. Determination of medical necessity. Coverage for amino acid-based elemental infant formula must be provided when a licensed physician has submitted documentation that the amino acid-based elemental infant formula is medically necessary health care as defined in section 4301-A, subsection 10-A, that the amino acid-based elemental infant formula is the predominant source of nutritional intake at a rate of 50% or greater and that other commercial infant formulas, including cow milk-based and soy milk-based formulas have been tried and have failed or are contraindicated. A licensed physician may be required to confirm and document ongoing medical necessity at least annually. [PL 2007, c. 695, Pt. C, §16 (RAL).]
- 2. Method of delivery. Coverage for amino acid-based elemental infant formula must be provided without regard to the method of delivery of the formula. [PL 2007, c. 695, Pt. C, §16 (RAL).]
- **3. Required diagnosis.** Coverage for amino acid-based elemental infant formula must be provided when a licensed physician has diagnosed and through medical evaluation has documented one of the following conditions:
 - A. Symptomatic allergic colitis or proctitis; [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - B. Laboratory- or biopsy-proven allergic or eosinophilic gastroenteritis; [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - C. A history of anaphylaxis; [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - D. Gastroesophageal reflux disease that is nonresponsive to standard medical therapies; [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - E. Severe vomiting or diarrhea resulting in clinically significant dehydration requiring treatment by a medical provider; [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - F. Cystic fibrosis; or [PL 2007, c. 695, Pt. C, §16 (RAL).]
 - G. Malabsorption of cow milk-based or soy milk-based infant formula. [PL 2007, c. 695, Pt. C, §16 (RAL).]

[PL 2007, c. 695, Pt. C, §16 (RAL).]

4. Health savings accounts. Coverage for amino acid-based elemental infant formula under a health insurance policy, contract or certificate issued in connection with a health savings account as authorized under Title XII of the federal Medicare Prescription Drug, Improvement, and Modernization Act of 2003 may be subject to the same deductible and out-of-pocket limits that apply to overall benefits under the policy, contract or certificate.

[PL 2007, c. 695, Pt. C, §16 (RAL).]

SECTION HISTORY

PL 2007, c. 695, Pt. C, §16 (RAL).

The State of Maine claims a copyright in its codified statutes. If you intend to republish this material, we require that you include the following disclaimer in your publication:

All copyrights and other rights to statutory text are reserved by the State of Maine. The text included in this publication reflects changes made through the First Regular and First Special Session of the 131st Maine Legislature and is current through November

1. 2023. The text is subject to change without notice. It is a version that has not been officially certified by the Secretary of State. Refer to the Maine Revised Statutes Annotated and supplements for certified text.

The Office of the Revisor of Statutes also requests that you send us one copy of any statutory publication you may produce. Our goal is not to restrict publishing activity, but to keep track of who is publishing what, to identify any needless duplication and to preserve the State's copyright rights.

PLEASE NOTE: The Revisor's Office cannot perform research for or provide legal advice or interpretation of Maine law to the public. If you need legal assistance, please contact a qualified attorney.