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February 16, 2021

Senator Heather Sanborn, Chair
Representative Denise Tepler, Chair
Members of the Health Coverage, Insurance and Financial Services Committee

Re: Testimony in Qualified Support of LD 1, An Act To Establish the COVID-19 Patient Bill of Rights, Draft Sponsor Amendment

Dear Senator Sanborn, Representative Tepler and Members of the HCIFS Committee:

My name is Curtis Picard and I am the President and CEO of the Retail Association of Maine. I am a resident of Topsham. The Retail Association of Maine (RAM) has members statewide of all sizes. I'm speaking to you today in qualified support of LD 1 on behalf of our Community Pharmacy Group members. We sincerely appreciate the work of Senate President Jackson and his policy staff on the amendment and our hope is to help get the bill to a place where we can offer our unqualified support.

Our first recommended change is in Part B of the bill. In Section B-1, 32 MRSA §2213; Section B-2, 32 MRSA §2600-G; Section B-3, 32 MRSA §3300-J; Section B-4, 32 MRSA §3658; Section B-5, 32 MRSA §13786-E; and Section B-7, 32 MRSA §18309 (note: but not Section B-6), we would add the following text after the amended language:

An individual licensed under chapter XXX whose scope of practice includes dispensing prescribed medication may dispense to a patient a supply of a prescription drug for an extended period of time, not to exceed a 180-day supply, during a state of emergency declared by the Governor in accordance with Title 37-B, section 742, except for a drug prescribed in accordance with section 2210 and except for instances where such extended prescriptions would be inconsistent with public safety or contrary to the applicable standard of care.

These additions will help clarify that both prescribing and dispensing are permitted under the COVID-19 Bill of Rights.

For Section B-6, 32 MRSA §13831 sub 2-A, we would make the following change (underlined):

2-A. Administration of COVID-19 vaccines. A pharmacist licensed in this State who meets the qualifications and requirements of section 13832 and rules adopted by the board, in addition to influenza vaccines under subsection 1 and other vaccines under subsection 2, may administer and order and bill for coronavirus disease 2019, or COVID-19, vaccines licensed or authorized under an Emergency Use Authorization by the United States Food and Drug Administration and

vaccines that are recommended by the United States Centers for Disease Control and Prevention Advisory Committee on Immunization Practices, or successor organization, to a person 3 years of age or older. A pharmacist licensed in this State may, under their authority, delegate under this subsection, the administration of vaccines to trained pharmacy technicians and interns under their supervision and control at the point of dispensing vaccine site.

This section would help codify what is current practice during the pandemic. It's all hands on deck in administering vaccines and any individual that is properly trained in their administration should be allowed to continue to administer under this bill.

Our final change is in Part C. Sec. C-2. 24-A MRSA §4316, sub-§1, ¶C is amended to read:

C. "Telehealth," as it pertains to the delivery of health care services, means the use of interactive real-time visual and audio or other electronic media for the purpose of consultation and education concerning and diagnosis, treatment, care management and self-management of an enrollee's physical and mental health and includes real-time interaction between the enrollee and ~~the telehealth~~ a licensed healthcare professional provider, synchronous encounters, asynchronous encounters, store and forward transfers and telemonitoring. "Telehealth" does not include the use of audio-only telephone, facsimile machine, e-mail or texting. "Telehealth" is generally expected to include the use of audio and visual interaction, except that it may include the use of audio-only telephone in limited cases when the enrollee is unable to participate in an audio and visual interaction and the use of audio-only telephone is medically appropriate and the only available option for delivering needed care.

This last change would make sure that pharmacists could also provide telehealth services as specified in the bill.

With these changes, we will be able to offer our full support of the bill. I thank you for your time and would be happy to answer any questions you may have or provide the committee with additional information.

Sincerely,



Curtis Picard, CAE
President and CEO