- 1. Be it enacted by the People of the State of Maine as follows:
- 2. **Sec. 1. 24-A MRSA §4304, sub-§2, ¶D,** as enacted by PL 2019, c. 273, §1, is
- 3. amended to read:
- 4. D. The drug prescription and prior authorization standards used by a carrier must be clear and readily
- 5. available to enrollees, participating providers, pharmacists and other providers. With
- 6. regard to prior authorization for prescription drugs, a carrier shall comply with the
- 7. requirements set forth in subsection 2-B. A provider must make best efforts to provide
- 8. all information necessary to evaluate a request, and the carrier must make best efforts
- 9. to limit requests for additional information.
- 10. **Sec. 2. 24-A MRSA §4304, sub-§2-B,** as enacted by PL 2019, c. 273, §2, is
- 11. amended to read:
- 12. 2-B. Electronic transmission of prior authorization requests. Beginning no later
- 13. than January 1, 2020, if If a health plan provides coverage for prescription drugs, the carrier
- 14. must accept and respond to prior authorization requests in accordance with subsection 2
- 15. <u>and this subsection</u> through a secure electronic transmission using American National Standards Institute (ANSI) <u>standards recommended</u>
- 16. by a national institute for the development of fair standards and is adopted by a national
- 17. council for prescription drug programs for electronic prescribing transactions the National Council for Prescription Drug Programs. For the
- 18. purposes of this subsection, transmission of a facsimile through a proprietary payer portal
- 19. or by use of an electronic form is not considered electronic transmission. A carrier's
- 20. electronic transmission system for prior authorization requests for prescription drugs must
- 21. comply with the following.
- 22. A. No later than January 1, 2023, unless a waiver is granted by the superintendent, a
- 23. carrier or entity under contract to a carrier shall make available to a provider in real
- 24, time at the point of prescribing one or more an electronic benefit tools that are is capable of
- 25. integrating with at least one the electronic prescribing system or electronic medical record
- 26. system to provide complete, accurate, timely, clinically appropriate formulary and
- 27. benefit information specific to an enrollee, including, but not limited to, enrollee cost-
- 28. <u>sharing information</u>, the estimated cost-share to be paid by the enrollee, information on any available formulary alternatives that are
- 29. clinically appropriate and information about the formulary status and the utilization
- 30, review and prior authorization requirements of each drug presented. Upon a carrier's
- 31. request, the superintendent may grant a waiver from the requirements of this paragraph
- 32. based on a demonstration of good cause.
- 33. **Sec. 3. Bureau of Insurance to monitor compliance.** Beginning January 1,
- 34. 20223, the Department of Professional and Financial Regulation, Bureau of Insurance shall
- 35. monitor compliance by carriers authorized to do business in this State with the requirements
- 36. of the Maine Revised Statutes, Title 24-A, section 4304, subsection 2-B using its authority
- 37. under Title 24-A, section 221. The bureau shall also request information from carriers on
- 38. the adoption and usage of electronic transmission by health care providers for requesting
- 39. prior authorization for prescription drugs from carriers. No later than June 1, 2023, the
- 40. bureau shall submit a report to the joint standing committee of the Legislature having
- 41. jurisdiction over health coverage and insurance matters on the status of compliance by
- 42. carriers. If the bureau determines that a carrier is not complying with the requirements of
- 43. Title 24-A, section 4304, subsection 2-B, the bureau shall take enforcement action against

44. the carrier as appropriate. The joint standing committee of the Legislature having