

STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION

BOARD OF PHARMACY 35 STATE HOUSE STATION AUGUSTA, MAINE 04333-0035

Anne L. Head, Esq. Commissioner Geraldine L. Betts

April 12, 2021

Senator Heather Sanborn, Chair Representative Denise Tepler, Chair Joint Standing Committee on Health Coverage, Insurance and Financial Services 100 State House Station Augusta, ME 04333-0100

RE: L.D. 673 An Act to Create the Insulin Safety Net Program

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

This bill directs the Board of Pharmacy ("Board") to establish and oversee an Insulin Safety Net Program (hereinafter "Program") by January 1, 2022. Under the Program, manufacturers with an annual gross revenue of \$2 million or more from insulin sales in Maine must make insulin available to pharmacies for the purpose of dispensing to Maine residents in urgent need of insulin and to residents who are eligible to receive insulin based on a continuing need. The proposed Program appears modeled after the safety net program established in Minnesota in April 2020.

While the Office of Professional and Occupational Regulation ("OPOR") is neither for nor against this bill, we note that implementing and operating such a program would require a substantial expansion of duties of an already fully encumbered Board and Board staff. If an individual disagrees with an insulin manufacturer's determination of eligibility for the continuing need program, that individual may contact the Board to request the use of a three-member panel to review eligibility. According to Minnesota Board of Pharmacy guidance adopted at its May 20, 2020 meeting, it will meet this requirement by forming three panels to conduct these eligibility reviews, with each panel consisting of two pharmacist members and one public member (each panel will also be supported by a board staff member). As

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¹ Panel A will meet the first week each month, Panel B will meet the second week of each month, and Panel C will meet the third week each month.

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decisions of the panels must be provided within ten (10) business² days, they will not be approved by the full Minnesota board. We have reached out to the Executive Director of the Minnesota Board of Pharmacy, who informed us that they have had only one request for an eligibility review thus far – but it is worth noting the program is still very much in the beginning stages.

By comparison, the Maine Board of Pharmacy consists of 7 members. Of the 7 members, 2 are public members and 5 are pharmacists who represent various pharmacy practice areas including a chain pharmacist, a hospital pharmacist, an independent pharmacist and 2 pharmacists at-large. It is uncertain whether the current Maine Board's membership configuration could meet this requirement of the Program, with or without a multiple panel model.

LD 673 also requires the Board advertise the Program and supply access to the individual manufacturer patient assistance programs on its website. Moreover, the bill requires annual reporting to the Legislature. To support such a program and to meet these additional reporting requirements, the Board would need an additional staff member in a skilled professional services position. The Program would increase Board expenses, which includes but is not limited to additional per diem for Board members serving on the eligibility review panel and the salary and benefits for an additional board staff member.

Thank you for your time and consideration of the foregoing information. I am happy to answer questions at the work session.

Sincerely,

Geraldine L. Betts, Board Administrator

² A minor technical change for consideration is to change "business" day references throughout to "calendar" days for consistency with other Board laws and rules. It has been the Board's experience that licensees are sometimes confused when interpreting what is meant by "business" days since business operations may vary.