



MAINE ASSOCIATION
OF
HEALTH PLANS

**Testimony of Katherine Pelletreau
to the Joint Standing Committee on Health and Human Services**

In Opposition To

**LD 745 An Act To Strengthen Maine's Public Health by Expanding Access to Certain
Health Programs and Services**

May 4th, 2021

Good afternoon Senator Claxton, Representative Meyer, and Honorable Members of the Health and Human Services Committee.

My name is Katherine Pelletreau, and I am the Executive Director of the Maine Association of Health Plans (MeAHP). MeAHP has five members including Aetna, Anthem Blue Cross and Blue Shield, Cigna, Community Health Options and Harvard Pilgrim Health Care. Collectively, MeAHP's members provide or administer health insurance coverage to over 600,000 Maine people. The organization's mission is to improve the health of Maine people by promoting affordable, safe, and coordinated healthcare.

I have served as a member of the Maine Vaccine Board (MVB) since its inception and was among those who carefully worked through the details of the law to achieve passage over 10 years ago.

The universal access to childhood vaccines program has been a success in many ways and savings for purchasers have been demonstrated over time. Because of this strong track record, health insurers are not necessarily opposed to an expansion of the program to adults. However, the bill before you has too many questions and confusions to be passed this session as proposed. In our view, the bill needs a lot more work.

Tenants for a successful program

- The federal CDC purchase price for adult vaccines must be lower than what insurers would pay otherwise. This concept is the whole rationale for the program and is what enables savings.

- Insurers and employers should be asked only to pay for their members, not for the uninsured or for MaineCare members. The payment methodology should have insurers paying only on their covered adult lives up to 64 (before Medicare) as they do for children.
- The payment methodology should be worked through carefully by all parties to ensure transparency and understanding, fairness, sufficient but not excessive funds to run the program, and practical workability.

Policy matters that must be thought through before proceeding with the expansion.

- How will the state's universal access program work with flu and COVID vaccination efforts? The federal government has taken a dominant role in supplying and paying for these vaccines and that is likely to continue for at least the next few years. We need to think through how these initiatives will work together.
- What vaccines are expected to be part of the universal access program for adults? What is the volume of vaccines provided to adults? How large will this program be and what are the expected total costs?
- Where do adults get their vaccinations? Will adults be accessing vaccines from providers already participating with the immunization program?
- How will this effort interact with large scale vaccinators like CVS (especially for flu)?

More detailed questions about the specific proposal before you include:

- What is the difference between reserves, service fee, and unexpended expenses, and how do they interact? What is the total assessment being contemplated beyond actual cost of approved vaccines?
- The terms used around the assessment are confusing – are carriers being asked to pay one assessment for the whole program or two – one for adults and one for children? And how are reserves and admin determined, calculated, and charged? The bill uses the term persons in addition to children and adults and it is confusing just what is meant.
- The effective date of the program is too soon. September 2022 is just a few months away. The questions and issues need to be worked through before it is determined that a program expansion like this makes sense and, if it does, when a realistic start date would be.
- Who pays for uninsured adults? The federal government as with childhood vaccines? State government? How will insurers and employers be protected from having to cover these costs that rightfully should be borne by government as a public health expense?

Our suggestion for a path forward would be to ask the Maine Vaccine Board to look further into the issues and come back with an analysis and possibly a proposal for the Committee's review.

The MVB is the right place for this work as it is focused on the financing that enables the universal access program to run smoothly. The board is carefully composed of stakeholders representing payors, providers, public health, and pharmaceutical manufacturers. The board works closely with the Maine Immunization Program and is supported by the Attorney General's office as well as the program administrator KidsVax.

Thank you for your consideration of these comments.

Katherine Pelletreau
Maine Association of Health Plans

I may be tied up in HCIFS but will be present if I can. Thanks.