

Committee: HHS  
Drafter: SS  
File Name:  
LR (item)#: 200802  
New Title?: No  
Add Emergency?: No  
Date: February 10, 2022

Committee Amendment “ ” to LD 1729 Resolve, To Assess the Feasibility of the Production of Insulin in Maine

- Replace the term “insulin” with “insulin and insulin analogs” throughout.
  
- Amend Sec. 1. to include:
  11. A representative of an organization that advocates for greater access to insulin and that does not accept funding from an insulin manufacturer.
  
- Amend Sec. 2 to include
  8. Options for capping co-pays on insulin provided through private insurers;
  9. The potential for the state to engage in volume purchasing of insulin at reduced cost and the mechanisms by which the state could establish a program to distribute insulin to residents of the state;
  10. Opportunities to establish an inter-state compact with other New England states to reduce insulin costs in compact states;
  11. Opportunities to establish a public entity to manage insulin purchasing and distribution with the possibility of eventual transition to a privately funded entity;
  12. Opportunities to establish a model facility to affordably manufacture and supply insulin to Maine residents; and
  13. Opportunities to procure dedicated funding to support the manufacture and distribution of insulin to Maine residents.
  
- Amend Sec. 3. to change the report date to January 1, 2023.
  
- Add the following:

**Sec. 4. Support for pilot.** Resolved: That the joint standing committee with jurisdiction over health and human services shall submit a letter to Maine’s Congressional delegation expressing support for the establishment of a federal pilot program focused on the domestic manufacture and distribution of low cost insulin and insulin analogs.

**SUMMARY**

This amendment:

1. Replaces the term “insulin” with “insulin and insulin analogs” throughout.
2. Adds to the commission a representative of an organization that advocates for greater access to insulin and that does not accept funding from an insulin manufacturer.
3. Adds the following factors to the feasibility assessment:
  - a. Options for capping co-pays on insulin provided through private insurers;
  - b. The potential for the state to engage in volume purchasing of insulin at reduced cost and the mechanisms by which the state could establish a program to distribute insulin to residents of the state;
  - c. Opportunities to establish an inter-state compact with other New England states to reduce insulin costs in compact states;
  - d. Opportunities to establish a public entity to manage insulin purchasing and distribution with the possibility of eventual transition to a privately funded entity;
  - e. Opportunities to establish a model facility to affordably manufacture and supply insulin to Maine residents; and
  - f. Opportunities to procure dedicated funding to support the manufacture and distribution of insulin to Maine residents.
4. Resolves that the joint standing committee with jurisdiction over health and human services shall submit a letter to Maine’s Congressional delegation expressing support for the establishment of a federal pilot program focused on the domestic manufacture and distribution of low cost insulin and insulin analogs