Janet T. Mills Governor

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Senator Ned Claxton, Chair Representative Michele Meyer, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1729 - Resolve, To Assess the Feasibility of the Production of Insulin in Maine

Dear Senator Claxton, Representative Meyer, and Members of the Health and Human Services Committee:

This letter is to provide information about LD 1729 - Resolve, To Assess the Feasibility of the Production of Insulin in Maine, and the potential impact of the proposed legislation, if enacted.

The Maine Center of Disease Control and Prevention (Maine CDC) is neither for nor against LD 1729 and presents the following information for your consideration.

This resolve requires the Department of Health and Human Services to convene a commission to assess the feasibility of producing insulin in the State through the University of Maine System and other appropriate institutions or through a public-private partnership between the University of Maine System, other appropriate institutions and a licensed drug manufacturer; and providing such insulin at reduced, low or no cost to low-income to Maine residents through hospitals, pharmacies and health care providers in the State or at a reduced cost on a means-tested basis. This resolve requires that this assessment include a review of factors including potential savings and additional costs to the University of Maine System and the State, the number of individuals who would benefit from such a program, potential regulatory or legal obstacles, and available alternatives to providing insulin to low-income individuals at low or no cost. LD 1729 requires the commission to seek input from members of the Legislature when making its assessment and to report out recommendations, including proposed legislation, for promoting insulin manufacturing.

While the Maine Diabetes Prevention and Control Program and the Maine CDC – Cardiovascular Health Program work to provide services and supports aimed at reducing the impact of the disease on a person's quality of life and healthcare costs, the cost for treatment remains a barrier for many people in Maine. The additional research for increasing access to insulin would greatly benefit those impacted by type I and type II diabetes.

We recognize the value of this conversation, though question the appropriateness of Maine CDC to facilitate the conversation. While it is known that access to affordable insulin remains a barrier for patients in Maine and elsewhere, the outstanding questions are those of business development, manufacturing, and distribution, which are not in the core mission or skill set of Maine CDC. There will also be significant research required to carry out this proposal, and Maine CDC currently lacks the capacity to dedicate a staff person or multiple to that work.

Thank you for your consideration of this matter. The Maine CDC is available to provide additional details for the Committee's consideration and to participate in scheduled work sessions.

Respectfully,

Nancy Beardsley, Deputy Director

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Maine Center for Disease Control and Prevention