An Act To Save Lives by Capping the Out-of-pocket Cost of Certain Medications

(AFTER DEADLINE)

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 205. Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed.

Presented by Speaker GIDEON of Freeport.
Be it enacted by the People of the State of Maine as follows:

Sec. 1. 24-A MRSA §4317-C is enacted to read:

§4317-C. Coverage for prescription insulin drugs; limit on out-of-pocket costs

A carrier that provides coverage for prescription insulin drugs may not impose any deductible, copayment, coinsurance or other cost-sharing requirement on an enrollee for that coverage that results in out-of-pocket costs to the enrollee that exceed $100 per 30-day supply of covered prescription insulin drugs, regardless of the amount, type or number of insulin drugs needed to fill the enrollee's prescription.

Nothing in this section prevents a carrier from reducing an enrollee's cost-sharing requirement by an amount greater than the amount specified in this section.

The superintendent may adopt rules to implement and administer this section to align with applicable federal requirements. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

SUMMARY

This bill provides that a health insurance carrier that provides coverage for prescription insulin drugs may not impose a cost-sharing requirement on the enrollee that results in out-of-pocket costs to the enrollee in excess of $100 per 30-day supply of insulin.