



# 125th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2011

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Legislative Document

No. 517

S.P. 150

In Senate, February 15, 2011

### **An Act Regarding Prescription Drug Step Therapy and Prior Authorization**

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Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

*Joseph G. Carleton Jr.*

JOSEPH G. CARLETON, JR.  
Secretary of the Senate

Presented by Senator SAVIELLO of Franklin.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 24-A MRSA §4319** is enacted to read:

3 **§4319. Coverage for acute and chronic pain**

4 Beginning January 1, 2012, a carrier that provides prescription drug coverage shall  
5 provide the full range of prescription drug treatment options for patients suffering from  
6 acute and chronic pain as follows.

7 **1. Formulary alternatives.** A carrier may not require that a patient try more than 2  
8 formulary alternatives with unsuccessful results for the patient before approving the drug  
9 prescribed by the patient's health care provider. A carrier may not require use of a  
10 formulary alternative for longer than 7 days prior to determining the clinical  
11 appropriateness of continued use of the formulary alternative. A health care provider  
12 may override a carrier's decision regarding a formulary alternative for a patient if the  
13 formulary alternative has been ineffective in treating the patient's condition or if there is  
14 sound medical and scientific evidence that the required treatment is expected to be  
15 ineffective or to cause an adverse reaction or other harm to the patient.

16 **2. Prior authorization.** A health care provider may override a requirement of prior  
17 authorization regarding the use of a prescribed drug for a patient if there is sound medical  
18 and scientific evidence that adherence to the prior authorization protocol will be  
19 ineffective in the treatment of the patient's condition or will cause an adverse reaction or  
20 other harm to the patient.

21 **SUMMARY**

22 This bill limits the ability of a health coverage carrier to require prescription drug  
23 formulary alternatives and prior authorization in certain circumstances beginning January  
24 1, 2012.