

Governor Mills Signs Into Law Comprehensive Prescription Drug Reform Package

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Legislation makes prescription medication more affordable and more accessible while holding pharmaceutical companies and corporate middlemen accountable

Governor Janet Mills today signed into law a comprehensive prescription drug reform package. The package contains a suite of proposals from Senate President Troy Jackson, D-Allagash, Assistant Senate Majority Leader Eloise Vitelli, D-Arrowsic, and Senator Heather Sanborn, D-Portland, that would allow the wholesale importation of prescription medicine, create a prescription drug affordability board, increase drug price transparency and better regulate pharmacy benefit managers.

"The outrageous prices of prescription drugs are hurting Mainers, especially older Mainers on a fixed and limited income. No one should have to choose between food or medicine," said Governor Mills. "With this package of legislation, Maine is taking a major step forward in tackling this issue and standing up for Maine people. I applaud Senate President Jackson, Senator Vitelli, Senator Sanborn, Senator Foley, Representative Prescott, the AARP and others who championed these much-needed bills."

"For too long, Mainers have seen their prescription drug costs skyrocket because politicians were too afraid to take on Big Pharma. Today, that changes," said President Jackson. "With this prescription drug reform package, we are delivering long-overdue relief for Mainers. I'm proud that we were able to pass into law a suite of bills that go beyond simple fixes; it brings real reform and accountability to a dysfunctional system that has long prioritized outlandish profits over people's lives."

"The more transparency there is in prescription drug pricing, the more we'll be able take targeted action to help reduce the costs of these life-supporting medications. This law builds on existing disclosure requirements in Maine law and seeks out data from companies whose drug prices have increased significantly," said Sen. Eloise Vitelli. "The report issued last year by the Maine Health Data Organization is a powerful tool that lets Mainers and officials know what pharmaceutical companies are charging patients. I'm glad that we're are now able to expand on that success, to help even more Maine people."

"Mainers shouldn't have to sacrifice their health and well-being or go into debt because the cost of prescription medication is too high," said Sen. Sanborn. "This session, my committee set out to examine this complicated issue from every angle. Our goal was to figure out how we can pull every lever possible to lower the cost of prescription drugs and hold middlemen and drug companies accountable for driving up costs. I'm grateful to my colleagues for working to pass this set of bills swiftly through the Legislature and to the governor for signing them into law."

"Thousands of Mainers are impacted by skyrocketing prescription drug costs that put their health, and even their lives, in jeopardy," said Lori Parham, AARP Maine State Director. "Our elected leaders clearly recognized that prescription drug price gouging is not a Democratic or a Republican problem. This issue is about fighting for people's lives and putting people before profits."



Overview of the Package:

- A bill sponsored by Pres. Jackson <u>LD 1272</u>, "An Act To Increase Access to Low-cost Prescription <u>Drugs</u>," would set up a wholesale prescription drug importation program with approval from the U.S. Department of Health and Human Services. The Trump administration has <u>indicated its support</u> for similar measures in other states, including Florida and Colorado. This bill is modeled after a Vermont law that passed last year. Maine's proposal also includes language directing the Department of Health and Human Services to consider whether the program may be developed in conjunction with other states.
- A bill from President Jackson LD 1499, "An Act To Establish the Maine Prescription Drug Affordability
 Board" would create a Prescription Drug Affordability Board. This board would determine prescription
 drug spending targets for public entities based on a 10-year rolling average, accounting for inflation
 with spending reductions, and would provide methods for achieving lower prescription costs through
 measures such as bulk purchasing, leveraging multi-state purchasing, or negotiating specific rebate
 amounts.
- A bill from Asst. Senate Majority Leader Vitelli LD 1162, "An Act To Further Expand Drug Price
 <u>Transparency"</u> would gather information related to the pricing of drugs all along the supply chain
 from manufacturers to wholesalers, pharmacy benefit managers and insurance companies. This bill
 builds upon <u>previous legislation</u> introduced by Senator Vitelli, which became law last year. Other bills in
 this package rely on this data to understand how the costs of development, advertising, and profits
 affect pricing for the consumer.
- A bill from Sen. Sanborn <u>LD 1504</u>, "An Act To Protect Consumers from Unfair Practices Related to Pharmacy Benefits Management" prohibits pharmacy benefit managers from retaining rebates paid by manufacturers and requires those rebates to be passed along to the consumer or the health plan. Pharmacy benefit managers (PBMs), often referred to as "middlemen," have <u>come under national scrutiny</u> for driving up costs and pocketing savings despite claims that PBMs work on behalf of consumers negotiate lower drug prices. Rebates can drive up drug prices because they incentivize high wholesale prices and hide the cost of drugs from the consumer.

In the United States, <u>one in four Americans</u> struggles to pay for their prescription medication while <u>one in 10</u> <u>Americans</u> does not take their medicine as prescribed due to cost. Across the country, a number of state legislatures are taking action to address the rising cost of prescription drugs. <u>According to the National Academy for State Health Policy</u>, about 200 bills have been filed in 42 state legislatures to address the cost of prescription drugs.

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