



Janet T. Mills  
Governor

**STATE OF MAINE**  
**STATE EMPLOYEE HEALTH COMMISSION**  
**61 State House Station**  
**Augusta, ME 04333-0061**

Jonathan French  
*Labor Member, Co-Chair*

Michael Dunn  
*Management Member, Co-Chair*

STATE EMPLOYEE HEALTH COMMISSION MEETING

**Thursday, January 15, 2026 @ 8:30am**

**Microsoft Teams Meeting**

Department of Labor

45 Commerce Drive, Francis Perkins Conference Room

Augusta, ME 04330

Commission Members in Attendance: Olivia Alford, Lynn Clark, Laurie Doucette, Michael Dunn, Jonathan French, Michael Frost, Joan Hanscom, Christopher Ike, Rebekah Koroski, Doris Parenteau, Shonna Poulin-Gutierrez, Heidi Pugliese, Joanne Rawlings–Sekunda, Kim Vigue, Frank Wiltuck.  
(Total = 15)

Commission Members Absent: Lois Baxter, Claire Bell, Cecile Champagne-Thompson, Kelly John, Danielle Murphy and Nathaniel Zmek.

Vacant Seat(s): 4

Others Present: Emily Charlton, Paige Fortin, Devon French, Charles Luce, Nathan Morse and Neva Parsons – The Office of Employee Health, Wellness, and Workers’ Compensation; Sabrina DeGuzman-Simmons and Kevin Fenton – Aetna; Kathy Caiazzo, Becky Craigie, Kristine Ossenfort and Nicole Schmidt – Anthem; Lori Fecteau, Deborah Palma and Kristin Poulin – MCD Global Health; Avni Dosh, Laura Kayvonfar and Jesse Saldana – Capital Rx; Marie Bridges – Northeast Delta Dental; Amy Deschaines, Kim Greenberg, Mark Holloway, Amanda McKenzie, Ed Pierce and Ken Ralff – Lockton; Lisa Nolan and Trevor Putnoky – Health Purchasers Alliance; Laura Robert – Sunlife.

Agenda Item	Discussion	Action/Next Steps
<b>I. Call Meeting to Order (8:31 am)</b>	<b>Management Member, Michael Dunn</b> called the meeting to order.	
<b>II. Introductions</b>		
<b>III. Review and Approval of Minutes (November 20, 2025)</b>		<b>Labor Member, Laurie Doucette</b> made a motion to approve the November 20, 2025, minutes. <b>Labor Member, Michael Frost</b> seconded the motion. Motion approved.



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**IV. Recurring Monthly Business**

**a. Employee Health and Wellness Highlights – The Office of Employee Health, Wellness, and Workers’ Compensation**

Information contained in written report; highlights and discussion noted below:

**Wellness Highlights –**

- 2025 Bumper Crop Program: The 2025 Bumper Crop Pilot Program continues to show strong engagement with total redemption currently at \$87,630. While summer markets have ended, participants are using their coupons at the approximately 20 winter markets before the coupons expire on March 31, 2026.
- Wellness Ambassador Network (WAN) Update: The next quarterly meeting of the Wellness Ambassador Network is January 21. Members play a crucial role in promoting health, wellness and well-being resources for a healthier workplace. In 2026 the Network will assist WellStarME and the Office of Employee Health, Wellness and Workers’ Compensation to disseminate a survey to State of Maine employees regarding participation in the Health Premium Credit Program.

**Communication Highlights –**

- Constant Contact Metrics (Nov): The following campaigns have been sent to one or more of State of Maine groups in November, 2025 – Flexible Spending Account Open Enrollment (11,933 Recipients, 51% Open Rate, 2% Click Rate), Lung Cancer Awareness Month (14,606 Recipients, 48% Open Rate, 1% Click Rate), National Diabetes Awareness Month (14,587 Recipients, 37% Open Rate, 1% Click Rate), Alzheimer’s Disease Awareness Month (14,987 Recipients, 49% Open Rate, 1% Click Rate), Seasonal Affective Disorder Awareness Month (13,384 Recipients, 49% Open Rate, 1% Click Rate), Northeast Delta Dental Teledentistry (11,788 Recipients, 48% Open Rate, 1% Click Rate), Bumper Crop Winter Farmers’ Market (13,346 Recipients, 54% Open Rate, 3% Click Rate) and Aetna Transportation Services (759 Recipients, 63% Open Rate, 2% Click Rate). Please note that the Book of Business Open Rate is 50% and the Book of Business Click Rate is 3%.



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	<p><b>General Reminders –</b></p> <ul style="list-style-type: none"> <li>Staffing roles are continuously examined to best address operational needs with the new PRISM processes.</li> <li>The Plan Design Committee met in December, and its next meeting is scheduled for January 16, 2026.</li> <li>A Benefits Specialist position remains vacant.</li> </ul>	
<p><b>b. Committee Updates – Chair</b> <b>1. Plan Design</b></p>	<p>The health plan saw an almost 12% renewal rate for July 1, 2025, along with significant plan design changes. At the last Plan Design meeting in December, it was determined that this year the plan faces another double digit increase, around 12%. Once updated numbers are received there will be more clarity on this, but the Plan Design Committee is anticipating a significant increase and plan design changes.</p>	<p><b>Management Member, Frank Wiltuck</b> expressed concerns regarding lack of clarity in health plan accounts which impact plan design changes.</p> <p><b>Management Member Shonna Poulin-Gutierrez</b> responded that this work is being done in partnership with Lockton on a report.</p> <p><b>Management Member, Michael Dunn</b> responded that the Commissioner is aware of these concerns and suggested that a meeting with the General Government Service Center to discuss them.</p>
<b>V. QUARTERLY PLAN UPDATES</b>		
	<p>There are no quarterly plan updates.</p>	



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**VI. SEMI- ANNUAL UPDATES**

**a. Compliance Review**

- 1. **State – Anthem**
- 2. **Federal – Lockton**

Information contained in written report; highlights and discussion noted below:

**State – Anthem**

**Legislative Update –**

- The Second Regular Session of the Maine State Legislature began January 7, 2026, with a statutory adjournment date of April 15, 2026. More than 400 bills have been carried over to this session with approximately 100 bills approved for introduction. There are approximately 75 agency bills.

**Legislation Held by Governor –**

- L.D. 697, An Act to Direct the Maine Prescription Drug Affordability Board to Assess Strategies to Reduce Prescription Drug Costs and to Take Steps to Implement Reference-Based Pricing. Status: Enacted; To become law without Governor’s signature.
- L.D. 784, An Act to Require Health Insurance Coverage for Specialized Risk Screening for First Responders. Status: Enacted; To become law without Governor’s signature.

**Mandated Benefits –**

- L.D. 107, An Act to Require Health Insurance Coverage for Biomarker Testing. Status: Carried over on Appropriations Table; State of Maine Plan cost \$38,206 per year.
- L.D. 582, An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances. Status: Carried over on Appropriations Table; State of Maine Plan cost \$57,313 per year.

**Anthem** will review the fiscal impact for LD 582 because of a change in parameter from the initial fiscal impact.



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- L.D. 1502, An Act to Update the Requirements for Health Insurance Coverage of Prostate Cancer Screening. Status: Carried over for a mandate study by Bureau of Insurance.
- L.D. 1530, An Act to Improve the Sustainability of Emergency Medical Services in Maine. Status: Carried over for a mandate study by Bureau of Insurance.
- L.D. 2119, An Act to Expand Reimbursement for Treatment in Place, Community Paramedicine and Alternate Destination Transport.

**Vaccines –**

- L.D. 2071, An Act to Expand Access to Vaccines Approved by the United State Food and Drug Administration by Allowing Pharmacists to Prescribe, Dispense and Administer Vaccines and Require Insurance Coverage.
- L.D. 2146, An Act to Increase Access to Critical Vaccinations.
- Prior Authorization –
- L.D. 910, An Act to Collect Data to Better Understand the Consumer’s Health Insurance Experience. Status: Carried over.
- L.D. 1301, An Act to Prohibit the Use of Artificial Intelligence in the Denial of Health Insurance Claims. Status: Carried over.
- L.D. 1496, An Act to Ensure Ongoing Access to Medications and Care for Chronic Conditions by Changing Requirement for Prior Authorizations. Status: Carried over on Appropriations Table; Cost to State of Maine plan \$3.8M per year.



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**Federal – Lockton**

**Prescription Drugs –**

- L.D. 2005, An Act Regarding Mail Order Delivery of Prescription Drugs.

**Certificate of Need –**

- L.D. 1890, An Act to Facilitate the Development of Ambulatory Surgical Facilities by Exempting Certain Facilities from the Requirement to Obtain a Certificate of Need. Status: Public hearing on January 7, 2026; Work session scheduled for January 14, 2026.

**State Employee Health Plan –**

- L.D. 328, An Act Requiring the State to Pay a Retired State Employee’s or Retired Teacher’s Premium for Medicare Part B Under Medicare Advantage. Status: Carried over.
- L.D. 467, An Act to Require the State to Pay Medicare Part B Premiums for Certain Retired State Employees. Status: Carried over.
- L.D. 2148, An Act to Amend the Laws Governing the Health Insurance Premium Cap for State Employees.
- Anticipated Proposal Based on Legislative Requests –
- L.D. 2841, An Act to Lower Insurance Costs, Reduce Barriers to Care and Ensure Fair Prices.

**Potential Citizens’ Initiative –**

- “Resolve, Directing the Development of Legislation Establishing a Publicly Funded System of Health Care Coverage for all Maine Residents”. The petition



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was taken out in October 2025 and requires 68,000 valid signatures to move forward.

**Prescription Drug Issues –**

- What’s Trending in Rx on Capitol Hill?: In 2025 there were Executive Orders and proposed legislation aimed at Pharmacy Benefits Management (PBM) reform. A 2026 proposal prohibits a parent company of a Pharmacy Benefits Management or an insurer from owning a pharmacy business (e.g., CVS/Caremark, UHC/Optum, and Cigna/Express Scripts).
- Pharmacy Trends in 2026: Employer health plans are impacted by new indications for Glucagon-Like Peptide-1 (GLP-1) which increase utilization. Employers must decide whether to cover, or to what extent. TrumpRx is a Federal direct-to-consumer prescription drug platform offering select medications at discounted rates. Whether employers can leverage this through their plans remains to be determined.
- Litigation Involving Rx: Current lawsuits alleging collusion between drug manufacturers and Pharmacy Benefits Management is driving up the cost of insulin and other generic drugs, but the impact of employers with a potential settlement is unclear. Legal challenges to Pharmacy Benefits Management continue with state laws aimed at them but indirectly impacting employer plans.

**Out-of-Network Claims Under the No Surprises Act –**

- Out-of-Network Claims and Independent Dispute Resolution (IDR): The No Surprises Act (NSA) requires mandatory arbitration for some out-of-network claim disputes with the starting point for negotiation being the Qualifying Payment Amount (QPA). This Act is intended to result in lower out-of-network claims payments and provide an incentive for health care providers to join networks but results to date have favored providers, not plans.



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- Out-of-Network Claims and Independent Dispute Resolution: In Q4 2024, where the provider prevailed, the median payment determination was 459% of the Qualifying Payment Amount (QPA), meaning the provider requested and won a payment that was over four times the in-network amount. The number of claims going to Independent Dispute Resolution are greater than projected, making it difficult for regulators to control the situation.

**Enforcement Issues –**

- Cybersecurity / Data Breaches: The Department of Labor considers cybersecurity to be a fiduciary issue and Health and Human Services has issued a cybersecurity manual for Health Insurance Portability and Accountability (HIPAA) covered entities. More data breaches occurred in 2025.
- Mental Health Parity and Addiction Equity (MHPAEA): Rules on Hold for Now: Rules in place prior to September 2024 are still in effect and being enforced. New rules would include a substantial lift for employer plan sponsor to show compliance with parity rules including fiduciary certification requirement, relevant data analysis requirement and the meaningful benefit requirement.
- Game-Planning Mental Health Parity and Addiction Equity (MHPAEA) Compliance: Plans must have a non-quantitative treatment limitation (NQTL) comparative analysis, plans should be reviewed for any quantitative treatment limitations and compliance red flags, and the plan sponsor should review the service provider contract language and work to incorporate provisions to ensure service provider will assist in compliance, including providing an adequate comparative analysis.
- Johnson & Johnson, Wells Fargo and More!: There's a current trend in lawsuits claiming fiduciary breach regarding Pharmacy Benefits Management and benefits. The suits claim mismanagement and breach of fiduciary duties with respect to prescription drug plans resulting in higher costs and fees. The current cases are looking at large employers with trust plans.



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**What Might We See from D.C. in 2026? –**

- Possible Legislative and/or Regulatory Actions in 2026: Possibilities include promotion of individual coverage and Health Savings Account limits, prescription drug reform, fertility benefit changes and changes to the Accountable Care Act (ACA).

**Reminders –**

- The Gift That Keeps Giving: Flexibility for Accountable Care Act (ACA) Reporting Forms: Plan sponsors and health insurance providers for fully insured plans are no longer required to send 1095-C (and B) forms to employees but provide them upon request. If requested, the form must be provided by the later date of January 31 or 30 days after the date of the request. Sponsors must provide notice to employees about their right to request the form.
- Other Issues to Keep an Eye On:
  - Dependent Care Assistance Program (DCAP) limit increases from \$5,000 (\$2,500 for married filing separate) to \$7,500 (\$3,750 married filing separate).
  - Health Savings Account flexibilities under the One Big Beautiful Bill Act (OB3) include first dollar coverage for telehealth and direct primary care with no impact on Health Savings Account eligibility.
  - Accountable Care Act preventive updates include the Supreme Court upholding the preventive care mandate, additional imaging for breast cancer screening (ultrasound, MRI) if deemed necessary by a healthcare provider) and patient navigation for breast and cervical cancer screening and follow-up.
  - Health Insurance Portability and Accountability (HIPAA) reproductive rights had 2024 rules vacated by the court and privacy notices were updated in accordance with the vacated rules.



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**VII. OTHER BUSINESS**

**a. Health Coverage Insurance and Financial Services Committee Notice of Intent to Review the State Employee Health Commission pursuant to the Government Evaluation Act**

The State Employee Health Commission Evaluation Report is typically due to the Health Coverage Insurance and Financial Services Committee every 8 years, with the last report submitted in 2017. Charles Luce took the lead in updating this report for the current submission, with the assistance of the Lockton team. Copies of the report were provided to Commission members for review. The report goes to the Joint Standing Committee this week, which has the responsibility to begin their review at the end of the month. Commission members should direct any feedback to Charles Luce this week.

The Legislative Committee will schedule a meeting to review incoming bills, especially those affecting the Commission. The Bylaws Committee and Wellness Committee will also meet again soon.

A Plan Design Committee vacancy was recently filled by **Labor Member, Michael Frost**. A number of vacancies remain on various committees. Commission members can see these vacancies on the website and if interested in joining a committee they can contact the committee’s chair for consideration.

**b. Confidentiality Agreement**

Copies of the Confidentiality Agreement to be signed by Commission members were available at the meeting and were also sent to members via email last week. Commission members should print, sign and scan back to Clerk, Devon French. The agreement is in regard to Personally Identifying Information (PPI) but has been expanded to include vendors’ proprietary information. Staff in the Office of Employee Health, Wellness and Workers’ Compensation are also required to sign the confidentiality agreement. Deadline for submission is February 19, which is the next SEHC meeting date.



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<b>c. Executive Session</b>		<p><b>Labor Member, Laurie Doucette</b> made a motion to enter Executive Session.</p> <p><b>Labor Member, Joan Hanscom and Management Member, Olivia Alford</b> seconded the motion. Executive Session started at 10:32 am and ended at 10:58 am.</p>
<b>d. Open Discussion</b>	<ul style="list-style-type: none"> <li>• The Legislative Committee will schedule a meeting to review incoming bills, especially those affecting the Commission. The Bylaws Committee and Wellness Committee will also meet again soon.</li> <li>• A Plan Design Committee vacancy was recently filled by Labor Member, Michael Frost. A number of vacancies remain on various committees. Commission members can see these vacancies on the website and if interested in joining a committee they can contact the committee’s chair for consideration.</li> </ul>	
	<b>VIII. MOTION TO ADJOURN</b>	
<b>VIII. Adjourn Meeting (11:03 am)</b>		<p><b>Management Member, Frank Wiltuck</b> made a motion to adjourn. <b>Management Member, Heidi Pugliese</b> seconded the motion. Motion approved.</p>

2026 meeting schedule available at [www.maine.gov/bhr/oe](http://www.maine.gov/bhr/oe)