



MAINE ASSOCIATION
OF
HEALTH PLANS

August 31, 2020

Susan Tardiff
34 State House Station
Augusta, ME 04333-0034

Dear Ms. Tardiff,

I am writing to offer comments on the proposed Rule Ch. 210 Standards for Pharmacy Benefit Managers. MeAHP is supportive of comments offered by PCMA and believes that consistency between the law and the Rule is important.

We agree that the proposed rule goes beyond what the state requires under P.L. 2019 c. 469 in some instances including:

- Section 4, C (2) requests a template copy of the client contract and Section 5B requires that an executed original of the form of Agreement Concerning Fiduciary Obligations be submitted to the Bureau.
 - The business entities engaged in these contracts and agreements are sophisticated negotiators and well able to drive hard bargains. Health plans believe contract information should be protected and submission of the executed original form unnecessary. We suggest these requirements be struck. MeAHP believes the BOI would retain the ability to review specific contracts as part of its typical investigatory and enforcement authority upon receipt of a formal complaint.
 - An appropriate alternative for consideration could be contract certification such as what is required for TPA licensure.
- Section 4, C (4) requires written standards detailing a carrier's retail pharmacy network as well as the projected ratio of retail pharmacies to plan enrollees by county.
 - We recognize that the law explicitly states that mail order pharmacies may not be included in determining the adequacy of a retail pharmacy network. However, both the law and the Rule fail to recognize the extent to which mail

order pharmacies are utilized. These pharmacies are available to all members regardless of location and can save members money and hassle, especially during the pandemic.

- Maine passed, “Any Willing Pharmacy” requirements (MRSA 24-A, Section 4317) in 2009, and health insurance carriers currently submit networks for review and adequacy testing by the Bureau inclusive of pharmacies. We suggest that current carrier reporting be deemed sufficient to meet this requirement.

Section 4, D (4) of the proposed Rule requests information on P&T committees including the implementation of appropriate procedures to address conflicts of interest and prohibited compensation arrangements. Carriers’ P&T committees already meet a variety of accreditation standards (including CMS, URAC and NCQA) and include conflict of interest policies. We suggest that these standards be sufficient to demonstrate compliance.

Thank you for the opportunity to provide these comments.

Sincerely,

A handwritten signature in cursive script that reads "Katherine D. Pelletreau".

Katherine D. Pelletreau
Cc: MeAHP Board of Directors