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**Statement of Simane Ibrahim
Maine Access Immigrant Network
To the Joint Standing Committee on Health and Human Services**

**Speaking in Support of: LD 1955, An Act to Require Hospitals and Hospital-affiliated Providers to
Provide Financial Assistance for Medical Care**

January 17th, 2024

Senator Baldacci, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. My name is Simane Ibrahim and I am a Community Health Worker at Maine Access Immigrant Network (MAIN), a nonprofit that bridges access to health and social services for immigrants and refugees in Portland, Maine. Our organization works to build a stronger multicultural community in Portland, and to address health literacy, health care enrollment, and coordination of health care benefits and non-clinical care. MAIN provides resource and referral information that is culturally and linguistically appropriate in English, Arabic, Lingala, Portuguese, Somali, Swahili, Kurdish, and French to ensure equal access to programs and services for new Mainers from around the world.

As a Community Health Worker, I support immigrants in accessing health care coverage and care. Based on those experiences, we are testifying in support of LD 1955 today.

As an immigrant-led organization with deep roots connecting us to multiple immigrant communities, we have witnessed over and over the challenges experienced by individuals and families who lack health care coverage. Just like all Mainers, those who are immigrants are focused on creating a home for their families, contributing to their communities through work and volunteering, and engaging in everyday activities like going to school, being part of a faith community, and connecting with friends and neighbors.

LD 1955 would help ensure more immigrants are able to access free care, whether they are already eligible and face application or accessibility barriers or whether they are not currently eligible under the 150% Federal Poverty Limit (FPL) as this would raise the income cutoff to 200% of the FPL. This bill would also prohibit hospitals from requiring that application materials are notarized, would require they make their policies and plain language summaries more accessible, and would create a single streamlined application for all financial assistance programs offered by a hospital.

LD 1955 would prohibit hospitals from requiring any notarization of documents included in the free care application. This would reduce barriers to the application process given notarization requires being somewhere in person and oftentimes, an appointment. Access to transportation, taking time for an appointment, and potential illness, are all barriers to getting documents notarized. People applying for free care should not have to complete anything in person as it only further complicates the process and adds additional hoops for people to jump through.



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It has been my experience, and that of other CHWs at MAIN, that free care is extremely difficult to navigate for members of immigrant communities across the state. However, over the past few months we've been meeting with local hospitals to improve access to translated materials. We are grateful for the steps taken so far on behalf of our partners working in these hospitals. LD 1955 is an important step towards ensuring greater accessibility to free care and therefore to preventative, equitable care. By reducing application barriers, language barriers, and barriers in accessing accurate information, more immigrants will be able to enroll in free care – the care that they are income eligible for. It is for all these reasons that I urge you to support LD 1955. Thank you and I'd be happy to answer any questions.