

February 29, 2024

Senator Donna Bailey  
Representative Anne Perry  
Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services  
Cross Building, Room 220  
100 State House Station  
Augusta, ME 04333

Dear Senator Bailey, Representative Perry, and Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services;

Thank you for the opportunity to share thoughts on LD 2175. I am writing to share my opposition to the bill in its current form, in light of concerns about the Office of Affordable Health Care's capacity to administer the authorized program.

Community Health Centers (CHCs) play a key role in providing care to the people of Maine, serving as a critical safety net for uninsured and low-income patients, and offering access to primary care and other services in some of our most rural areas. I understand and support the interest of CHCs in adding or expanding pharmacy services as a means to better coordinate patient care, ensure access in their communities, and continue to benefit from the federal 340B program. Should the legislature choose to appropriate funds to support the infrastructure costs of creating or expanding CHC pharmacy services, I would encourage the addition of an evaluation structure to assess the success of the grants in meeting stated objectives and providing return on investment, including how the program impacts geographic pharmacy access, care management and medication adherence, and the revenue and financial stability of CHCs.

I am testifying in opposition to the bill because of my concern about the Office of Affordable Health Care's capacity to administer the program. The charge of the office in its establishing legislation is to analyze and interpret data, conduct studies and landscape reviews, and provide policy recommendations to elected leaders to improve health care in Maine. The statute does not contemplate the implementation or ongoing oversight of programs. In light of that, the limited staffing resources of the office have been focused on analytics, economics, and policy development, rather than administrative functions. The office is therefore not equipped to responsibly manage a significant grantmaking program, from either a financial management or program evaluation perspective. The amount of coordination necessary with other administrative divisions of state government would also make it difficult support the program via temporary contracted resources.

Thank you for your consideration of these comments, and I would be happy to answer any questions you may have before the work session.

Sincerely,



Meg Garratt-Reed  
Executive Director, Office of Affordable Health Care