Ellen Krajewski Eastport LD 1018

State of Maine | 132nd Legislature

Joint Standing Committee on Health Coverage, Insurance, and Financial Services Testimony of Ellen Krajewski, MPH on behalf of Eastport Health Care April 16, 2025

Supporting:

LD 1018, An Act to Protect Health Care for Rural and Underserved Areas by Prohibiting Discrimination by Participants in a Federal Drug Discount Program Sponsored by Senator Bailey

Senator Bailey, Representative Mathieson, and members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services, I am Ellen Krajewski, CEO of Eastport Health Care. Eastport Health Care is one of Maine's Community Health Centers (CHCs), also known as Federally Qualified Health Centers (FQHCs), and part of the largest independent primary care network in the state.

Eastport Health Care is a Federally Qualified Health Center that has two service sites in Downeast Maine: Machias and Eastport. In 2024, we provided care for over 5,700 patients in over 24,848 visits. Our patient care teams deliver adult and pediatric primary care, behavioral health care, including substance use disorder treatment, and dental care. We have the only certified Diabetes Prevention and Self-Management Program within Maine's Community Health Center Network. We are also part of the Maine Veterans' Dental Network coordinated out of the Maine Bureau of Veterans' Services.

The 340B drug pricing program was established to help safety-net providers like Eastport Health Care to stretch scarce resources to provide more comprehensive services and reach more eligible patients in rural and underserved areas.

Eastport Health Care uses 340B funds to cover costs related to providing primary care, behavioral health and dental services to those without insurance. 879 individuals in our patient population are uninsured – that is nearly 16% of our patients. In addition, 340B funds are used to help patients connect with local and regional resources to improve their basic quality of life, such as food distribution for those who are food insecure and lack transportation resources. Our patients struggle to access basic resources to live. 1,926 patients live at or below the poverty level. That's 34% of our patients. Another 1482 patients live at 200% of the poverty level or below. That's an additional 26% of our patients.

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Pharmacy restrictions have made it much harder to support our patients because we have less revenue to support the people that need our help. Eastport Health Care is an FQHC and we have tight margins. All of our revenue goes back into our organization to support our mission, which is to provide health care to our community members, including our most vulnerable members. The 340B program funds supports our work and with less funding due to the pharmaceutical manufacturers restrictions on the program, we have had to limit services. Our diabetes Prevention and Management Program includes a full time Diabetes Nurse Manager, a Registered dietician services, and a Community Health Worker connecting the dots with these patients to help compliance and improve health. These services are not reimbursable at a sustainable rate. 340B funds go towards the expenses of these program costs, in order to keep offering the services.

In order to compensate for these growing 340B losses, we have to limit the amount of non-reimbursable support we provide patients. We have to strictly manage activities to make sure we generate the revenue we need to keep the doors open. We no longer can participate in community health fairs or do school-based educational programs. We have to limit Community Health Worker time spent on helping patients connect

with and navigate resources. Staff are asked to take on additional tasks and we strive to get the same work done with fewer and fewer staff. This is a very challenging time in health care and patients are sick with multiple chronic illnesses. They have many needs. EHC can only meet part of those health-related needs. If the restrictions are not removed, the worst outcome for EHC is that we will no longer be able to sustain these non-reimbursable programming and positions that have become essential for our patients.

We strongly support LD 1018 and thank Senator Bailey and the other co-sponsors for bringing this bill forward. This bipartisan legislation will stop attacks on our health center from large out-of-state pharmaceutical manufacturers and protect access to 340B, keeping savings from the program in Maine to directly support our patients.

On behalf of Eastport Health Care, thank you for considering our comments. Please do not hesitate to contact me directly at ekrajewski@eastporthealth.org with any follow up questions.

Thank You, Ellen Krajewski, MPH, CEO