

380 Lincoln Street South Portland, Maine 04106

April 24, 2025

To: Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services

RE: Support for LD 1496 – Ensuring Ongoing Access to Medications and Care for Chronic Conditions and Long-term Care

I am a family physician in South Portland running a solo practice trying to best meet the needs of my patients and help them navigate the overly complicated health care system, which is especially challenging in Maine, given very difficult access to care.

LD 1496 reforms prior authorization processes for health care services and prescriptions for chronic conditions and long-term care in Maine. By ensuring prior authorizations remain valid for the duration of treatment or one year (whichever is longer), limiting renewals to once every five years, and protecting coverage continuity during health plan transitions, this bill reduces administrative burdens and safeguards patient care. I strongly urge your support for its passage to enhance healthcare access and equity.

The bill ensures that patients with chronic conditions, such as diabetes or cancer, maintain uninterrupted access to approved treatments. By extending prior authorization validity and limiting renewals to once every five years, it prevents care disruptions that can exacerbate health issues. For example, delays in treatment for chronic illnesses can lead to hospitalizations, costing Maine's healthcare system millions annually.

Frequent prior authorization renewals strain healthcare providers and patients. The bill's provisions streamline processes, allowing providers to focus on care rather than paperwork. A 2021 American Medical Association survey found 88% of physicians reported prior authorization burdens negatively impact patient outcomes.

By prohibiting coverage restrictions for 90 days after enrollment in a new health plan and requiring 90 days' notice before changes, the bill ensures stability for patients reliant on ongoing treatments. This is critical for low-income or elderly enrollees who may face plan changes due to financial constraints. States like California have implemented similar reforms, reducing administrative costs by 15% and improving patient satisfaction. Maine can replicate these benefits, strengthening its healthcare system.

Critics may argue the bill increases costs for insurers by limiting their ability to review treatments. However, extended prior authorizations reduce administrative expenses, offsetting potential costs. Additionally, concerns about outdated treatments are addressed by allowing rescission of authorizations for doses exceeding legal limits, ensuring safety without overburdening patients.

LD 1496 is a patient-centered reform that ensures stable, equitable access to care for Maine residents with chronic and long-term conditions. By reducing bureaucratic hurdles and protecting treatment continuity, it promotes better health outcomes and system efficiency. I respectfully urge your support for this vital legislation.

Very Respectfully,

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Michael A. Ciampi, M.D.