

Committee on Health Coverage, Insurance and Financial Services

Testimony in Support of LD 1687 – An Act to Clarify and Increase Access to HIV Prevention Medications

April 29, 2025

Senator Bailey, Representative Mathieson and Honorable Members of the Committee on Health Coverage, Insurance and Financial Services, my name is Jennifer Gunderman, Director of Bangor Public Health and Community Services, and I'm providing testimony on behalf of the City of Bangor in Support of LD 1687, "An Act to Clarify and Increase Access to HIV Prevention Medications".

Currently, the City of Bangor is experiencing the largest outbreak of HIV in Maine over the past few decades. According to Maine CDC, the outbreak disproportionately impacts people who inject drugs and are experiencing or at risk for homelessness. PrEP (pre-exposure prophylaxis) and PEP (post exposure prophylaxis) are two types of antiretroviral treatment used to protect against HIV transmission. Wide availability of PrEP and PEP is critical to control the current outbreak and prevent future ones.

Fortunately, in 2021, Maine passed legislation that enabled people to access HIV pre- and post-exposure prophylaxis directly from a pharmacist. With protocols now officially adopted by the Maine Board of Pharmacy, it is important to address key provisions in the statute to ensure effective implementation:

- Reimbursement LD 1687 ensures pharmacists are recognized as providers and reimbursed at a rate comparable to physicians for equivalent services required by Maine Board of Pharmacy protocols. This model is consistent with other states passing similar legislation.
- Medication Coverage scientific advancements of HIV medications are emerging rapidly. Longacting injectable medications are a game changer in the ability to stop HIV transmission and a medication that protects from infection with just one injection over a 6-month period is on the cusp of entering the market. LD 1687 ensures coverage for these medications of longer duration so people can access the strongest prevention methods available.

Low barrier access to PrEP and PEP are essential to increasing availability to this evidence-based prevention strategy. People who engage in high risk behaviors are often the same people that experience significant challenges to accessing health care and medications. Successful implementation of PrEP and PEP provided directly from a pharmacist will expand access to HIV prevention across our state. To do so, we urge you to support LD 1687. Thank you for your leadership on this critical issue.

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