

LD 1687 – Ought to Pass

Committee on Health Coverage, Insurance and Financial Services

Senator Bailey, Representative Mathieson, and Honorable Members of the Committee on Health Coverage, Insurance and Financial Services I write to express my strong support for LD 1687, *An Act to Clarify and Increase Access to HIV Prevention Medications*. This bill builds on its previous version by addressing pharmacy reimbursement and medication coverage that expands access to HIV prevention at pharmacies.

In 2021, Maine helped lead a nationwide effort to become the third state in the country to pass legislation that enabled people to access HIV pre- and post-exposure prophylaxis directly from pharmacists. However, the issue of reimbursement was left unaddressed.

I began working with people with HIV/AIDS in 1989 when people diagnosed with the disease had only months to live. I'm the former Executive Director of The AIDS Project and the AIDS Lodging House in Portland, a former member of the Governor's Task Force on HIV/AIDS, staff attorney at Harvard's AIDS Law Clinic, and have taught multiple courses on AIDS Law and Policy. I've witnessed the heartache and grief of thousands of people with HIV/AIDS, their friends and loved ones, and I have witnessed how stigma and discrimination delayed the development and delivery of AIDS treatment.

The medications and treatments developed since the beginning of the epidemic are life-saving. Pre-exposure Prophylaxis (PREP) and Post-exposure Prophylaxis (PEP) can prevent transmission in over 98% of cases, when used properly. The recent addition of long-acting injectable medications takes prevention and care a step further by offering a new treatment that supports adherence when taking daily pills presents a challenge. Increasing availability and coverage for prevention services and medications is a step we must take if we want to end the HIV epidemic. LD 1687 addresses these concerns.

This bill would allow pharmacists to prescribe and receive direct reimbursement for PEP and PREP. Current law allows pharmacists to prescribe a single 60-day course of treatment to people who are HIV negative and want to prevent transmission. Under LD 1687, pharmacists can prescribe this treatment like the healthcare providers that they are and would be able to receive direct reimbursement from public and private insurers for their services.

The bill's enactment would be an enormous step forward in health care access. Thousands of Mainers live in rural areas where access to a physician or nurse practitioner may be hours away or lack a primary care physician who can prescribe their meds. People in rural areas are likely to live much closer to a pharmacy, allowing them

faster access to these methods, which must be taken quickly to prevent HIV. Surely, we want to give Mainers in rural areas the same access to care that people in larger towns here have. We want to ensure access by reimbursing pharmacists directly for their services when they prescribe doses of PREP or PEP.

Right now, there is a major outbreak of HIV infections in Bangor, Maine. Members of that community need rapid access to HIV Prevention medication. There are simply not enough healthcare providers there who can rapidly assess and prescribe to a person who needs timely access to prevention medication. Increasing the ability of pharmacists to receive direct reimbursement when prescribing these medications is the next step in ensuring timely access.

Please pass LD1687

Sincerely,

Deborah Shields, JD, MPH

Saco, ME