Good afternoon, Senator Bailey, Representative Mathieson, and honorable members of the Health Coverage, Insurance, and Financial Services Committee.

My name is Sarah Dore. I live in Kennebunkport, and I submit this testimony in strong support of LD 1688: An Act to Encourage Continuing Education on Infection-Associated Chronic Conditions for Physicians and Nurses.

In November 2021, I contracted COVID-19. Before that, I was a healthy, active 43-year-old woman. Since then, I have developed a range of chronic, debilitating symptoms that have been diagnosed as Long Covid, Postural Orthostatic Tachycardia Syndrome (POTS), Dysautonomia, ME/CFS, and other infection-associated chronic conditions.

These illnesses have profoundly changed my life. But what made things even harder was how difficult it was to access informed care. I was fortunate to have brief access to the Long Covid Clinic through MaineHealth — a rare resource that offered compassionate, collaborative care. The clinicians there, although not Long Covid experts, were dedicated to learning in real time, with me. Unfortunately, the clinic was disbanded after a year due to lack of funding. I was devastated.

After that, I had no choice but to seek care out of state. Despite being incredibly sick, I was forced to begin traveling back and forth to Boston to see multiple specialists—not because I wanted to, but because there were no providers in Maine who felt confident managing my care. Luckily, I had the resources to make these trips- family support, access to transportation, limited financial resources, and insurance that allowed me to access out-of-state providers, but so many more do not.

That's why LD 1688 is so critical. This legislation strengthens Maine's existing licensing requirements by encouraging physicians, osteopathic doctors, physician assistants, and nurses to include education on infection-associated chronic conditions as part of the 100 hours of continuing medical education they must complete every two years (per MRSA §3280-A).

Importantly, LD 1688 updates the language in law to accurately reflect the range of these conditions, listing examples such as Long Covid, chronic Lyme disease, myalgic encephalomyelitis (also known as ME/CFS), POTS, and dysautonomia.

These conditions are not rare. **Roughly 1 in 19 people in the U.S. are now living with Long COVID**, and approximately **31 million Americans live with infection-associated chronic conditions** (IACCs). These illnesses can follow common infections like the flu, Lyme disease, strep, or COVID-19. Just like my experiences, they can affect multiple systems of the body, require multiple specialists, and place a tremendous burden on patients and caregivers alike.

Yet despite their prevalence, these conditions are **underdiagnosed**, **poorly understood**, and often **excluded from medical school curricula** — especially ME/CFS, which isn't even part of most U.S. physician training.

**LD 1688 meets the moment.** By improving provider knowledge, we can promote earlier diagnoses, better care coordination, improved health outcomes, and reduced strain on Maine's already stretched healthcare system. For patients, this means a better chance of staying in school, staying employed, and staying connected to their communities. Mainers like me shouldn't have to travel out of our beautiful state, risking their health and assuming additional financial burdens to access healthcare needs that could be met right here in our own communities.

When I speak with other Mainers affected by these conditions, I hear the same story—*just like my story*—repeated again and again: it's not just the illness that's devastating—it's the loneliness, the lack of recognition, and the repeated dismissal. **LD 1688 won't fix everything, but it's an essential first step toward a more informed, compassionate, and prepared healthcare system**.

I respectfully urge you to support this bill and to give Mainers like me living with chronic post-infectious illnesses the dignity and care they deserve. Thank you for your time and for your commitment to the health of all Mainers.

Sarah Dore Kennebunkport, Maine Sarah Dore Kennebunkport LD 1688

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