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April 29, 2025

Senator Donna Bailey, Chair Representative Kristi Mathieson, Chair Members, Joint Standing Committee on Health Coverage, Insurance and Financial Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1687 – An Act to Clarify and Increase Access to HIV Prevention Medications

Senator Bailey, Representative Mathieson and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services,

Thank you for the opportunity to provide information for consideration as you deliberate LD 1687, *An Act to Clarify and Increase Access to HIV Prevention Medications*.

We have heard pharmacists express concern about the financial viability of offering HIV (human immunodeficiency virus) prevention services without guaranteed reimbursement, and that pharmacists have thus not fully participated in the implementation of this coverage as previously authorized. This has stalled access in communities where medical appointments are limited or unavailable. LD 1687 presents a structural change that will allow for more equitable delivery of HIV prevention services statewide and support broader uptake of Pre-Exposure Prophylaxis (PrEP).

Implementing the requirements to MaineCare will take time and we appreciate the time afforded in the proposal for the required state plan amendment, rule, and systems updates to take place. This will likely have a small fiscal impact on MaineCare, which is still being assessed.

PrEP is one of the most effective methods of HIV prevention, reducing the risk of sexual transmission by approximately 99% when taken as prescribed. The impact of HIV can be significant: The current outbreak of HIV in Penobscot County serves as a reminder that localized increases in HIV diagnoses can occur in regions across the state, underscoring the importance of continued public health vigilance and intervention. Maine CDC works closely with individuals and organizations statewide, providing coordination, education, and access support to those facing barriers to initiating or maintaining HIV prevention care. These barriers often include limited provider availability, high out-of-pocket costs, and difficulties navigating the healthcare system—especially in rural areas where pharmacies are often the most accessible healthcare resource.

Expanding HIV prevention access through community pharmacies offers a practical solution to these challenges. Pharmacies already serve as essential access points for healthcare, particularly in underserved areas, and more fully integrating HIV prevention services into these settings would help overcome barriers to care.

Please feel free to contact me if you have any questions during your deliberation of this bill.

Sincerely,

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Director

Maine Center for Disease Control and Prevention

Maine Department of Health and Human Services