

Statement of Hibo Omer, New Mainers Public Health Initiative  
To the Joint Standing Committee On Health and Human Services in support of:  
LD 1937, An Act to Require Hospitals and Hospital-affiliated Providers to Provide Financial  
Assistance Programs for Medical Care  
May 12, 2025

Senator Ingwersen, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services. My name is Hibo Omer. I'm here to speak in support of LD 1937, An Act to Require Hospitals and Hospital-affiliated Providers to Provide Financial Assistance Programs for Medical Care.

I am the Executive Director at New Mainers Public Health Initiative, which serves as the leading health-related, community-based organization directly serving the needs of the immigrant and refugee youth and their families in Maine. When tackling the medical debt problem in Maine, it is critical to acknowledge the considerable influence it has on the socioeconomic determinants of health.

Individuals' impediments to getting free care have far-reaching consequences for our community's well-being. Our team of community health workers often sees clients who have difficulties in applying for and receiving free care. Barriers to accessing free care affect their social determinants of health, such as affording basic needs, including food and housing. We support community members who qualify for free care but often end up in collections due to a lack of effective communication about what services are or are not covered under the program. This lack of clarity makes it extremely difficult for people to access the care they need. It not only puts an unnecessary burden on their finances but also impacts their mental and emotional health.

Some of our community health workers have worked with people who received unexpected medical bills even though they qualified for free care. One client was not informed at the hospital that the lab work she needed was not included in free care. She informed the hospital that she was enrolled in and using free care and was told she would not receive a bill for the services provided. However, a little while later, she was sent a bill she could not afford to pay. It is critical to recognize that medical debt is more than simply a financial burden; it has a direct influence on the social determinants of health. Individuals with medical debt frequently struggle to satisfy basic needs, such as affording heat, groceries, gas, and childcare, resulting in negative consequences on overall health. LD 1937's objectives are consistent in reducing these effects and laying the groundwork for a healthier and more resilient community. It is critical to tackle Maine's medical debt issue, which can result from some of the scenarios I have mentioned. This proposed bill makes substantial strides toward a healthier and more equitable future for all Mainers by extending eligibility for free care to 200% of the federal poverty level, enhancing accessibility, protecting patients from unfair collection efforts, and reducing barriers in the

application process. I encourage you to support this bill in order to reduce medical debt among Maine citizens and build a more equal healthcare system. Thank you for your time and attention.