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Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention
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1/27/2026

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

Re: LD 2151 – *An Act to Improve Access to Affordable Prescription Drugs in Underserved Areas*

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 in opposition to LD 2151, *An Act to Improve Access to Affordable Prescription Drugs in Underserved Areas*.

LD 2151 directs the Department to allocate funds to federally qualified health centers (FQHCs) to develop and expand retail pharmacy capacity in this State to address the critical shortage of access to affordable prescription drugs. The bill provides one-time funding of \$4,000,000 in fiscal year 2026-27 for that purpose. The bill provides that initial awards for funding must be made by December 15, 2026. An evaluation team, primarily composed of individuals with experience in the operation and management of FQHCs, will conduct the selection process.

Maine Center for Disease Control and Prevention (Maine CDC) opposes LD 2151 because of the resources needed to implement this bill. The Department does not have the capacity to absorb the added work of the Rural Prescription Drug Program without additional staffing. The following information is for the Committee's consideration if the legislation were to be enacted as written.

Maine CDC Rural Health and Primary Care Program's five dedicated staff work to improve access to quality health care for Maine's residents living in rural and medically underserved areas. Maine CDC does not currently have the capacity to support the timely implementation and administration of the Prescription Drug Program. The two additional staff positions approved by the 131st to implement similar legislation would need to be re-instated to effectively and responsibly manage the work outlined in this bill.

Additionally, Maine CDC suggests amending LD 2151 to include additional types of healthcare facilities beyond those currently specified. Access to health care can be complex and becomes more of a challenge in rural and underserved areas of Maine. Broadening the scope of eligible facilities may improve program flexibility and extend its impact. Other potential health care facilities include CMS Certified Rural Health Clinics and rural hospitals with pharmacies.

Finally, the statutory deadlines specified in the current proposal is not feasible given the current restraints of capacity and internal operations. Allowing additional time for implementation and application processing will ensure operational cohesion and a smoother rollout and may help reduce the administrative burden for the participants and the Department.

In conclusion, the Department is aware of the challenges and recent closures of retail pharmacies across Maine and appreciates the Legislature's attempt to increase access to pharmacy services in underserved communities throughout our State. If this legislation is to pass, Maine CDC urges the Committee to adopt amendments to include funding for additional staff to manage the Rural Prescription Drug Program and language to provide eligibility for additional facility types, and that the proposed timelines be extended. Maine CDC is available to provide additional information or technical assistance upon request.

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

Sincerely,

A handwritten signature in blue ink, appearing to read "Puthiery Va.", is positioned above the typed name.

Puthiery Va, DO
Director

Maine Center for Disease Control and Prevention (Maine CDC)
Maine Department of Health and Human Services