

Testimony of Lauren Blanchette, PA-C

In support of LD 2088 “An Act to Increase Access to Primary Care Provided by Physician Associates”

Senator Bailey, Representative Mathieson, and members of the Health Coverage, Insurance and Financial Services Committee, my name is Lauren Blanchette. I am a resident of Oakland, Maine, and I practice cardiovascular medicine in Skowhegan. I have additional training in nutrition and metabolism, lifestyle medicine, and I am currently completing a fellowship in longevity medicine. My intent is to utilize this education to open a longevity and preventive care practice in Waterville, Maine, in addition to continuing in my cardiology role.

I have been a practicing Physician Associate for nearly 17 years, all of which have been spent serving patients in Central Maine. I am here today in support of LD 2088, *“An Act to Increase Access to Primary Care Provided by Physician Associates.”*

As you are well aware, Maine faces significant challenges in healthcare access due to provider shortages, particularly in central and northern regions of the state. Recent hospital closures have further exacerbated these gaps. In my own practice, I routinely encounter patients actively seeking preventive care who are facing wait times of 12 to 18 months. Allowing Physician Associates to practice independently would help alleviate these access barriers and better meet the needs of Maine residents.

The current requirement for Physician Associates to maintain a collaborative practice agreement with a physician should not be conflated with improved quality of care. These policies are largely bureaucratic and hold Physician Associates to different standards than Nurse Practitioners, despite similarly rigorous education, extensive clinical experience, and ongoing certification and recertification through the NCCPA and the Board of Medicine. These requirements fail to recognize Physician Associates as the highly capable healthcare providers we are.

In addition, securing a collaborating physician can be both costly and difficult. Many physicians in Maine are already overextended. When I approached a physician colleague—someone familiar with my clinical skills and with whom I share patients—she declined, citing capacity constraints and concerns about additional malpractice liability. This is not an uncommon experience. As a result, many PAs are forced to pay hundreds or even thousands of dollars per month to third-party services to meet this requirement. Nurse Practitioners do not face these same barriers or financial burdens, despite fulfilling similar roles in patient care.

Basing the viability of a practice on the availability of another individual also introduces significant risk. A collaborating physician may retire, relocate, or otherwise withdraw from the arrangement, placing a PA's practice—and patients' access to care—in jeopardy. Furthermore, it can be challenging to find a collaborating physician with expertise aligned to a PA's specialty. In my case, I have pursued advanced training in longevity medicine, an area in which I have greater depth of knowledge than many physicians in my local community.

For these reasons, I strongly urge you to support LD 2088. This legislation represents a meaningful opportunity to expand access to high-quality, preventive, and primary care for the people of Maine.

Thank you for your time and consideration.

Sincerely,

Lauren Blanchette, PA-C