

Isabella Taylor  
Lewiston  
LD 2103

Dear Department of Health and Human Services, Chairs Senator Henry Ingwersen and Representative Michele Meyer,

Thank you for considering my testimony and thank you to Representative Julia McCabe for introducing LD 2103: An Act Requiring Hospitals to Adopt Cybersecurity Plans.

My name is Dr. Isabella Taylor, a family medicine and hospitalist doctor in the Central Maine Medical Center System. As many of us know, we were hit by a Cybersecurity attack that wiped out our whole electronic medical record system for the whole month of June. This affected every aspect of workflow including patient communications, phone lines, labs, imaging, prescriptions, and more.

In this age where cyber attacks are unfortunately the norm, we need better laws and procedures to both protect against future attacks but also confirm efficient back up plans. The first day I entered clinic I knew we would use normal “down time” protocol, in that I only knew to use paper forms to keep track of patient identifiers, symptoms and plans. Our office manager was given little information on the next steps from leadership, and for the next 30 days, we just took it day by day. This was extremely difficult as many patients do not know their own medical history or medications. Some medications if not called in right away could result in life threatening withdrawal. Controlled scripts had to be picked up in person, which limits those with transportation barriers. We relied on the grace of local pharmacies, other network providers, and ultimately our wonderful support staff.

Back up plans on how to work with surrounding out of network facilities also would have saved a lot of headaches. We did not have the proper paperwork to order from outside facilities or how they would communicate with us in the event of emergency results.

The hospital was much more dangerous this month. I worked as an admitting hospitalist doctor and not being able to quickly communicate with nurses and doctors always made me worry I was missing something. I had to physically go to see the patients, and printed results or previous medications/interventions given. This takes a lot of time when one is admitting multiple patients at once. Simple poor penmanship could have cost someone an injury. Handing over work up and next steps thus far was a set up for disaster every change of shift.

LD2103 introduces the next steps to protect patients and doctors from one of the biggest threats to health care. Thank you for your time.

Dr. Isabella Taylor