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Testimony of Whitney A. Parrish Perry

American Heart Association

In Support of LD 2208

“An Act to Offset Federal Cuts to Health Insurance for Certain Maine Families
and Seniors”

February 26, 2026

Good afternoon, Chairs Bailey and Mathieson, and distinguished Members of the Joint Standing Committee on Health Care, Insurance, and Financial Services:

My name is Whitney Parrish Perry, and I am the Government Relations Director for the American Heart Association. The American Heart Association is the nation’s oldest and largest voluntary organization dedicated to fighting heart disease and stroke, and whose mission is to be a relentless force for a world of longer, healthier lives. Thank you for the opportunity to provide testimony in support of LD 2208. Thank you as well to Speaker Fecteau for sponsoring this important legislation and for his strong and consistent leadership in ensuring access to care for all Mainers.

Access to care is essential because **timely, reliable health services are central to preventing and managing serious health conditions**. This is especially true for cardiovascular conditions such as heart disease and stroke. Regular blood pressure monitoring, antihypertensive medications, cholesterol management, diabetes management, clinician-supported lifestyle and behavioral interventions, cardiac rehabilitation, stroke rehabilitation, and rapid evaluation of symptoms like chest pain and stroke warning signs all depend on people being able to reach providers **when they need them**. Consistent access to primary care, specialists, medications, and emergency services enables people to reduce their risk of heart disease and stroke and effectively manage existing cardiovascular, cerebrovascular, and other heart-related diseases. This need is especially pronounced in Maine’s vast rural regions, where availability of clinicians and services is limited, and patients often travel long distances—sometimes hours—to receive routine or specialty care.



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When ACA Marketplace plan premiums rise sharply, or safety-net health insurance coverage like MaineCare (Medicaid) becomes inaccessible, people are more likely to **lose coverage, delay care, or forgo it entirely**. These gaps can result in uncontrolled hypertension, unmanaged high cholesterol, and worsening cardiac symptoms. These are examples of conditions that are both **preventable and costly when not addressed early and ongoing**. Higher out-of-pocket costs can lead individuals to skip routine visits that detect cardiovascular risk factors, and those already living with heart disease may experience interruptions to essential medications, diagnostic testing, cardiac rehabilitation, and more. In emergency situations, uninsured individuals may hesitate to seek immediate treatment, which can significantly worsen outcomes for conditions like stroke where every minute matters. As coverage becomes more unstable, hospitals and clinics may see increases in uncompensated care and greater strain on already stretched resources. This affects not only the individuals who lose coverage due to affordability, but also the broader health system and the communities that depend on it for timely, lifesaving cardiovascular and other essential health care.

The American Heart Association supports the policy measures in this bill, especially those designed to help Mainers maintain health insurance coverage—both through Marketplace plans and MaineCare (Medicaid) coverage—by addressing federal policy changes that could affect access, affordability, and continuity of care.

Heart disease remains the leading cause of death in the United States and globally,ⁱ and stroke is a major cause of death and disability.ⁱⁱ **Consistent, affordable access to care is essential to prevention and long-term health**. When premiums rise faster than income, people are more likely to become uninsured or underinsured, increasing the risk of unmanaged conditions and poorer health outcomes. Maintaining affordable premiums helps ensure continuity of care, particularly for people managing cardiovascular risk factors or recovering from a cardiovascular condition or emergency. From patients to providers, managing risk factors like hypertension and preventing cardiovascular disease **strengthens the entire health system and supports healthier, longer living communities**. Keeping premiums within reach helps individuals and families maintain the coverage they need, benefitting all of us.

Similarly, the creation of a MaineCare (Medicaid) Federal Response Fund plays an important role in maintaining access to essential care. MaineCare (Medicaid) is a critical



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source of coverage for many low-income adults, children, older adults, and people with disabilities, and it provides access to services that directly reduce cardiovascular risk, such as blood pressure management, cholesterol treatment, diabetes care, smoking cessation programs, and follow up for stroke and heart-related events. When federal matching funds decline, states often face difficult choices that can affect eligibility, benefits, provider reimbursements, and more. This dedicated response fund would support offsetting shortfalls caused by reductions in federal matching funds and help protect enrollees from losing coverage or experiencing disruptions in care.

Equally important for maintaining essential care is helping residents navigate changing federal requirements for MaineCare (Medicaid) eligibility and renewals. Complicated paperwork, shortened deadlines, or confusing renewal rules can all lead to people losing coverage despite remaining eligible. This translates to interruptions in routine care, delays in medication refills, and increased risk of unmanaged conditions like hypertension or uncontrolled cholesterol leading to more serious complications. By supporting outreach, technology improvements, and assistance with renewals, this response fund would help **prevent avoidable coverage loss and ensure Mainers stay connected to the care** that keeps them healthier and reduces long-term cardiovascular risk. Much like the stabilization of premiums, stabilizing MaineCare (Medicaid) is an essential part of strengthening the health system and supporting healthier communities statewide.

For these reasons and more, we ask you to support LD 2208 and respectfully encourage you to vote ‘Ought to Pass.’

Thank you for your time and consideration; please do not hesitate to contact me at whitney.parrishperry@heart.org with questions or for additional information.

ⁱ Palaniappan LP, Allen NB, Almarzooq ZI, et al; on behalf of the American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Committee. *2026 Heart disease and stroke statistics: a report of US and global data from the American Heart Association*. Circulation. Published online January 21, 2026. doi:10.1161/CIR.0000000000001412

ⁱⁱ Ibid.