CYSTIC FIBROSIS
FOUNDATION®

March 5, 2026

Joint Standing Committee on Health and Human Services
Maine Legislature
100 State House Station
Augusta, ME 04333

Dear Honorable Members of the Joint Standing Committee on Health and Human Services:

On behalf of the more than 270 people living with cystic fibrosis (CF) in Maine, we write to express our support for LD 2196 (Gattine), which streamlines the prior authorization (PA) process for individuals living with chronic conditions. PAs can delay access to critical CF therapies and the Cystic Fibrosis Foundation supports efforts to minimize the administrative burden PAs impose on patients and their providers and enhance efficiency of the process.

About Cystic Fibrosis

Cystic fibrosis is a progressive, genetic disease that affects the lungs, pancreas, and other organs. There are close to 40,000 children and adults living with cystic fibrosis in the United States, and CF can affect people of every racial and ethnic group. CF causes the body to produce thick, sticky mucus that clogs the lungs and digestive system, and can lead to life-threatening infections. CF care is grounded in evidence-based clinical guidelines and as a complex, multi-system disease without a cure, CF requires an intensive treatment regimen including multiple medications. For people with CF, it is not uncommon to take seven therapies every day, and as many as 20.[1] Many medications are taken year after year, and in most cases, for life. While advances in CF care are helping people live longer, healthier lives, we also know that the cost of care is a barrier for many people with the disease.

Prior Authorization Reform

Prior authorizations can create obstacles to accessing care for people with CF, sometimes delaying the start or continuation of needed treatments and leading to adverse health outcomes. In a 2024 survey by the American Medical Association, 93 percent of physicians reported that prior authorizations led to delays in necessary care for their patients whose treatment required PA and 82 percent reported that PAs have led to patients abandoning their treatment at some point.[2] Additionally, more than one in four physicians reported that PA has led to a serious adverse event for a patient in their care such as hospitalization, disability, or even death. Because CF is a progressive disease, patients who delay or forgo treatment—even for as little as a few days—face increased risk of lung exacerbations, costly hospitalizations, and potentially irreversible lung damage.

PAs can also cause a significant administrative burden for CF providers and are often redundant for medications that people with CF must take indefinitely to maintain their health. In the aforementioned survey, physicians and their staff reported spending 13 hours each week completing prior

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[1] Sawicki, G. S., Sellers, D. E., & Robinson, W. M. (2009). High treatment burden in adults with cystic fibrosis: challenges to disease self-management. *Journal of cystic fibrosis*, *8*(2), 91-96. Available at: https://doi.org/10.1016/j.jcf.2008.09.007

[2] American Medical Association. (2024). 2024 AMA prior authorization physician survey. Available at: https://www.ama-assn.org/system/files/prior-authorization-survey.pdf

authorizations, and 40 percent of physicians have staff who work exclusively on PA. This arduous process diverts valuable time and resources away from direct patient care.

Recognizing that people living with CF and other lifelong, chronic diseases take the same drugs for most of their lives, we appreciate that LD 2196 requires insurers to honor a prior authorization approval for therapies and other services used to treat chronic and long-term conditions for one year. Additionally, the bill prohibits plans from requiring repeat authorizations for these items and services more frequently than every two years. Eliminating unnecessary repeat authorizations will help promote immediate and consistent access to life-saving therapies for people with CF, and significantly reduce the administrative burden for CF care teams.

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The Cystic Fibrosis Foundation understands the challenges insurers face in managing medication utilization and the rising cost of health care. However, utilization management strategies that further burden patients and providers are unacceptable and cannot come at the expense of delays in patient access to needed care. LD 2196 provides an opportunity to make prior authorization processes more transparent, efficient, and evidence-based, allowing for timely access to appropriate treatments. Please contact Amanda Attiya, State Policy Specialist, at aattiya@cff.org or 240-482-2879 with any questions about this important issue for the CF community in Maine.

Sincerely,

Mary B. Dwight
Chief Policy & Advocacy Officer
Senior Vice President, Policy & Advocacy
Cystic Fibrosis Foundation

Amanda Attiya
Cystic Fibrosis Foundation
LD 2196

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Please find our full comments attached. Please contact Amanda Attiya, State Policy Specialist, at aattiya@cff.org or 240-482-2879 with any questions about this important issue for the CF community in Maine.

Sincerely,
The Cystic Fibrosis Foundation