

March 5, 2026

Sen. Henry Ingwersen, Chair
Rep. Michele Meyer, Chair
Committee on Health and Human Services
100 State House Station
Augusta, ME 04333

RE: LD 2196 – An Act to Lower Health Insurance Costs, Reduce Barriers to Health Care and Ensure Fair Prices for Health Care

Good afternoon, Senator Ingwersen, Representative Meyer, and members of the Committee.

My name is Amelia Arnold, and I am a pharmacist representing both Maine Society of Health-System Pharmacists and Maine Pharmacy Association. Together, these two organizations address the advocacy, continuing education and professional needs of all licensed pharmacists, pharmacy technicians and student pharmacists in Maine. We promote public health by advocating for the profession of pharmacy. I am here today to speak in strong opposition to LD 2196.

This bill poses a significant threat to the safety and stability of healthcare in Maine.

LD 2196 imposes over one billion dollars per year in cuts to hospital reimbursement. These cuts are so severe that hospitals across the state will be at an even higher risk for closure. When hospitals close, patients lose access not only to emergency care, but to primary care, behavioral health, oncology, cardiovascular services, and more. Mainers—especially in rural communities—will be forced to travel long distances, or even out of state, for care they should be able to receive close to home.

For pharmacists working inside hospitals, these closures and service reductions are devastating. Maine's hospitals estimate thousands of job losses statewide if LD 2196 passes. Pharmacy departments are already stretched thin, and further cuts mean fewer pharmacists verifying medication orders, fewer clinicians rounding with providers, and fewer experts available to prevent medication errors.

As a pharmacist working in an independent community pharmacy, I recognize that my colleagues in hospital settings play a critical role in keeping patients safe. They adjust doses based on labs, catch drug interactions, support emergency and intensive care teams, and prevent adverse drug events before they reach the patient. When hospitals are forced to cut staff or shut down services, the risk of preventable medication errors goes up—and patients pay the price. We have seen this first-hand with all of the closures of healthcare locations all across the State when we receive and care for these patients in the community.

LD 2196 threatens our already fragile access to specialized care. Losing these services would not only endanger patient outcomes—it would increase transfers, delays in treatment, and overall healthcare system strain.

Finally, the bill will accelerate the collapse of rural healthcare. Rural hospitals already operate with thin margins with one closing just last year, and the Maine Hospital Association has already provided publicly the financial key performance indicators demonstrating this in no uncertain terms. This is our current reality even without these caps on payment. LD 2196 pushes these communities closer to losing local

access to emergency care, maternal care, and chronic disease management. As pharmacists serving rural and underserved populations, we know these communities cannot absorb another blow.

In closing, LD 2196 does not address the root causes of healthcare costs. Instead, it destabilizes a fragile system and directly harms patient safety. Maine's pharmacists urge you: Do not pass a bill that will lead to hospital closures, job losses, and reduced access to care.

For the safety of our patients and the future of healthcare in Maine, I respectfully ask that you vote Ought Not to Pass on LD 2196.

Thank you for your time and for your commitment to Maine patients and we would be happy to partner on practical solutions to lowering cost rather than attacking our healthcare infrastructure that is barely hanging on.

Most Sincerely,

A handwritten signature in cursive script, appearing to read "Amelia Arnold".

Amelia Arnold, PharmD, MBA