



Maine Equal Justice

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Testimony in Support of LD 2175, *An Act to Improve Access to Affordable Prescription Drugs in Underserved Areas*

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Good afternoon, Senator Bailey, Representative Perry, and honorable members of the Committee on Health Coverage, Insurance and Financial Services. My name is Alex Carter, I use she/her pronouns, and I am a Policy Advocate at Maine Equal Justice, a nonprofit legal aid provider working to increase economic security, opportunity, and equity for people in Maine. I offer testimony in support of LD 2175, *An Act to Improve Access to Affordable Prescription Drugs in Underserved Areas*, on behalf of the people with low income we represent who will benefit.

One of the ways Maine Equal Justice carries out our mission is by advocating for greater access to affordable, comprehensive health care for all Mainers with low income. Our state's federally qualified health centers (FQHCs), or community health centers (CHCs) are vital partners in achieving this goal, often serving as the only point of access to primary care in a community and providing care regardless of health insurance, immigration status, or a patient's ability to pay.

In our legal services and community outreach work, we frequently hear concerns about medical debt and the lack of access to affordable prescription drugs. In a 2021 survey of adults in Maine conducted by Consumers for Affordable Health Care, over half of survey respondents reported being "somewhat worried" or "very worried" about affording the cost of prescription drugs and nearly one-third had skipped or rationed their medication.¹ By now you are familiar with the stories of people with low or fixed incomes cutting their pills in half or going without their prescriptions to pay for other necessities like housing and food. This is further exacerbated in rural areas where lack of transportation and a diminishing number of retail pharmacies pose additional barriers to access. FQHCs are well positioned to help fill this gap and provide low-cost drugs to the communities they serve. However, they need additional funds to create or expand upon their existing pharmacy services and to reinvest in their patients' health.

LD 2175 would establish a grant program, administered by the Office of Affordable Health Care, that each FQHC could apply for by submitting a plan for how they would improve their pharmacy services and access to affordably priced prescription drugs through the 340B program. Available grant funds will be awarded based on feasibility, cost-effectiveness, and equity and in

¹ <https://www.healthcarevaluehub.org/advocate-resources/publications/maine-residents-worried-about-high-drug-costs-support-range-government-solutions>

consultation with the statewide association of federally qualified health centers. This would enable safety net clinics to provide pharmacy services in communities where they're currently lacking or to expand pharmacy hours, availability of automated systems, and to hire much needed pharmacy staff, both creating jobs and filling a critical need in underserved areas.

We encourage you to vote ought to pass on LD 2175 to address the shortage of pharmacy services and to provide more equitable and affordable access to life-saving medications for marginalized populations. Thank you for your time and I'm happy to answer any questions.