



**Maine Medical  
Association**



**TESTIMONY OF THE MAINE MEDICAL ASSOCIATION  
AND  
THE MAINE OSTEOPATHIC ASSOCIATION**

**In Support Of**

**LD 163 An Act To Require Health Insurance Coverage For Federally Approved  
Nonprescription Oral Hormonal Contraceptives And Nonprescription Emergency  
Contraceptives**

Joint Standing Committee on Health Coverage, Insurance and Financial Services  
Room 220, Cross Building, Augusta, Maine  
Wednesday, February 5, 2025

Good Morning, Senator Bailey, Representative Mathieson, and Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services. My name is Austin Vaughan, and I am a medical student at the University of New England College of Osteopathic Medicine. I am submitting this testimony in support of LD 163, An Act To Require Health Insurance Coverage For Federally Approved Nonprescription Oral Hormonal Contraceptives And Nonprescription Emergency Contraceptives, on behalf of the Maine Medical Association and the Maine Osteopathic Association.

The Maine Medical Association (MMA) is a professional organization representing more than 4,000 physicians, residents, and medical students in Maine. MMA's mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine people. The Maine Osteopathic Association (MOA) is a professional organization representing more than 1,200 osteopathic physicians, residents, and medical students in Maine whose mission is to serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy, and member services in order to ensure the availability of quality osteopathic health care to the people of this State.

This year, MMA and MOA's legislative committees have joined to advocate from one voice. As we did last Session, we have determined that it is important to testify in support of LD 163 (previously LD 2203) and would like to re-emphasize our support for this bill for several reasons.

First, our patients deserve the right to choose what happens to their bodies and to have access to birth control that feels appropriate to them and their circumstances. One method

might not be the right fit for every person, so this bill gives people a choice over their own medical choices.

MMA and MOA are supportive of any measure that ensures increased access to birth control as our country grapples with ongoing attacks on reproductive autonomy, including access to abortions. Our patients need to know they have options in this uncertain world, and this bill would provide that.

Second, preventing unwanted pregnancies, lowering teen pregnancy rates, and decreasing sexually transmitted infections (STI) have long been goals of the MMA and MOA and its clinicians. We are beyond an abstinence-only education because it has been shown in study after study not to be effective.<sup>1</sup> Having ample options on how to have safe sex serves to empower all people to make informed decisions about their bodies.

Finally, we live in a state where, unfortunately, timely and accessible healthcare is at a premium for large portions of the population. According to a 2016 study, there are over 60 unique Health Professional Shortage Areas (HPSAs) in Maine, which are defined as areas with over 3500 residents per ONE primary care provider.<sup>2</sup> Passing this bill would ensure that anyone who has difficulty making an appointment with a provider can still receive appropriate access to reproductive healthcare. Additionally, it would ease some of the patient burden on these rural providers.

Thank you for considering the thoughts of Maine's physicians and public health community about LD 163. We urge you to support this bill. I would be happy to respond to any questions you may have.

Best,  
Austin Vaughan

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<sup>1</sup> See "Abstinence-only-until-marriage policies and programs: An updated position paper of the Society for Adolescent Health and medicine." *Journal of Adolescent Health*, vol. 61, no. 3, 2017, pp. 400-403, <https://doi.org/10.1016/j.jadohealth.2017.06.001>.

<sup>2</sup> See "Federally Designated Medically Underserved Populations and Areas." <https://www.maine.gov/dhhs/mecdc/public-health-systems/rhpc/documents/mua-mup-a.pdf>