

Contact: Ed Molleo, Communications Director

Tele: (207)660 - 9913

PR@HealthReach.org

DATE: April 2025

HealthReach supports LD 1018.

This critical safety-net funding enables local, affordable healthcare across rural Maine, and it does *not* increase Maine's tax burden.

Members of the Joint Standing Committee on Health Coverage, Insurance, & Financial Services — my name is Jim Higgins, and I am a resident of Oquossoc. I am here to unequivocally support LD 1018 so that all of us working together can save lives in rural Maine.

I am a volunteer at HealthReach Community Health Centers, chair of the Board of Directors, and a patient of HealthReach. I volunteer for other nonprofits: Rangeley Health & Wellness, Rangeley Friends of the Arts, and as a new Community Health Center Ambassador with the Maine Primary Care Association.

At HealthReach, we provide healthcare services in 12 sites in rural Central and Western Maine. The 340B program was established to allow safety-net providers such as HealthReach and our peer health organizations' patients to purchase drugs at federally approved discounted prices, and for us to receive and reinvest patients' savings in our healthcare delivery to impoverished areas.

The Big Pharma commercials and attacks on this bill are brutal and false. They depict Maine healthcare organizations as the villain, raising the costs of healthcare for Mainers. Nothing could be so false. 340B doesn't increase costs — just the opposite, it lowers costs. We use the 340B savings to reach Mainers who can't afford to see a doctor or a dentist.

340B funding supports:

- Free dental care for those who can't afford it
- Free vaccines and discounted drugs
- Behavioral care and support
- Outreach to our senior citizens
- Substance Use Disorder treatment
- ... and many other life-saving programs!

We don't profit from 340B — we save lives!

Big Pharma wants to eliminate 340B in Maine to increase its profits. Eliminating 340B will negatively impact all of us in this room. Healthcare providers are being squeezed with lower reimbursement from Medicare and MaineCare. About 70% of our net patient revenue is from Medicare/MaineCare reimbursements — those rates come to approximately 45% of our cost to provide related services.

If the State of Maine loses 340B revenue, many community health centers will be pushed over a cliff, and already-scarce rural healthcare delivery will close its doors. The unintended consequences will create additional increases in healthcare disparities. America is already plagued with an increase in heart disease, obesity, hypertension, behavioral, and substance use issues.

Rural Maine may very well lose population and businesses as residents are forced to leave to access healthcare.

In closing, I will share that I have incurable cancer, Chronic Lymphocytic Leukemia. I am very lucky that it is in a moderate and non-aggressive stage. I support LD 1018 because I value and cherish the local care that I receive from HealthReach Community Health Centers. If we lost our Rangeley clinic — which is so dependent on 340B revenue — we would be forced to leave Western Maine and family to be closer to medical practices which may or may not have capacity to take on more patients.

I urge you to pass LD 1018 and continue the good fight to encourage more healthcare providers to come to our wonderful state of Maine to serve all Mainers. Thank you,

Jim Higgins

Chair, Board of Directors

HealthReach Community Health Centers