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Testimony of Representative Ambureen Rana introducing LD 1688, An Act to Encourage Continuing Education Relating to Certain Infection-associated Chronic Conditions for Physicians and Nurses

Before the Joint Standing Committee on Health Coverage, Insurance and Financial Services

Good afternoon, Senator Bailey, Representative Mathieson and distinguished members of the Committee on Health Coverage, Insurance and Financial Services. My name is Ambureen Rana, and I represent House District 21 in Bangor. I'm grateful for the opportunity to introduce LD 1688, An Act to Encourage Continuing Education Relating to Certain Infection-associated Chronic Conditions for Physicians and Nurses.

This bill requires the Maine Board of Complementary Health Care Providers, Maine Board of Licensure in Medicine, Maine Board of Nursing, Maine Board of Osteopathic Licensure to encourage licensees and applicants for relicensure to attend continuing education courses regarding infection-associated chronic conditions (IACCs). IACCs are long-term chronic health conditions triggered by infections impacting approximately 31 million Americans. These conditions can impact several organs, and patients may need multiple specialists, thus requiring extensive care coordination. The list of IACCs includes long COVID,¹ chronic Lyme disease, myalgic encephalomyelitis, postural orthostatic tachycardia syndrome and dysautonomia – to name a few.

Under current Maine statute, physicians, physician assistants and nurses must renew their medical licenses every two years. One of the requirements of renewal is the satisfactory completion of 100 hours of educational programming in the preceding two years.

IACCs present unique challenges for medical professionals to diagnose and effectively treat their patients. Therefore, additional education is beneficial to both medical providers and patient outcomes. With increased knowledge, medical providers can play a key role in early detection and, in turn, patients can benefit from improved quality of life, health outcomes and fewer negative impacts such as interruptions in education, job loss and strains on family caregivers.

¹ https://nap.nationalacademies.org/read/27768/chapter/1#iv

With many IACCs, we know that there is still much to learn. The chronic condition that is perhaps most top-of-mind is long COVID, which we are still collecting information about and examining. For example, according to the American Society for Microbiology, questions about whether or not permanent tissue damage resulting from COVID-19 may be contributing to disease progression of long COVID remain unanswered. However, right now, we do know that some long COVID patients have experienced extensive organ damage (lung, heart and cardiovascular tissue) and that the inability to fully repair these tissues may contribute to continued chronic disabilities.

I stand before you as someone with invisible disabilities including chronic pain and chronic fatigue that create challenges every day. I am not alone. This afternoon, you'll hear from our colleagues and community members that are navigating similar challenges.

Infection-associated chronic conditions share common characteristics in that they are chronic, fluid, debilitating and often poorly understood by the medical community. Patients with IACCs frequently suffer from symptoms like chronic fatigue, cognitive impairment, post-exertional malaise, pain and immune system dysfunction. These symptoms can severely affect their quality of life.

Our medical providers would benefit greatly from continuing their education to better identify and treat IACCs. These chronic conditions are not going away anytime soon, and we need to make sure our workforce is capable of providing the quality care and assistance our patients need and deserve.

Maine's stressed healthcare system would benefit from accurate, earlier diagnoses rather than patients – like myself – seeing multiple providers, incurring additional personal costs and adding to lengthy waitlists. I urge you to vote in support of LD 1688.

In 2022, Senator King and Congresswoman Pingree co-sponsored the CARE for Long Covid Act which would fund the training of providers and research on long COVID. By 2023, Senator King was the lead co-sponsor who introduced the bill.² Senator King also took action urging the Health, Education, Labor and Pensions Committee to fund education on long COVID.³ These bills lack adequate support at the federal level. It is apparent that our state must pursue legislation.

According to Dr. Cliff Rosen of MaineHealth, "Patients with long Covid and other infection associated chronic conditions are subject to stigmatization because of perceived simulation or psychosomatization of symptoms. Educational programs for patients and clinicians are lacking across the country preventing our people from receiving the support and care they need. Maine has a chance to change that with LD 1688 and recommend education on infection associated chronic conditions like long covid and chronic lyme. The need for this is urgent and overdue."

Thank you for your time and consideration. I am happy to answer any questions.

² <u>https://www.king.senate.gov/newsroom/press-releases/king-introduces-bipartisan-bicameral-bill-to-boost-long-covid-research-treatment-efforts</u> ³ <u>https://www.kaine.senate.gov/imo/media/doc/527.22longcovidletter.pdf</u>

Amend the bill by striking out the title and substituting the following:

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'Resolve, Encouraging Continuing Education Related to Certain Infection-associated Chronic Conditions for Physicians and Nurses

Amend the bill by striking out everything after the title and before the summary and inserting the following:

Sec. 1 Resolved: The Maine Board of Complementary Health Care Providers, Maine Board of Licensure in Medicine, Maine Board of Nursing, Maine Board of Osteopathic Licensure, and of will seek ways to encourage clinicians to attend continuing education relating to infection-associated chronic conditions, including long COVID, chronic Lyme disease, myalgic encephalomyelitis, postural orthostatic tachycardia syndrome and dysautonomia. For purposes of this Resolve, "long 9 COVID" means a group of health problems related to and persisting or developing after an initial period of COVID-19 infection that may be debilitating and may last from several weeks to a period of years and "COVID-19" has the same meaning as in Title 24-A, section 12 4320-P, subsection 1, paragraph A.

SUMMARY

This Resolve requires the Board of Osteopathic Licensure, the Board of Licensure in Medicine and the State Board of Nursing to encourage licensees and applicants for relicensure to attend continuing education relating to infection-associated chronic conditions, including long COVID, chronic Lyme disease, myalgic encephalomyelitis, postural orthostatic tachycardia syndrome and dysautonomia.