

**Cayford, Edna**

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**From:** Steve Blessington <scbless64@gmail.com>  
**Sent:** Monday, February 2, 2026 8:39 AM  
**To:** Cmte HCIFS  
**Subject:** LD 2088

**This message originates from outside the Maine Legislature.**

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February 2, 2026

Committee on Health Coverage, Insurance and Financial Services  
Maine State Legislature  
Augusta, ME

Dear Committee Members

I am a practicing physician associate (PA) in internal medicine with MaineHealth and a faculty member in the Physician Assistant program at the University of New England. I have cared for patients in Maine for nearly 30 years and am actively involved in training the next generation of PAs, giving me both frontline clinical experience and an educator's perspective on workforce needs across our state.

As a constituent I am writing in support of LD 2088, a bill before the Committee on Health Coverage, Insurance and Financial Services. LD 2088 would improve access to care across Maine by removing an unnecessary barrier to physician associate (PA) practice. It would also make Maine eligible for additional federal funding through the Rural Health Transformation Program (RHTP).

PAs are highly trained medical professionals who provide care in nearly every specialty and practice setting. PAs diagnose and treat illnesses, order and interpret tests, prescribe medications, and perform medical procedures. PA education includes a master's degree and more than 2,000 hours of clinical practice rotations, focusing on high-quality, patient-centered care.

However, under current Maine law, PAs who serve as the principal clinical provider in non-physician led settings must have a practice agreement with a physician. This legal requirement has become a significant barrier to care. Because of ongoing physician shortages, especially in rural and underserved areas, many qualified PAs are unable to practice simply because they cannot find a physician to sign their practice agreement. As a result, patients face longer wait times, travel farther for care, or go without care altogether.

LD 2088 addresses this problem by removing the requirement for a practice agreement for experienced PAs. This change will make it easier for PAs to provide care in rural and underserved areas where a physician may

not be physically present. The bill also creates parity between physician associates and nurse practitioners by giving PAs the same practice authority currently afforded to their NP colleagues. Importantly, LD 2088 does not expand PA scope of practice or establish independent practice. PAs will continue to collaborate, consult, and refer patients as needed, consistent with our team-based model of care.

This legislation would also make Maine eligible for additional funding through the Rural Health Transformation Program (RHTP). This is a federal investment designed to strengthen the rural health workforce, expand access to care, and modernize service delivery models. The program incentivizes states to modernize PA practice laws so PAs can work at the top of their license. By passing LD 2088, Maine would be recognized as an optimal state for PA practice. This ranking makes Maine eligible for additional federal funding, which can be used to support primary care services and improve access to healthcare across the state.

Thank you for your time and consideration. I urge you to support LD 2088 so Maine can fully utilize its PA workforce and improve access to care for patients across our state.

Sincerely,

A black and white image of a handwritten signature, likely of Steven C. Blessington, written in ink on a dark background.

Steven C. Blessington, PA-C, MHP  
Internal Medicine, MaineHealth  
Faculty, University of New England PA Program

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Steven C. Blessington PA-C, MHP, EMT-P