

Senator Bailey, Representative Mathieson, and members of the Health Coverage, Insurance and Financial Services Committee, my name is Rachel Matson. I am a resident of Exeter, Maine, and I practice primary care. Today, I am testifying in strong support of LD 2088 “An Act to Increase Access to Primary Care Provided by Physician Associates.”

I strongly support advancing independent practice for Physician Associates (PAs) in Maine. This issue is not theoretical to me—it is personal, practical, and directly impacts my ability to provide care to patients in our state.

As a Doctor of Nursing Practice and owner of a primary care practice in Maine, I am actively trying to hire a PA to meet growing patient demand. Like many practices, especially those serving rural and semi-rural communities, we are facing workforce shortages, long wait times, and increasing barriers to access. One of the most significant obstacles I have encountered is the cost of mandatory physician oversight, which in my current hiring scenario would exceed \$800 per month. This cost is prohibitive—not because PAs lack competence or safety, but because the requirement itself creates an unnecessary financial and administrative burden.

This oversight model is a barrier to care. It limits the ability of PAs to practice to the highest level of their education, training, and experience, and it restricts practices from expanding access at a time when Maine desperately needs more clinicians, not fewer. These costs do not improve patient outcomes; they simply divert limited healthcare dollars away from direct patient care.

Maine has already demonstrated that independent practice works. Nurse Practitioners have practiced independently in this state for 30 years, with a strong track record of safety, quality, and patient satisfaction. There is no evidence that continued supervisory mandates improve care, yet there is ample evidence that they restrict access—particularly in rural communities where physician availability is limited.

PAs are highly trained, skilled clinicians who are essential to Maine’s healthcare workforce. Allowing them to practice independently would reduce barriers, support team-based care, and enable practices like mine to grow sustainably while meeting the needs of our communities. Independent practice is not about removing collaboration—it is about removing unnecessary regulation that no longer reflects modern healthcare delivery.

Maine must continue to lead by removing outdated barriers to care. Supporting independent practice for Physician Associates is a logical, evidence-based, and patient-centered step forward. Our communities deserve timely access to care, and our clinicians deserve the opportunity to practice to the full extent of their training.

Thank you for your consideration and for your commitment to improving healthcare access in Maine.

Respectfully,

Rachel Koransky-Matson, DNP, APRN, FNP-C, BC-ADM, CNE®

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