

**Senator Bailey, Representative Mathieson, and members of the Health Coverage, Insurance and Financial Services Committee,**

My name is Angela Coton. I am an Augusta resident, an Augusta business owner, and a physician associate who has practiced medicine for over 16 years. I was also the first PA in Maine to open an independent medical practice under LD1660 in 2020. I am here today in strong support of LD 2088, *“An Act to Increase Access to Primary Care Provided by Physician Associates.”*

I began practicing medicine in 2010 and have worked in otolaryngology, facial plastics, dermatology, and aesthetic medicine across Maine, Massachusetts, and North Carolina. In 2018, I was recruited to Maine by MaineGeneral to practice ENT. My husband is from Maine, and we chose to make our life here because we believe in this state and its communities.

After years in hospital medicine, I wanted to serve patients in a more accessible, community-based way. What I encountered instead were barriers that had nothing to do with patient safety or my ability to practice medicine. Even after LD 1660 passed, I was still required to secure a collaborating physician—someone with no legal responsibility for my decisions, yet whose signature determined whether I could care for patients.

I spent weeks making phone calls. Many physicians told me I had more expertise than they did in my specialty. Others declined because they saw me as competition. It was discouraging, and at times, it felt like the system was protecting paperwork instead of patients. Eventually, my primary care physician agreed to collaborate with me, allowing me to open my practice in Augusta.

Since 2020, my practice has served 1800 Maine patients. While we do offer aesthetic services, a significant portion of my work is medically necessary care—skin cancer biopsies, chronic dermatologic disease management, and ENT conditions like ear infections and sudden hearing loss. These are not elective concerns. They are problems that worsen when patients are forced to wait.

Recently, I diagnosed melanoma in a 26-year-old patient. She came to me because she couldn't get in to see a dermatologist because she did not have a primary care provider to refer her. I partnered with a dermatopathology practice 5 years ago and am able to offer this necessary service for \$100 cash pay to patients. Had she waited another year, her outcome could have been devastating. Once cancer is identified, I immediately refer to local surgeons. Collaboration does not disappear when unnecessary barriers are removed—it happens every day in real practice.

More and more patients ask me to be their primary care provider because they simply cannot find one. These are not people looking for convenience. They are people looking for care.

Maine's primary care shortage is not theoretical—it is happening every day in our communities. Physician associates are trained, experienced, and already practicing medicine collaboratively. What limits us is not competence, but regulation.

I respectfully urge you to support LD 2088—for increased access to qualified medical providers, and most importantly, for the patients who cannot afford to wait. Thank you for your time and consideration.

Sincerely,

Angela J Coton, PA-C

CEO of Soothe Medical