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March 2, 2021

Hon. Heather Sanborn, Senate Chair Hon. Denise Tepler, House Chair Joint Standing Committee on Health Coverage, Insurance and Financial Services 100 State House Station Augusta, Maine 04333

Re: Proposed Amended Version of L.D. 1 - An Act to Establish the COVID-19 Patient Bill of Rights

Dear Senator Sanborn and Rep. Tepler:

I write on behalf of Spectrum Healthcare Partners in qualified support of the proposed amended version of L.D. 1, An Act to Establish the COVID-19 Patient Bill of Rights. Spectrum Healthcare is Maine's largest multi-specialty physician practice group which practices throughout most of the State of Maine.

Spectrum supports the overall *o*bjectives of the legislation. The qualification to its support, however, is with respect to Part B which proposes the following provision stating that prescribers:

may prescribe to a patient a supply of a prescription drug for an extended period of time, not to exceed a 180-day supply, during a state of emergency declared by the Governor in accordance with Title 37-B, section 742, except for a drug prescribed in accordance with section 18308 and except for instances where such extended prescriptions would be inconsistent with public safety or contrary to the applicable standard of care.

Proposed Amendment to L.D. 1, Part B, Sections B-1, et seq.

While we believe the intent behind this language is to ensure access to medications in the event of a state of emergency, and that the language in the amendment is an improvement upon that of the original bill, we are nevertheless concerned that the language remains ambiguous and may actually have the opposite of the intended effect in certain circumstances: namely, those in which medication is ordinarily prescribed for 180 days or more for clinical reasons. For example, physicians prescribing medications for chronic use to compliant patients known to tolerate them will commonly prescribe a year of the medication and see the patient back in a year. The prescriptions sometimes are written for 90 days with refills, sometimes for 182 days with a refill, sometimes for a year without refills. There are

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cost and convenience benefits to patients associated with this prescribing practice. Thus, we respectfully suggest that the language be clarified to apply to those prescriptions that would otherwise be prescribed for less than 180 days.

We also wish to take this opportunity to express our support for the provisions in Part C of the (amended) bill which pertain to telehealth. We agree that the definition of telehealth should be broadened to include the use of audio alone in those instances in which the use of a video component is not feasible. We also support the payment parity provisions in Part C. We note, in that regard, that telehealth services typically require as much, or more, of a provider's time and staff resources as are expended in an in-person visit.

We appreciate your time and consideration of these comments.

Sincerely,

Ann R. Robinson

Cc: Senator Stacy Brenner

any R. Robinson

Senator Trey Stewart

Representative Poppy Arford

Representative Mark Blier Representative Heidi Brooks

Representative Jon Connor

Representative Richard Evans

Representative Kristi Mathieson

Representative Gina Melaragno

Representative Joshua Morris

Representative Tracy Quint