

State of Maine 130th Legislature

Joint Standing Committee on Health Coverage, Insurance and Financial Services
Testimony of Marge L. Kilkelly, MS, CED, on behalf of Maine Primary Care Association
April 8, 2021

Supporting:

LD 1115, "An Act To Improve Access to HIV Prevention Medications"

Sponsored by Senator Sanborn

Senator Sanborn, Representative Tepler, and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services, I am Marge Kilkelly, Policy Program Manager at Maine Primary Care Association (MPCA). MPCA is a membership organization that includes all of Maine's 20 Community Health Centers (CHCs).

Maine's CHCs provide comprehensive medical, behavioral, and dental care for approximately 1 in 6 Maine people. Community Health Centers make up the largest primary care network in the state, and they provide high quality, wide-ranging health care services. They are at the forefront of delivering care to rural and underserved Maine communities, and serve patients regardless of their health insurance status or ability to pay.

Maine Primary Care Association supports LD 1115 and thanks Senator Sanborn and the other sponsors for bringing this legislation forward. If adopted, this legislation would provide MaineCare members and insured persons critical access to medically necessary pre and post-exposure HIV prevention drugs in accordance with CDC guidelines.

Prevention is the best medicine. Preventing disease and/or slowing disease progression is a basic tenet of quality primary care. The benefits to the patient and family of avoiding a debilitating or even fatal disease are obvious, but the benefit to the economy and the cost of health care is sometimes understated.

According to CDC Program Guidance on HIV Cost- effectiveness¹ "The lifetime treatment cost of an HIV infection can be used as a conservative threshold value for the cost of averting one infection. Currently, the lifetime treatment cost of an HIV infection is estimated at \$379,668 (in 2010 dollars), therefore a prevention intervention is deemed cost-saving if its CE ratio is less than \$379,668 per infection averted."

On behalf of the patients, staff, and volunteers at Maine's Community Health Centers, we urge passage of LD 1115.

Thank you for considering our comments, and please do not hesitate to contact me directly at mkilkelly@mepca.org with any follow up questions.

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¹https://www.cdc.gov/hiv/programresources/guidance/costeffectiveness/index.html#:~:text=Currently%2C%20th e%20lifetime%20treatment%20cost,than%20%24379%2C668%20per%20infection%20averted