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Testimony of the Maine Osteopathic Association
Before the Committee on Health Coverage, Insurance and Financial Services

In Reference to:

LD 1115, An Act To Improve Access to HIV Prevention Medications
Public Hearing: Thursday, April 15, 2021 10:00 AM, Cross Building, Room 220

Senator Sanborn, Representative Tepler, and distinguished members of the Committee on Health Coverage, Insurance and Financial Services,

My name is Brian Kaufman, DO FACP FASAM. I hold board certification in: Internal medicine, pain medicine, Neuro-musculoskeletal medicine and addiction medicine. I currently practice pain management and addiction medicine in New Hampshire, but reside in Kennebunk and practiced in Maine for 13 years. On behalf of my physician colleagues, I am pleased to provide testimony in support of LD 1115, An Act To Improve Access to HIV Prevention Medications.

The Maine Osteopathic Association (MOA) is a professional organization representing approximately 400 osteopathic physicians as well as more than 700 residents and students. Our mission is to “serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy and member services in order to ensure the availability of quality osteopathic health care to the people of this State.”

This bill attempts to improve access to HIV prevention drugs by ensuring that they are covered by MaineCare and other insurers when medically necessary as well as authorizes a pharmacist to dispense HIV prevention drugs under certain conditions.

HIV is a serious disease that is estimated to affect 38 million people worldwide and 1.2 million in the US. There were 37,968 new cases in 2018 and it is estimated that 1600 are in Maine. The lifetime cost of HIV based on 2010 numbers is \$379,668.00 / person. However, the personal cost cannot be calculated in terms of pain, suffering, stigmatization and the effect on an individual's life and to those around them.

Improving access to both pre-exposure prophylaxis (PREP) and postexposure prophylaxis with the availability of short-term pharmacy deployed meds, is a step in the direction of better public health access and has the potential to decrease conversion and incidence of HIV infections. For these reasons, we support this bill.

We appreciate the critical screening, testing, counseling and PCP notification steps included in the bill, but recognize that HIV infections and related treatment are not always simple or straightforward. Therefore, we would recommend that a pharmacist has a collaborative working relationship with a physician should they need guidance in this critical care. We also believe this could assist in the event that a patient does not have their own PCP or treating physician. The bottom line is that steps should be taken to facilitate a good working relationship between the pharmacist and the PCP (in the interest of the patient’s ongoing quality of care), while proving the best quality care for the individual needing rapid treatment for potential exposures.

Please do not hesitate to contact us at info@mainedo.org if you have any questions. Thank you.