

Testimony for "An Act Regarding Targets for Health Plan Investments in
Primary Care and Behavioral Health" 4/15/21

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I am speaking in favor of the bill, representing myself only and not any organization or employer.

I am a physician board certified in both Family Medicine and Addiction Medicine and have spent much of my career focusing on inpatient hospital care. For the past 12 years, I have worked the evening shift at one of the state's larger hospitals. I have also worked at three different critical access hospitals in Maine's rural areas. When the people of Maine have not had the benefits of comprehensive, continuous primary care, it becomes painfully obvious in times of crisis. One of my mottos is, "Every sick patient in the hospital needs a good family doctor." Whether I am assisting in delivering a baby in the Emergency Department, performing a gynecological exam on a critically ill patient in the ICU or having a difficult end of life conversation with family members at 3 am, I have the skills to address things in times of crisis that frequently should have been addressed as an outpatient.

According to the report, "Investing in Primary Care," by the Patient Centered Primary Care Collaborative (<https://www.pcpcc.org/resource/investing-primary-care-state-level-analysis>), increased primary care spend is associated with fewer emergency department visits and total number of hospitalizations. Hospital care accounts for 38% of total healthcare spending.

When working in the hospital, I see that small percentage of patients with chronic disease who get admitted repeatedly. Like an elderly woman with heart failure who stops taking her medicines when she starts feeling lonely and anxious. Like the patient who had a heart attack and is so worried he might die every time he has a twinge in his chest that he comes to the hospital ten times in six months. Like the person who has not seen a doctor in 10 years and comes in with a stroke, only to be truly surprised to hear he has high blood pressure, diabetes and high cholesterol.

Requiring that a larger portion of healthcare dollars in Maine be spent to deliver primary care will move us closer to the 'quadruple aim:' providing better patient care, at lower cost, with increased satisfaction for patients and families and a happier, more stable workforce.
(<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4226781/>)

I look forward to the day when our hospital census does not increase year upon year because every patient in Maine has a primary care medical home that is equipped to treat the body and the mind, address chronic disease and addiction, and support patients' capacity for self-management toward healthy lifestyles. Thank you for considering a vote in favor of this bill.