

"An Act Regarding Targets for Health Plan Investments in Primary Care and Behavioral Health"

Thursday April 15 at 10am.

Presented to: The Health Coverage, Insurance and Financial Services Committee will hold the hearing.

Testimony in Favor For, by Dr. Isabella Taylor

Thank you Chairwoman Sanborn and other members of the Committee for hearing this today. I am a primary care doctor. I am the first physician a patient sees for any and all of their concerns, and often the center point for their specialists. I try to be their behavioral health confidant, but often need the services of other mental health team members in able to provide the best services possible. In a system dictated by insurance companies, this can and is one of the hardest parts of my jobs.

I have far too many patients who are in dire need of both mood stabilizers AND counseling. We know from evidence based medicine this is far superior than any one treatment alone. But there are not enough therapists, psychologists and social workers out there because insurance companies do not accurately value them. These providers have their own families to support and would love to help our patients, but I understand why they can't financially make that sacrifice. By implementing this bill and forcing companies to invest in our front line system we help everyone involved and take less burden off the Emergency Rooms, Police Force and ultimately save lives.

I won't dwell too much on what everyone knows – investment in preventative care decreases spending across the board. I will share a story of a patient; I'll call him John. John hadn't gone to a doctor in decades and finally decided it was time. Turns out he has severely uncontrolled diabetes to the point where I would normally start insulin right away. But John is smart, he knows lifestyle changes are instrumental. He saw our diabetes educator because let's face it, I don't have an hour to spend with every patient going over portion sizes, carb counting and grams of sugar. John is also stressed about life. Covid has secluded him and with a significant history of domestic abuse, he really needs someone to help process his feelings. No counselor accepts his insurance – they don't reimburse them enough. I'm happy to say the diabetic educator helped him lose 10 pounds and get his overall blood sugars to decrease. But just as he was making progress, our clinic had to let the educator go due to cost. I'll keep working with John as much as I can, but it is not enough.

My hope is this bill helps get back to what real medicine and Mainers need – focus and investment in primary and behavioral health so we can thrive as individuals and as a community. Thank you.