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## **Testimony in support of LD 2175: An Act to Improve Access to Affordable Prescription Drugs in Underserved Areas**

Greetings Senator Bailey, Representative Perry and Members of the Committee on Health Coverage, Insurance and Financial Services. My name is Winnifred Joseph, I am a Communications and Advocacy intern with AARP Maine and a graduate student studying Global Policy at the University of Maine.

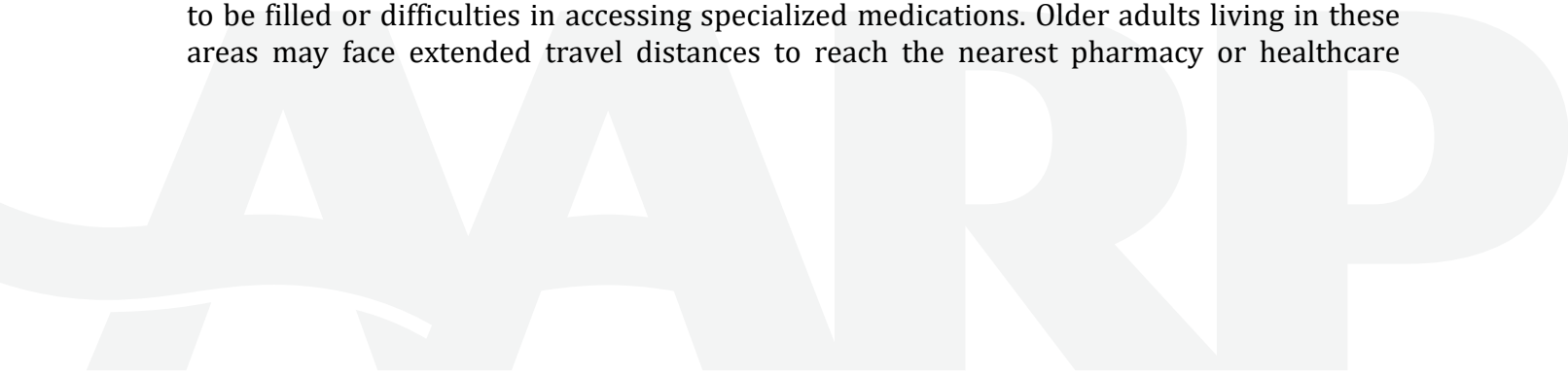
AARP is the nation's largest nonprofit, nonpartisan organization dedicated to empowering Americans 50 and older to choose how they live as they age. On behalf of our nearly 200,000 members statewide, thank you for the opportunity to share testimony. Today, I am testifying in favor of LD 2175.

This bill aims to improve access to affordable prescription drugs in underserved Areas. Access to affordable prescription drugs is a critical issue for older adults. For too long, many individuals and families have struggled to afford the medications they need to maintain their health and well-being.

Approximately 20% of the state's population comprises individuals aged 65 and older. Within this demographic, an overwhelming nine out of ten adults report currently taking prescription medication. Given that one-fifth of the state's population falls into the 65 and older age group, ensuring access to prescription drugs in underserved areas becomes paramount. Mainers over the age of 65, particularly those residing in our rural communities, confront a myriad of obstacles in accessing prescription drugs critical to their health and well-being.

One significant barrier is poverty, which disproportionately affects older adults in rural communities. As a result, many older adults are forced to forgo or ration their medications, compromising their health outcomes and exacerbating existing health conditions.

Furthermore, the rural nature of many underserved areas in Maine poses significant challenges to access healthcare and medical services. Limited availability of pharmacies and healthcare providers in rural communities can result in longer wait times for prescriptions to be filled or difficulties in accessing specialized medications. Older adults living in these areas may face extended travel distances to reach the nearest pharmacy or healthcare



facility, further impeding their ability to obtain necessary medications in a timely manner. There is an urgent need for policies and interventions aimed at improving pharmacy accessibility, reducing travel barriers, and addressing affordability issues to ensure equitable access to prescription drugs for all Mainers, particularly older adults in underserved areas, which is where LD 2175 comes in.

LD 2175 would establish a grant program, overseen by the Office of Affordable Health Care, to provide support for FQHCs to develop or expand their capacity to provide greater access to affordably priced drugs for their patients by increasing FQHCs ability to deliver pharmacy services to those patients. The grants will support access to pharmacy services and affordably priced prescription drugs. This is a critical step towards addressing the healthcare needs of residents in rural and underserved communities. This funding will enable federally qualified health centers to develop or improve pharmacy services, including the operation of licensed retail pharmacies, expanding access to prescription drugs, and addressing workforce issues related to pharmacy program planning and operation.

LD 2175 is imperative to address healthcare disparities and improve access to essential prescription drugs for residents of underserved areas. By investing in the infrastructure, resources, and workforce necessary to support federally qualified health centers, we can take significant strides towards achieving health equity for all individuals in our communities. We urge legislators to prioritize the passage of LD 2175 for the well-being of our state. Thank you for the opportunity to testify.

Winnifred Joseph  
AARP Maine