

Maine Legislature – Committee on Health and Human Services LD 17

Comments of Laura Hoch, Senior Manager of Advocacy, National MS Society

Chair Claxton, Chair Meyer, and members of the Committee on Health and Human Services, thank you for the opportunity to submit comments on LD 17 and how it might impact people living with multiple sclerosis (MS).

MS is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Symptoms vary from person to person and range from numbness and tingling to walking difficulties, fatigue, dizziness, pain, depression, blindness, and paralysis. The progress, severity, and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS. Nearly 1 million people in the United States and 2.3 million worldwide are currently living with MS.

MaineCare (Medicaid) enrollees tend to have lower incomes than people with private insurance and may not be able to afford or have access to transportation. In a 2012 study published in the Annals of Emergency Medicine, it was found that Medicaid enrollees were 10 times more likely to report that transportation was a barrier to accessing timely primary care than people who were privately insured.¹ CMS conducted a survey in 2014-2015 and determined that lack of transportation was the third-greatest barrier to care for adults with disabilities, with 12.2 percent reporting they were unable to get a ride to a doctor's office.²

If MaineCare enrollees are struggling with transportation to necessary medical appointments, they are also likely struggling with nonmedical transportation. Trips to the grocery store, the pharmacy, or out to anywhere in the community can be just as critical as visits to healthcare providers. We know that being able to remain independent in their homes is important to many

¹ As cited in Rachel Garfield, Robin Rudowitz, and Anthony Damico, "Understanding the Intersection of Medicaid and Work," Kaiser Family Foundation, February 2017, http://kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work/

² As cited in Rachel Garfield, Robin Rudowitz, and Anthony Damico, "Understanding the Intersection of Medicaid and Work," Kaiser Family Foundation, February 2017, http://kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work/.



people living with MS and while remaining in their homes rather than in a congregate care setting is great, we cannot ignore the part that community plays into this. If a person is in their home but cannot leave it, they are not truly independent. Allowing people access to true independent living – which includes the ability to travel within their community – improves quality of life and leads to overall better healthcare outcomes.

The National MS Society supports LD 17 and urges the Committee on Health and Human Services to move this legislation forward, establishing a pilot program that helps Mainers move closer to true health equity.

Should you have any questions or concerns, please feel free to reach out to Laura Hoch at laura.hoch@nmss.org or (860) 913-2550 X52521.