

Office of Affordable Healthcare 2024 Public Hearing

To whom it may concern,

I am a family and preventive medicine physician working in Maine. In addition, I am a researcher with a particular focus on Maternal-Child Health in Northern New England. With this combination of roles, I uniquely can see the impact of finances on healthcare in both the individual patient and large-scale population health level. As a rural primary care physician, I would hope that I can provide my patients the care they require, whenever they require it. Unfortunately, that is often not the case. My patients often have to choose between paying for prescription medications, transportation, housing, food, office visits, or laboratory tests. It is devastating to hear how one patient, on disability and with multiple severe medical conditions, has a total of \$30 a month to spend on transportation and food after accounting for rent, medical bills (including copays and prescription costs), and other required monthly expenses. Of course their priority is not coming in for frequent medical visits and tests, if they would lose that incredibly slim financial margin they rely on to survive.

Living in Maine, the most rural state in the country with spotty public transportation at best, I often hear about the struggle between the costs of maintaining vehicles versus paying for medical care. In one patient, they declined necessary specialty medical care and testing because they needed to repair their car, their only way to get to work with income they were dependent on. Although I stressed the urgency of medical care, they were afraid to lose their vehicle if they spent money and time on tests instead of work and car repairs. After years of delay, the lack of medical care caught up to them, and I found myself discussing end-of-life priorities and advanced care plans, like living wills. While a terrible scenario, the worst part for me is that the condition is completely treatable with outpatient medication, pills and occasional follow-up visits. This did not need to happen, and the prohibitive cost of healthcare prevented this patient from accessing necessary medical care that could save them from suffering.

Above are just two cases that come to mind as I write this testimony. Please address the medical affordability issues in Maine, with a particular focus on decreasing premiums, facility fees, and copays for medications, tests, and all other aspects of healthcare. As a researcher, I can talk for hours on how increasing healthcare costs and minimal to no insurance coverage lead to poorer health outcomes, both in Maine and nationally. With these stories and my experiences in mind, I urge you to take action, work with healthcare professionals and advocates across the state, to lower costs and improve health access for all Mainers.

Thank you for your work, and your time,

Brendan Prast, MD, MPH