State of Maine
131st Legislature
Joint Standing Committee on Appropriations and Financial Affairs

Testimony of Charles F. Dingman on behalf of Maine Primary Care Association

Supporting

Sponsored by Representative Sachs

May 17, 2023

Senator Rotundo, Representative Sachs, and members of the Joint Standing Committee on Appropriations and Financial Affairs, I am Charlie Dingman, a lawyer with the firm of Kozak & Gayer, and I am here today on behalf of the Maine Primary Care Association (MPCA). MPCA is a membership organization that includes all of Maine's 20 Community Health Centers (CHCs), also known as Federally Qualified Health Centers (FQHCs).

Maine's CHCs make up the largest independent primary care network in the state, providing high quality and equitable primary and preventive medical, behavioral, and dental health services for over 200,000 people (1 in 6 Mainers) at more than 70 service delivery sites in all 16 Maine counties. MPCA urges this Committee to include in this budget the cost of implementing LD 199 “An Act to Improve the Health of Maine Residents by Removing Exclusions to the MaineCare Program”. This bill ensures that all Maine residents with low income have access to MaineCare, regardless of immigration status, because all low income members of our communities need and deserve the scope of health care coverage provided by the MaineCare program.

Community Health Centers were born out of the Civil Rights Movement, and it is a part of their identity that they must deliver health care to all medically under-served and disenfranchised populations. Maine’s community health centers are deeply committed to continuing that mission of promoting greater health equity for all people. Today, CHCs in Maine are on the frontlines of providing health care to some of our most vulnerable and neglected populations.

Community Health Centers provide health care without regard to a patient’s insurance status or ability to pay –a mandate that applies only to this category of primary care provider. Without access to MaineCare coverage, however, CHCs cannot provide all of the wraparound services that are necessary for the health of the whole person, nor can low income patients without MaineCare obtain critically needed specialty care even when a CHC identifies a need for that care and makes an appropriate referral.

Moreover, being able to bill for the community health center’s own services is critical for their financial sustainability. Without reimbursement for these visits, which are growing in number as many people awaiting immigration status changes seek care, it is becoming increasingly difficult
for affected health centers to sustain their full range of services and thereby uphold their mandate and commitment to provide high quality and equitable care for their communities.

On behalf of Maine’s Community Health Centers, thank you for considering these comments. I would be pleased to respond to any questions now or via the contact information provided below.

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