



Office of Affordable Health Care

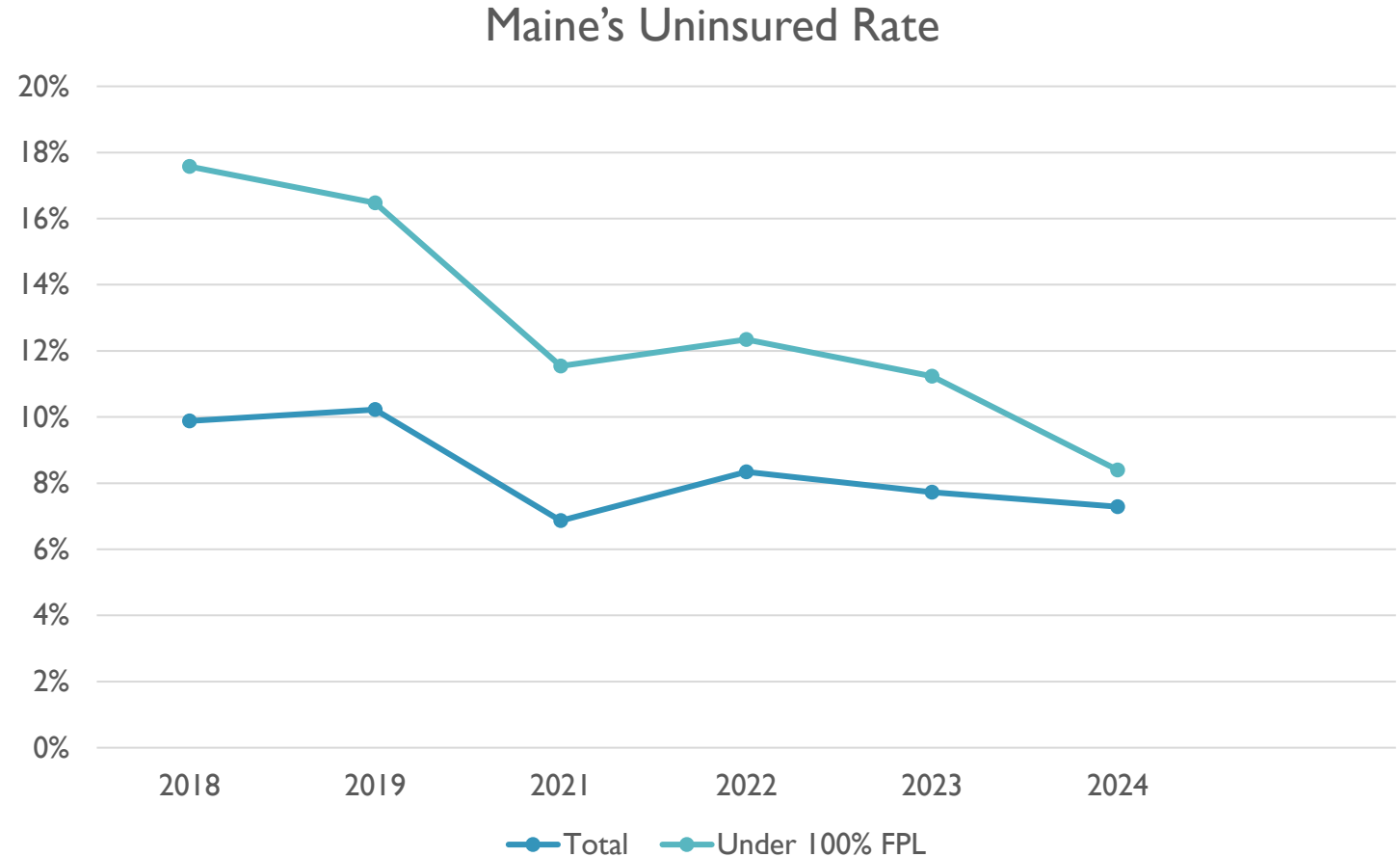
Health Care for Maine Conference – September 2026

About the Office

- Independent executive agency created in law in 2021 and established in 2023
 - Currently three staff lines including the Executive Director, with a fourth added this year
- The OAHC establishing legislation directs the office to:
 - Analyze health care cost growth and spending trends, including correlation to quality and consumer experience.
 - Develop proposals to improve:
 - the cost-efficient provision of high-quality health care;
 - coordination, efficiency, and quality of the health care system;
 - consumer experience with the health care system;
 - and health care affordability and coverage for individuals and small businesses.
 - Monitor the adoption of Alternative Payment Models in Maine and across the country.
 - Provide staffing support to the Maine Prescription Drug Affordability Board.
- The office meets bi-monthly with the 13-member Advisory Council on Affordable Health Care

Remembering the Progress We've Made: Covering More People

- Nearly 26,000 fewer Mainers were uninsured in 2024 vs 2018
- Coverage gains in the expansion population led to a significant increase in annual primary care visits and a decrease in patients reporting delaying care due to cost
- More than 22,000 people have accessed substance use disorder treatment through MaineCare expansion
- Maine hospitals saved \$126 million on uncompensated care in 2020 & 2021



Jordan Rhodes, "Medicaid Expansion in Maine Significantly Reduced Uncompensated Care Costs during the COVID-19 Pandemic," *Maine Policy Review*, 2024.

KFF, "Uninsured Rates for People Ages 0-64 by Federal Poverty Level (FPL)," derived from results from the U.S. Census Bureau American Community Survey.

Remembering the Progress We've Made: Insulating our Marketplace from Federal Upheaval

Operating our own marketplace means Maine has more autonomy in decisions including:

- Length of the open enrollment period
- What life changes allow people to enroll outside open enrollment
- When and how to require paperwork to verify information

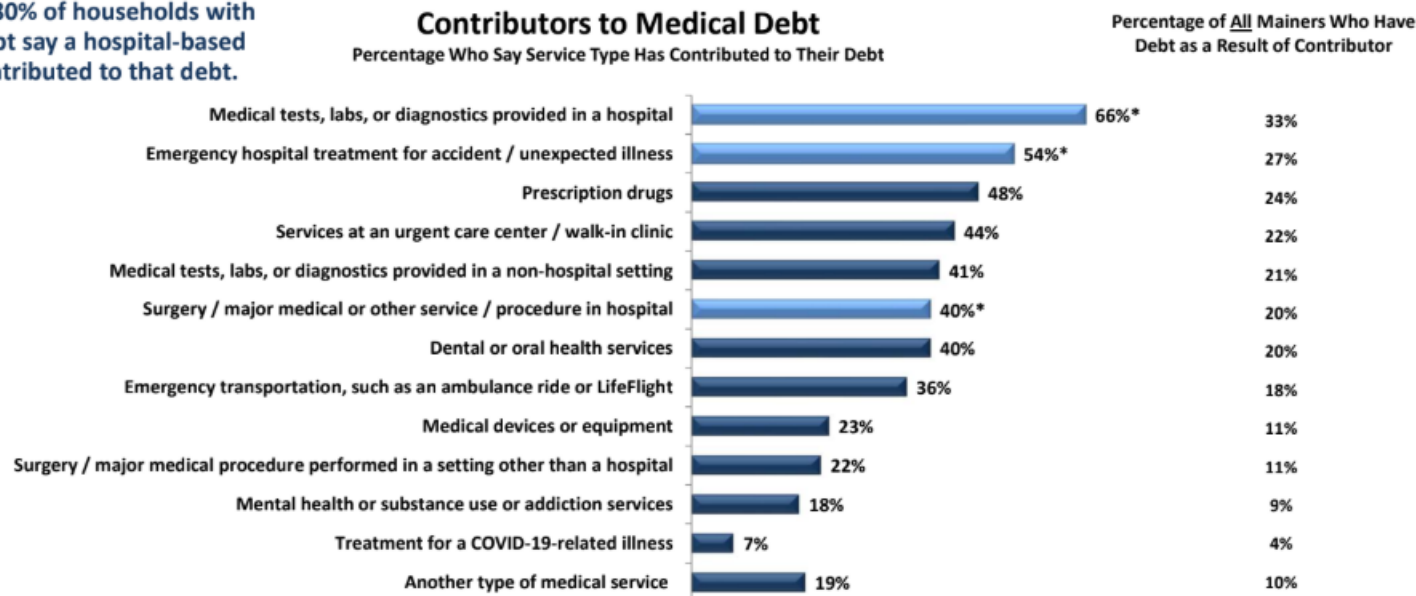


The administration is expected to appeal at least parts of the ruling, but the timing and scope of appeal is unclear. Meanwhile, HHS may offer flexibility on the current August 12 deadline for insurers to make final changes to their 2027 marketplace plans.



Remembering the Progress We've Made: Mitigating Financial Harm for Patients

* A total of 80% of households with medical debt say a hospital-based service contributed to that debt.



Among those who have had medical debt themselves or who have a family member who took on medical debt in the past two years (n=262)

Did any of the following contribute to your/your family member's medical debt?

(n=500)

While we continue to work to make care more affordable, steps have been taken to protect consumers from financial devastation due to medical costs:

- P.L. 2025 Ch. 488 expanded eligibility for hospital free care and standardized requirements for hospital financial assistance to patients
- P.L. 2025 Ch. 649 prohibits salary or wage garnishment and the use of liens against primary residences to collect medical debt

Opportunities



Focus on Coverage

- **Coverage matters.** Numerous studies have found that people with coverage are more likely to:
 - Have a usual source of care
 - Adhere to prescribed medications
 - Receive treatment for chronic conditions like diabetes and depression
 - Report improved physical and mental health
 - Survive treatable diseases and conditions
- Areas of opportunity:
 - Maximize opportunities for outreach, navigation, and simplification of eligibility and enrollment processes within the bounds of federal law
 - Consider targeted state policies that address access and affordability for the remaining uninsured and those facing the highest cost burden

Reducing Insurance Complexity and Costs

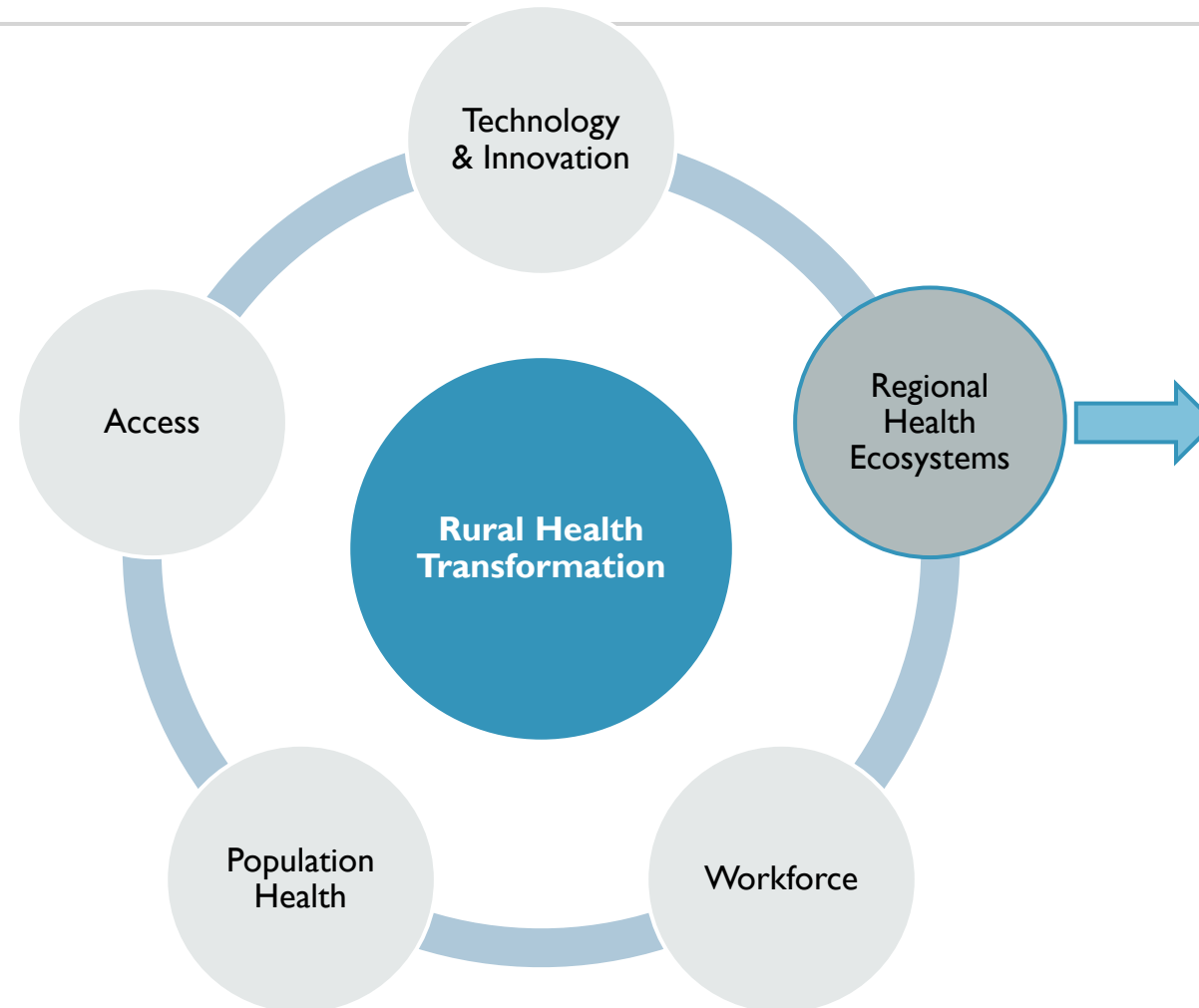
- While affordability of coverage is a major challenge for patients, increasingly we hear about frustration from people with commercial insurance about using their coverage. Addressing the complexity of plans could reduce administrative burden on patients and providers, and help prevent unanticipated out-of-pocket costs.
- Areas of opportunity:
 - Provide simpler plan options that allow consumers to understand what services and providers are included and at what cost
 - Require greater transparency from insurance companies into the factors contributing to premium increases
 - Ensure that tools to manage costs, like prior authorization, are being used in ways that help prevent unnecessary spending without sacrificing patient care

Address Underlying Drivers of Costs

- Coverage and insurance issues are not the only drivers of rising costs and limited access – if we want to improve affordability we need to think about changing the way we pay for care. The current market-driven approach is not serving patients or providers.
- Areas of opportunity:
 - Rebalance spending to ensure that upstream care that keeps people healthy is adequately compensated
 - Ensure that gains made by improving health and reducing utilization are not offset by price increases that reduce consumer affordability
 - Rethink how we pay for care with a focus on bringing parties together to move away from fee-for-service payment and better meet the service needs of Maine communities

Rural Health Transformation Program: Regional Health Ecosystems

Maine's Rural Health Transformation Program consists of 5 interconnected initiatives. The combined activities under these initiatives will lead to transformation in how care is delivered, accessed, and paid for across rural communities in the state.



Regional Health Ecosystems
The Regional Health Ecosystems Initiative aims to strengthen the long-term sustainability and resilience of Maine's rural health system. It is built off the learnings and successes of all the other RHTP initiatives.

Why Regional Health Ecosystems?

Big challenges in our rural health care system require broad collaboration to address. This work will require:

- New relationships and partnerships between different health care facilities and providers
- Support and collaboration from community organizations and community members
- Aligning efforts across state government, statewide and local non-profit organizations, and the private sector

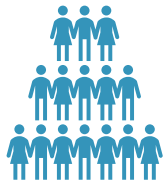
How will we get there?

The regional health ecosystems planning process will provide a structure and funding to bring people together to reassess how care is delivered and paid for in rural areas, and plan projects to develop more efficient and effective systems of care.

Regional Health Ecosystems – What’s Next?

To successfully design a regional approach to rural care, the planning phase will encompass strategic planning efforts and information gathering to make key decisions on how this work will launch.

Information will be gathered from...



PEOPLE

The RHTP team will be engaging in internal and external conversations with key partners and leaders in the health care and community services fields. The conversations will help formalize the vision of regional health ecosystems planning, create buy-in for the planning process, and inform the launch phase of the project.



DATA

Both past data and reports as well as new data pulls and analyses will help create an assessment of existing delivery systems in rural areas and inform future expectations of shifting landscapes impacting Maine’s health system, like demographic changes, payer mix and expected service utilization.



PAST WORK

The regional health ecosystems work will be built upon past initiatives in Maine and learnings from other states. There’s a robust history of delivery system reform that will be critical to informing regional network design and ensuring challenges and successes from the past are considered for future efforts.

Share Your Thoughts

- Each year the Office hosts a public hearing on barriers to affordable health care and welcomes testimony from the public. The 2026 hearing will be Wednesday September 23rd at 1:00pm.
- You can sign up to testify in-person, virtually, or in writing on our website: [**www.maine.gov/oahc**](https://www.maine.gov/oahc)



The Office of Affordable Health Care is responsible for tracking and analyzing health spending in Maine, and proposing solutions with the potential to reduce costs for consumers and improve their experience with the health system.

About Us

In 2021, the Maine legislature created the Office of Affordable Health Care when it enacted [P.L. 2021 Chapter 459, Section 3](#).

[Learn More About Us](#)

2026 Annual Public Hearing

The Office of Affordable Health Care will hold its annual public hearing on September 23rd, 2026 at 1:00pm. Members of the public are invited to provide comments in person, virtually, or in writing.

[View More Information About the Public Hearing](#)