

**TESTIMONY IN SUPPORT  
LD 132**

**An Act to Require Health Insurance Carriers to Provide Coverage  
for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances**

**Public Hearing**

**March 28, 2023**

**Joint Committee on Health Coverage, Insurance and Financial Services**

Honorable Senator Bailey, Chair; Honorable Representative Perry, Chair; and Honorable Committee Members:

Thank you for the opportunity to submit testimony **IN SUPPORT of LD 132**. My name is Jacquelyn Elliott and I live in Waterboro. I am a long-time environmental health and justice advocate and a member of DWME (Don't Waste ME) **a citizens' group working for waste policy that gives communities local control, incorporates Zero Waste goals, and protects the health and environment of communities most impacted by waste facilities**. That work began in my native New Hampshire as a response to my lived experience with health challenges associated with toxic environmental impacts.

DWME has been following the evolving revelation of and response to PFAS contamination of Maine's lands, waters, wildlife and human bodies. We have watched with heartbreak as families have faced the loss of farms, crops, livestock and livelihoods and are now confronting uncertain futures as they grapple with the knowledge their bodies and the bodies of their children are likely poisoned with elevated blood serum levels of PFAS - forever toxic chemicals already linked to known adverse health outcomes. The future health effects are unknown and we must be honest about that. But we do know enough to assume long-term adverse outcomes will present.

The proper context for framing this discussion around LD 132 is to recognize that people are facing the prospect they could be fighting for their lives. People affected by

these excessive toxic PFAS exposures need the assurance they can seek the health monitoring and care that will be required confident that the costs of that care will be met by insurance. Those without insurance must also have ready entry into a system that provides the appropriate monitoring and care and alleviates the associated costs. All those affected particularly merit this care as their precarious situation is not of their own making or culpability. Beyond what LD 132 initiates, we need to establish an on-going public health response for long-term monitoring and care that undertakes the needs of the people damaged by these exposures. Compensation should ultimately be sought from those who have knowingly produced and marketed these toxics to an unsuspecting public. Overall, we must meet the future with a precautionary and preventative approach and turn off the tap for introducing PFAS into the environment.

We now realize these forever toxic chemicals are [ubiquitous](#)<sup>1</sup> in our environment, our food supply, and our bodies. Some people have been extremely exposed to these chemicals. In many instances, already overburdened communities are bearing disproportionate impacts. Of noteworthy concern are the many PFAS contaminated water supplies in our children's schools knowing children are impacted at levels exceeding adults. Like [lead](#)<sup>2</sup>, we now have knowledge there is likely no safe level of exposure for toxic PFAS chemicals. [EPA's](#)<sup>3</sup> recent proposed regulation for levels of six PFAS in drinking water represents a few of the thousands PFAS chemicals currently in use and underlines the seriousness of what we are facing. The dangers posed by PFAS have been [known](#)<sup>4</sup> for

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<sup>1</sup> Environmental Working Group, *PFAS Chemicals the 'forever chemicals in 99% of Americans*, <https://www.ewg.org/what-are-pfas-chemicals>

<sup>2</sup> USEPA *Basic Information About Lead in Drinking Water*, <https://www.epa.gov/ground-water-and-drinking-water/basic-information-about-lead-drinking-water#:~:text=The%20MCLG%20for%20lead%20is%20zero.%20EPA%20has,exposures%20can%20have%20impacts%20on%20lives%20and%20livelihoods>

<sup>3</sup> USEPA, *Biden-Harris Administration Proposes First-Ever National Standard to Protect Communities*, <https://www.epa.gov/newsreleases/biden-harris-administration-proposes-first-ever-national-standard-protect-communities>

<sup>4</sup> Richter, Lauren, Cordner, Alissa, Brown, Phil; *Producing Ignorance Through Regulatory Structure: The Case of Per- and Polyfluoroalkyl Substances (PFAS)*, <https://journals.sagepub.com/doi/10.1177/0731121420964827?icid=int.sj-abstract.citing-articles.2>

decades by the producers of and profiteers from these toxics. [Maine](#)<sup>5</sup> was warned more than two decades ago about the dangers from State-sanctioned sludge spreading on farmland. The emphasis then was on heavy metals and pathogens.

LD 132 seeks to address harm and require that insurance companies cover the costs of testing to determine the blood serum levels of PFAS in people who may have been significantly exposed. [Health practitioners](#)<sup>6</sup> are beginning to establish protocols for monitoring and treating patients whose blood serum levels indicate considerable exposure. People at this increased risk need these tests to be included and compensated as preventive health care so they can be appropriately observed and treated. This is critical information for health care providers and patients. LD 132 represents a small but vital accommodation for those so severely impacted.

Thank you for considering these comments. DWME asks the Committee vote **OUGHT TO PASS** on LD 132.

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<sup>5</sup> Parnell, Harris K., October 2001, *Toxic Sludge In Our Communities: Threatening Public Health and Our Farmlands*, <https://communityactionworks.org/wp-content/uploads/toxic-sludge-in-our-communities.pdf>

<sup>6</sup> Raponiand, Isabella, Brownand, Phil, Corder, Alissa, June 29, 2021, *Environmental Health News, Improved medical screening in PFAS-impacted communities to identify early disease*, <https://www.ehn.org/pfas-testing-2653577444.html>