



Appropriations and Financial Affairs Committee
5 State House Station
Augusta, ME 04333

Dear Senator Rotundo, Representative Sachs, and esteemed members of the Appropriations and Financial Affairs Committee,

My name is Sarah Woodbury. I am the Vice President of Policy and Advocacy for Defend Our Health. Defend is a Maine-based non-profit whose mission is to make sure that everyone has equal access to safe food, safe drinking water, a healthy home, and toxic-free, climate-friendly products. I am writing to provide comments on Part NNN of the change package, specifically, the provision that authorizes the Department of Administrative and Financial Services to carry forward any unexpended balance in the State Benefit Mandate Defrayal program in each fiscal year of the 2024-2025 biennium into the following fiscal year and biennium. I urge the committee to ensure that the funds allocated in the State Benefit Mandate Defrayal program are flexible enough to cover other mandates including LD 132 “An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances”.

LD 132 would allow those that are impacted by PFAS contamination the ability to monitor their health for possible impacts such as high blood pressure, fertility issues, and certain types of cancer. PFAS have been around for decades but it’s just in the past several years that we’ve really started to understand the health impacts of these toxic chemicals, health impacts that have led the National Academies of Science, Engineering, and Medicine (NASEM) to release a report that calls for testing for those with elevated PFAS exposure. NASEM’s report finds “evidence of association between PFAS exposure and increased risk of decreased antibody response, dyslipidemia (abnormally high cholesterol), decreased infant and fetal growth, and increased risk of kidney cancer.” Intended to inform CDC clinical guidance, the report says “if testing reveals PFAS levels associated with an increased risk of adverse effects, patients should receive regular screenings and monitoring for these and other health impacts”.¹

While the health impacts of PFAS are serious, many of these health impacts can be found early if they are monitored by a healthcare professional. Much like a mammogram or other preventative healthcare measures, access to PFAS blood serum testing will provide PFAS impacted Mainers and their primary care practitioners with the necessary information to know if these are health impacts that they should be concerned about, help them to set up monitoring,

¹ Nationalacademies.org. (2022, July 28). *New Report Calls for Expanded PFAS Testing for People With History of Elevated Exposure, Offers Advice for Clinical Treatment*. National Academies of Science Engineering Medicine. Retrieved March 26, 2023, from <https://www.nationalacademies.org/news/2022/07/new-report-calls-for-expanded-pfas-testing-for-people-with-history-of-elevated-exposure-offers-advice-for-clinical-treatment>

and if necessary, treatment plans. Prevention is the best medicine, not only from a health perspective but also from an economic perspective. A study by New York University found that the economic burden of PFAS related healthcare costs could “...costs in the US of \$5.52 billion across five primary disease endpoints shown to be associated with PFAS exposure in meta-analyses. This estimate represented the lower bound, with sensitivity analyses revealing as much as \$62.6 billion in overall costs”.²

Next, it's crucial to recognize that while there is a possibility of defrayal, Maine may not necessarily need to make defrayal payments. Despite the mandate under the Affordable Care Act (ACA) requiring states to make such payments for additional benefits beyond the Essential Health Benefits (EHB), many states have passed such mandates without making defrayal payments. The Administration has not enforced state defrayal requirements and has even taken steps to eliminate reporting requirements and penalties associated with it. Additionally, The Center for Medicare and Medicaid services has not promulgated rules to provide states with guidance on who to deal with defrayal costs. The other state that has passed similar legislation requiring the coverage of PFAS blood serum testing, New Hampshire, did not consider this test a new mandate under the ACA and therefore does not require defrayal costs.

Under LD 1539 “An Act To Provide Access to Fertility Care” passed in the 130th legislature, the legislature is allocating funds for possible defrayal expenses as required under LD 1539. However, it's uncertain whether these funds will actually be needed for defrayal costs. Likewise, it is unclear as to if additional defrayal expenses will be actually needed given the fact that the Biden Administration has not enforced state defrayal.

I urge the committee to ensure that the funds allocated in the State Benefit Mandate Defrayal program are flexible enough to cover other mandates as well. Specifically, I would like to highlight that the state is not expected to spend the entirety of the \$3.8 million earmarked under LD 1539. Therefore, it would be prudent to allow for flexibility in the allocation of these funds to cover potential defrayal expenses for PFAS blood serum testing or other mandates that may arise.

Please feel free to be in contact if you have any questions. Thank you for your attention to this matter.

Sincerely,

Sarah Woodbury
Vice President of Policy and Advocacy
Defend Our Health

² Obsekov, V., Kahn, L.G. & Trasande, L. Leveraging Systematic Reviews to Explore Disease Burden and Costs of Per- and Polyfluoroalkyl Substance Exposures in the United States. *Expo Health* **15**, 373–394 (2023). <https://doi.org/10.1007/s12403-022-00496-y>