

**TESTIMONY OF GLBTQ LEGAL ADVOCATES & DEFENDERS IN SUPPORT OF
LD 143, AN ACT TO IMPROVE WOMEN'S HEALTH AND ECONOMIC SECURITY
BY FUNDING FAMILY PLANNING SERVICES**

Committee on Health and Human Services

March 10, 2025

Dear Senator Ingwersen, Representative Meyer, and Distinguished Members of the Joint Committee on Health and Human Services,

GLBTQ Legal Advocates & Defenders (GLAD Law) is a nonprofit legal organization that works in New England and nationally to create a just society free of discrimination based on gender identity and expression, HIV status, and sexual orientation. We appreciate the opportunity to submit this testimony in support of LD 143, An Act to Improve Women's Health and Economic Security by Funding Family Planning Services.

Family planning service providers are essential to the health and wellbeing of all Mainers, including LGBTQ+ Mainers. The existing family planning care infrastructure includes more than 60 healthcare centers serving more than 30,000 patients annually. Most of those patients—70% in FY 2023—have low incomes.¹ The care patients receive at these healthcare centers includes cancer screenings, testing and treatment for sexually transmitted infections including HIV, well person care, routine gynecological care, behavioral health services, vaccines, contraceptive medications, reproductive healthcare, and more. This care is critical to public health. Family planning services have also been shown to improve educational attainment, economic outcomes, and overall wellbeing of patients, children, and their communities.² These services are also linked to significant private and public cost savings.³

This moment presents a crucial opportunity for Maine to step up as a national leader in public health by funding family planning service providers. In addition to facing rising costs and increased need, these providers are at risk of losing access to federal funding under the new administration. In 2019, the first Trump administration adopted significant changes to Title X regulations governing federal funding for family planning services, causing all Title X sites in Maine to withdraw from the program.⁴ In 2023, the Biden administration reversed the changes to

¹ Maine Family Planning, 2023-2024 Impact Report, <https://mainefamilyplanning.org/wp-content/uploads/MFP-2024-Annual-Report-v.4-single-pages-1.pdf>.

² See Association of State and Territorial Health Officials, *Advancing Contraceptive Care to Improve Maternal Health Outcomes* (Sep. 10, 2024), <https://www.astho.org/4900bb/globalassets/toolkit/advancing-contraceptive-care-to-improve-maternal-health-outcomes.pdf>; American College of Obstetricians and Gynecologists, *Access to Contraception* (2022), <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2015/01/access-to-contraception>; United States Congress Joint Economic Committee, *The Economic Benefits of Birth Control and Access to Family Planning* (Feb. 2020), https://www.jec.senate.gov/public/_cache/files/bb400414-8dee-4e39-abd3-c2460fd30e7d/the-economic-benefits-of-birthcontrol-and-access-to-family-planning.pdf; Adam Sonfield et al., *Moving Forward: Family Planning in the Era of Health Reform*, Guttmacher Institute (2014), <https://www.guttmacher.org/sites/default/files/pdfs/pubs/family-planning-and-health-reform.pdf>.

³ United States Congress Joint Economic Committee, *supra* note 2.

⁴ Brittni Frederiksen et al., *Rebuilding the Title X Network Under the Biden Administration*, KFF: Women's Health Policy (May 25, 2023), <https://www.kff.org/womens-health-policy/issue-brief/rebuilding-the-title-x-network-under-the-biden-administration/>.

Title X and resumed funding most of the healthcare providers who had been forced to withdraw in 2019.⁵ If the new Trump administration reinstates the 2019 regulations or puts additional restrictions on Title X funding, as recommended by the Project 2025 Mandate for Leadership,⁶ Mainers will be at serious risk of losing access to essential healthcare services unless state funding is designated to fill the gap.

State support for this care is more urgent than ever. HIV prevention and treatment services provide one important example. Maine is experiencing an active HIV outbreak, with 21 new confirmed cases in Penobscot County since October 2023—almost ten times more infections than the annual average over the last five years.⁷ At the same time, federal support for HIV treatment and prevention services is in jeopardy on multiple fronts. Federal restrictions on Title X funding will predictably reduce access to HIV testing.⁸ In addition, Congress is currently considering enormous reductions in Medicaid funding that would limit access to HIV-related healthcare services.⁹ And a recent executive order threatens to revoke federal funding from any organization serving transgender people,¹⁰ which could cause serious harm to healthcare providers and other organizations serving people living with HIV.¹¹

State funding for family planning services is also important for supporting the health and wellbeing of LGBTQ+ Mainers more generally. LGBTQ+ individuals and couples strive to create families just like all other people, and they face additional barriers to securing the healthcare they need to build their families. Based on national data, “LGBTQ+ people experience major disparities in sexual and reproductive health care and worse health outcomes

⁵ *Id.*

⁶ Project 2025 Presidential Transition Project, Mandate for Leadership: The Conservative Promise 491 (2023).

⁷ Maine Center for Disease Control & Prevention Division of Disease Surveillance, *Penobscot County 2024 HIV Outbreak* (updated Mar. 6, 2025), <https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/hiv-cluster.shtml>.

⁸ For example, in 2019 compared to 2018, confidential HIV tests administered at Title X sites decreased by 276,109 nationally. *Final Rule: Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services*, 86 Fed. Reg. 56,144, 56,147 (2021).

⁹ *Fact Sheet: Cutting Medicaid Threatens Plans to End the HIV Epidemic*, AIDS Institute (Feb. 2025), [https://aidsinstitute.net/documents/TAI-Policy-Brief---Medicaid-Cuts-Fact-Sheet-\(New\).pdf](https://aidsinstitute.net/documents/TAI-Policy-Brief---Medicaid-Cuts-Fact-Sheet-(New).pdf).

¹⁰ Executive Order 14168, *Defending Women From Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*, 90 Fed. Reg. 8615 (Jan. 20, 2025).

¹¹ In addition, a lawsuit seeking to end no-cost access to pre-exposure prophylaxis (PrEP) and other critical preventive healthcare services under the Affordable Care Act has reached the Supreme Court. *See* GLAD Law, *Lambda Legal*, *GLAD Law*, *Mintz and Public Health Advocates Urge Supreme Court to Protect Access to HIV Prevention in Landmark Case* (Feb. 25, 2025), <https://www.glad.org/experts-urge-supreme-court-to-protect-access-to-hiv-prevention-in-landmark-case/>. On the global stage, the federal government has terminated or paused foreign aid contracts for HIV-related healthcare services abroad. *See* Stephanie Nolen, *U.S. Terminates Funding for Polio, H.I.V., Malaria and Nutrition Programs Around the World* (Feb. 27, 2025), <https://www.nytimes.com/2025/02/27/health/usaid-contract-terminations.html?searchResultPosition>; Apoorva Mandaavilli, *Foreign Aid Freeze Leaves Millions Without H.I.V. Treatment* (Feb. 5, 2025), <https://www.nytimes.com/2025/02/05/health/trump-usaid-pepfar.html?searchResultPosition=7>. These developments could reduce or eliminate access to preventive services in other states and internationally and could indirectly increase the HIV infection risk in Maine.

than the population overall.”¹² A reduction in funding that causes family planning service providers to close their doors will only exacerbate those existing disparities. For all these reasons, GLAD Law respectfully urges members of this committee to pass LD 143.

Sincerely,

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¹² Ruth Dawson & Tracy Leong, *Not Up for Debate: LGBTQ People Need and Deserve Tailored Sexual and Reproductive Health Care*, Guttmacher Institute (Nov. 2020), <https://www.guttmacher.org/article/2020/11/not-debate-lgbtq-people-need-and-deserve-tailored-sexual-and-reproductive-health>.