



**Testimony in Opposition of LD 1024:
An Act to Expand the List of Crimes That Do Not Qualify for Immunity Under Maine's Good Samaritan
Laws Concerning Drug-related Medical Assistance**

March 31, 2025

Senator Beeb-Center, Representative Hasenfus, and Honorable Members of the Criminal Justice & Public Safety Committee,

My name is Courtney Gary-Allen, and I am the Executive Director of the Maine Recovery Action Project (ME-RAP), a grassroots network of Mainers advancing community-driven public policy solutions to substance use. ME-RAP's foundational belief is clear: saving lives comes first. Today, I'm testifying in strong opposition to LD 1024—on behalf of my friend, Tim.

Tim died alone in a one-bedroom apartment of a preventable overdose on August 8, 2020, because someone didn't call 911. His death wasn't unexpected—but it was preventable. Tim is just one of 5,800 Mainers lost to accidental overdose since 2009. One story. One life. One preventable death.

Born May 19, 1968, Tim was the son of Raymond and Lorette Bellavance. He graduated from the Co-Occurring Disorders Court in Kennebec County and worked digging bloodworms along Maine's rugged coast. He loved homemade chocolate pie, his "person in recovery" sweatshirt, and his bulldog, Sam. He left behind an extended family of aunts, uncles, cousins, many close friends, and a recovery community that loved him.

Tim didn't die because he didn't want to live. He died because, in that critical moment, the person with him didn't trust that calling 911 would be safe. That's the reality: we can pass a Good Samaritan law, but if people who use drugs don't believe in it—if they don't feel protected by it—it doesn't matter.

But Tim mattered. He mattered to me.

In overdose situations, hesitation to call for help often means the difference between life and death. Criminal charges should never outweigh a life-saving response.¹ That's the core of the Good Samaritan law. That's why advocates and lawmakers fought so hard to expand it in 2022. Since its passage, EMS calls for overdoses without hospital transport have increased by nearly 6%—a sign that more people are calling 911, and fewer are dying.²

We fought for the Good Samaritan Law to provide the protections people need to make those calls.

LD 1024 threatens to undo that progress.

¹The Good Samaritan law does not provide immunity for sex crimes, violent crimes, crimes against children, or OUI-related offenses. We continue to support these exceptions.

² https://mainedrugdata.org/wp-content/uploads/2025/03/2025-01-ME_OD_Report.pdf



**Testimony in Opposition of LD 1024:
An Act to Expand the List of Crimes That Do Not Qualify for Immunity Under Maine's Good Samaritan
Laws Concerning Drug-related Medical Assistance**

The inclusion of unlawful furnishing and trafficking is particularly problematic. These broad categories are applied inconsistently across jurisdictions, creating fear and uncertainty for those who might otherwise call for help. It's important to understand that trafficking and furnishing charges are based on drug weight rather than intent. Neither of these charges require a person to actually sell drugs, they are only based on the weight of drugs that a person possesses.

If LD 1024 passes, a person calling 911 at the scene of an overdose while in possession of five grams of heroin for personal use could be charged with trafficking. Removing immunity for these offenses will undoubtedly deter people from seeking emergency assistance at the scene of many overdoses. The deterrent effect is real.

I hear almost every day from people who hesitate—or flat-out don't—call 911, even with current protections. LD 1024 would deepen that fear, reintroducing the exact chilling effect the law is meant to eliminate. I urge this Committee to reject LD 1024 and uphold our shared commitment to saving lives. We cannot afford to go backward.

Thank you for your time and consideration. I am happy to answer any questions you may have.

Courtney Gary-Allen
Executive Director, ME-RAP
courtney@me-rap.org