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INCORPORATED IN MAINE

American Academy of Pediatrics

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April 16, 2025

## Subject: Testimony in favor of LD 1277 “An Act Regarding Controlled Substances Prescription Monitoring Activities”

Senator Ingwersen, Representative Meyer, and distinguished members of the Committee on Health and Human Services, my name is Joe Anderson. I am a resident of Portland, a pediatric hospitalist in Lewiston, and I serve on the board of the Maine Chapter of the American Academy of Pediatrics. The Maine Chapter of the AAP is a professional organization representing 300 pediatricians and pediatric subspecialists working together to further our mission *to improve the lives of children and adolescents in Maine*. **We ask that you vote Ought to Pass on LD 1277.**

As pediatricians, we are committed to the health, safety, and dignity of every child in Maine. This includes children and adolescents who are transgender, nonbinary, or gender diverse. Gender-affirming care, which may include the use of testosterone as part of a carefully considered medical plan, is evidence-based, developmentally appropriate, and supported by every major medical organization in the United States, including the American Academy of Pediatrics.

The PDMP is a valuable tool in the fight against prescription drug misuse and diversion. It was initially created to address the opioid crisis and is a vitally important tool in that capacity. However, its scope and use must be continually evaluated to ensure that it does not inadvertently cause harm. Testosterone, while classified as a Schedule III controlled substance, is tracked on the PDMP due to its scheduling classification. Most illicit steroids are smuggled into the U.S. from abroad, according to the DEA<sup>1</sup>. As such, its inclusion in the PDMP is of minimal benefit in addressing illicit steroid use, and can inadvertently create a dangerous opportunity for misuse of health information.

Across the country, we are seeing growing efforts by government actors to interfere in the confidential, medically necessary care of transgender individuals. Last fall, a pediatrician was sued by the state of Texas for providing gender affirming care to minors<sup>2</sup>. These patients were all prescribed testosterone, and one could assume that the reason these patients were singled out (as opposed to other patients who may have been prescribed different medications) was because the state had access to testosterone prescription data through their PDMP. These actions have a chilling effect, not only on providers, who fear criminalization for following medical standards, but on the youth and families we serve, who may delay or avoid care out of fear that their personal medical information could be weaponized against them.

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Removing testosterone from the PDMP would not diminish appropriate regulatory oversight. It maintains its Schedule III classification at the federal level but would simply recognize the legitimate privacy interests of patients whose care is under increasing political scrutiny. It would also support providers who are acting in good faith and in accordance with best practices, ensuring they are not exposed to legal or professional risk for doing the right thing.

There are also immediate concerns highlighting the need for this legislation today. The current administration has focused aggressively on the transgender community, and specifically on Maine's policy on transgender athletes. The President has released executive orders threatening institutions who provide gender affirming care by way of retracting federal research or education grants,<sup>3</sup> and excluding employees of organizations who provide gender affirming care from being qualified to receive Public Service Loan Forgiveness.<sup>4</sup> We fear that Maine physicians and healthcare systems could be a target of federal action in this arena, and the current prescribing data present on our state's PDMP puts them at risk.

Maine has a proud tradition of protecting patient autonomy, provider judgment, and the rights of marginalized communities. This bill is a necessary and measured step to uphold those values. The Maine AAP urges you to **vote Ought to Pass on LD 1277** and ensure that transgender youth and their families can access medically necessary care without fear. Thank you for your leadership on this critical issue.

Sincerely,

A handwritten signature in black ink that reads "Joe Anderson" followed by a stylized flourish.

Joe Anderson, DO, FAAP

Advocacy Chair, Maine Chapter of the American Academy of Pediatrics

<sup>1</sup> Department of Justice/Drug Enforcement Administration Drug Fact Sheet: Steroids. Obtained from [https://www.dea.gov/sites/default/files/2020-06/Steroids-2020\\_0.pdf](https://www.dea.gov/sites/default/files/2020-06/Steroids-2020_0.pdf)

<sup>2</sup> *Texas sues doctor for prescribing testosterone to transgender minors.* (2024, October 17). Reuters. <https://www.reuters.com/world/us/texas-sues-doctor-prescribing-testosterone-transgender-minors-2024-10-17/>

<sup>3</sup> *Protecting children from chemical and surgical mutilation.* (2025, January 28). The White House. <https://www.whitehouse.gov/presidential-actions/2025/01/protecting-children-from-chemical-and-surgical-mutilation/>

<sup>4</sup> *Restoring public service loan forgiveness.* (2025, March 8). The White House. <https://www.whitehouse.gov/presidential-actions/2025/03/restoring-public-service-loan-forgiveness/>