

OLEAGA LAW LLC

Fertility Law

254 Commercial Street, #245
Portland, Maine 04101
(207) 200-6780
Janene@IVFesq.com

305 Broadway, Suite 711
New York, New York 10007
(212) 897-5839
www.IVFesq.com

February 24, 2026

Health and Human Services Committee
100 State House Station
Augusta, ME 04333

**RE: In Support of LD 335 and Sponsor Amendment for LD 335,
An Act to Protect Funding for Family Planning Services**

Dear Members of the Committee on Health and Human Services:

I am writing in strong support of LD 335 generally, and the Sponsor Amendment for LD 335, An Act to Protect Funding for Family Planning Services, and the establishment of the fund to maintain access to statewide family planning services. I submit this testimony as a fertility attorney and reproductive rights advocate serving individuals and couples throughout Maine who are building families through assisted reproduction, and as a resident of Cumberland Foreside, Maine.

Every day, I work with intended parents who rely on the full spectrum of reproductive care, including contraceptives, preconception care, STI screenings and treatment, infertility treatment, miscarriage management, prenatal care, and postpartum care. When family planning providers and clinics lose funding, the consequences ripple outward delaying diagnosis, disrupting care, and undermining critical health care families depend on when making some of the most important decisions of their lives.

It is no secret that reproductive rights are being attacked federally. Some states in our country are increasingly restricting access to medical care, especially access to family planning that does not align with the political agenda of the policymakers pushing to enact restrictive legislation. Maine has been a leader in protecting access to the full spectrum of reproductive care at the state level. LD 335 would protect family planning clinics and providers at a crucial time in our country.

LD 335 recognizes a simple but fundamental truth: access to family planning services is foundational health care. By protecting access to care at the state level and providing state

funding if federal Title X funds are reduced or eliminated, and by ensuring reimbursement for unfunded providers, this legislation protects Maine families from politically driven disruptions in health care.

The medical consensus is clear. The American Society for Reproductive Medicine (ASRM) has long affirmed that access to the full spectrum of comprehensive health care services is essential to individual autonomy and public health. ASRM policy statements emphasize that reproductive decision-making is central to family formation and restrictions on care disproportionately harm low-income patients and rural communities¹. The American College of Obstetricians and Gynecologists (ACOG) has repeatedly stated that publicly funded family planning programs reduce unintended pregnancy, improve maternal health outcomes, and expand access to preventative services such as cancer screening and STI testing².

Clinics funded by Title X serve Maine patients who often have nowhere else to go to receive the care they need. Many of my clients begin their reproductive journeys inside of these clinics, seeking treatment for endometriosis, polycystic ovarian syndrome, recurrent pregnancy loss, or unexplained infertility. Many other Mainers, both men and women, receive contraceptive care from the providers at these clinics until they are financially and personally prepared to start their families, while other Mainers rely on these providers for postpartum care after long-awaited pregnancies.

When federal funding is withdrawn or destabilized as a political motivation, clinics close their doors, staff are laid off, and appointment wait-times increase dramatically. Patients delay care. Medical conditions worsen. Hopeful Maine parents lose precious time in receiving time-sensitive treatment. For MaineCare members, gaps in coverage can equate to the difference between having a family they hoped for and losing the opportunity entirely.

The Sponsor's Amendment to LD 335 establishes a dedicated fund to maintain statewide access to family planning services, requiring such funding when federal Title X funds are reduced or eliminated. The Sponsor's Amendment also protects the most vulnerable Mainers by ensuring MaineCare members continue to receive covered services, even if federal law attempts to exclude providers, promoting stability and equity in reproductive care. Simply put: this legislation protects Maine families, present and future.

I represent single parents by choice, married couples navigating infertility, LGBTQ+ intended parents, cancer survivors preserving fertility before treatment, and working-class families carefully planning the spacing between their children. Each of these hopeful parents depend entirely on access to reproductive care providers at the clinics this legislation is aimed at protecting. Family planning funding is not abstract. It is the infrastructure that allows people to decide if and when to have children, and to do so safely under the care of qualified providers without having to consider the out-of-pocket cost for receiving such care.

¹ <https://www.asrm.org/advocacy-and-policy/>

Disparities in Access to Effective Treatment for Infertility in the United States: An Ethics Committee Opinion, <https://www.asrm.org/practice-guidance/ethics-opinions/disparities-in-access-to-effective-treatment-for-infertility-in-the-united-states-an-ethics-committee-opinion-2021>

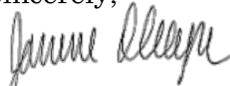
² ACOG, *Committee Statement No. 21 Access to Contraception (November 2025)*

<https://www.acog.org/clinical/clinical-guidance/committee-statement/articles/2025/11/access-to-contraception>

Maine has long been a leader in recognizing that reproductive freedom includes both the right to prevent pregnancy and the right to pursue parenthood. LD 335 ensures that neither right is hollowed out by shifting federal policies and political agendas.

I urge the Committee to vote “ought to pass” on LD 335 and to safeguard the continuity of care that Maine families deserve.

Sincerely,



Janene Oleaga

Janene Oleaga
Cumberland Foreside
LD 335

Dear Members of the Committee on Health and Human Services:

I am writing in strong support of LD 335 generally, and the Sponsor Amendment for LD 33f, An Act to Protect Funding for Family Planning Services, and the establishment of the fund to maintain access to statewide family planning services. I submit this testimony as a fertility attorney and reproductive rights advocate serving individuals and couples throughout Maine who are building families through assisted reproduction, and as a resident of Cumberland Foreside, Maine.

Every day, I work with intended parents who rely on the full spectrum of reproductive care, including contraceptives, preconception care, STI screenings and treatment, infertility treatment, miscarriage management, prenatal care, and postpartum care. When family planning providers and clinics lose funding, the consequences ripple outward delaying diagnosis, disrupting care, and undermining critical health care families depend on when making some of the most important decisions of their lives.

It is no secret that reproductive rights are being attacked federally. Some states in our country are increasingly restricting access to medical care, especially access to family planning that does not align with the political agenda of the policymakers pushing to enact restrictive legislation. Maine has been a leader in protecting access to the full spectrum of reproductive care at the state level. LD 335 would protect family planning clinics and providers at a crucial time in our country.

LD 335 recognizes a simple but fundamental truth: access to family planning services is foundational health care. By protecting access to care at the state level and providing state funding if federal Title X funds are reduced or eliminated, and by ensuring reimbursement for unfunded providers, this legislation protects Maine families from politically driven disruptions in health care.

The medical consensus is clear. The American Society for Reproductive Medicine (ASRM) has long affirmed that access to the full spectrum of comprehensive health care services is essential to individual autonomy and public health. ASRM policy statements emphasize that reproductive decision-making is central to family formation and restrictions on care disproportionately harm low-income patients and rural communities. The American College of Obstetricians and Gynecologists (ACOG) has repeatedly stated that publicly funded family planning programs reduce unintended pregnancy, improve maternal health outcomes, and expand access to preventative services such as cancer screening and STI testing.

Clinics funded by Title X serve Maine patients who often have nowhere else to go to receive the care they need. Many of my clients begin their reproductive journeys inside of these clinics, seeking treatment for endometriosis, polycystic ovarian syndrome, recurrent pregnancy loss, or unexplained infertility. Many other Mainers, both men and women, receive contraceptive care from the providers at these clinics until they are financially and personally prepared to start their families, while other Mainers rely on these providers for postpartum care after long-awaited pregnancies.

When federal funding is withdrawn or destabilized as a political motivation, clinics close their doors, staff are laid off, and appointment wait-times increase dramatically. Patients delay care. Medical conditions worsen. Hopeful Maine parents lose precious time in receiving time-sensitive treatment. For MaineCare members, gaps in coverage can equate to the difference between having a family they hoped for and losing the opportunity entirely.

The Sponsor's Amendment to LD 335 establishes a dedicated fund to maintain statewide access to family planning services, requiring such funding when federal Title X funds are reduced or eliminated. The Sponsor's Amendment also protects the most vulnerable Mainers by ensuring MaineCare members continue to receive covered services, even if federal law attempts to exclude providers, promoting

stability and equity in reproductive care. Simply put: this legislation protects Maine families, present and future.

I represent single parents by choice, married couples navigating infertility, LGBTQ+ intended parents, cancer survivors preserving fertility before treatment, and working-class families carefully planning the spacing between their children. Each of these hopeful parents depend entirely on access to reproductive care providers at the clinics this legislation is aimed at protecting. Family planning funding is not abstract. It is the infrastructure that allows people to decide if and when to have children, and to do so safely under the care of qualified providers without having to consider the out-of-pocket cost for receiving such care.

Maine has long been a leader in recognizing that reproductive freedom includes both the right to prevent pregnancy and the right to pursue parenthood. LD 335 ensures that neither right is hollowed out by shifting federal policies and political agendas.

I urge the Committee to vote “ought to pass” on LD 335 and to safeguard the continuity of care that Maine families deserve.