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Testimony of Adam Goode, Maine AFL-CIO Legislative & Political Director, In Support of LD 1152 "An Act to Make Long-term Disability Insurance Coverage Available to Public Employees"

Senator Tipping, Representative Roeder and members of the Joint Standing Committee on Labor & Housing, my name is Adam Goode. I am the Legislative & Political Director of the Maine AFL-CIO. We represent 40,000 working men and women in the state of Maine. We work to improve the lives and working conditions of our members and all working people. We testify in support of LD 1152.

This bill requires the Maine Public Employees Retirement System (MainePERs) to offer long-term disability insurance coverage and requires employers to provide the coverage at employer expense to members of the system and certain employees who participate in the system's defined contribution plan or provide substantially equivalent coverage obtained from another source.

Working people deserve to earn a living and have a life that is marked by dignity and respect. When it comes to retirement security for public employees who have faced disability, we believe everyone should have a chance to make ends meet when they hit hard times.

In the 129th Legislature, just prior to the COVID pandemic, this committee heard gut wrenching testimony on LD 1978, a bill that eventually passed in the 130th and led to a working group that brought the policy idea to this current proposal. At that hearing, fire fighters, teachers, school employees, state employees and others who have been denied disability benefits told of their experiences confronting physical or mental health disabilities, living in poverty or close to it due to their challenges, and their inability work or access the disability benefits of MainePERs. The stories are hard to hear, and I am sure even harder to tell for the impacted individuals.

Our testimony will forgo the heart wrenching stories of public sector employees who work hard and are forced to fight under a process that has far more barriers than social security. You heard the stories of teachers, school employees, state employees, firefighters and others who were denied disability benefits even though they were and are clearly and permanently disabled at the hearing on past bills. These stories are hard to hear, as they are often marked by the person's inability to work or access disability benefits and are therefore living in or close to poverty.

The bill before you is an attempt to provide these workers a level playing field by providing a long-term disability insurance program to participants in MainePERs. We have worked with public sector unions over the course of the last two sessions to provide relief for any current or future participants in MainePERS who may need to apply for disability. We appreciate that staff at MainePERS have been helpful in working with stakeholders on this issue, improving the bill from past sessions. We ask that you vote for LD 1152.

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LD 1978
An Act to Improve the Disability Retirement Program of the Maine Public Employees Retirement System

January 29th, 2020

Written Testimony for the Record
by
Bradford “Skip” Jerome

Disabled Professional Firefighter from Biddeford Fire Department

My name is Bradford Jerome. I live in Biddeford, Maine. I started working as a firefighter for the City of Biddeford in 1980 as a volunteer and became a career firefighter there in 1986. In addition to being a firefighter, I also worked there as an EMT. I worked there until July of 2017, 37 years total.

My job as a firefighter/EMT was very physically and mentally demanding. In addition to fighting fires, I also did emergency medical service calls which included among other things cardiac arrest calls, suicides, car accidents, and drug overdoses.

During my career, I have experienced numerous traumatic events. In one fire I went to, a woman was yelling at me that there was a baby girl still inside the building. I wanted to go in to try to save the baby, but I was ordered not to go in because it was deemed to be unsafe. The baby girl died in that fire. To this day I believe I might have been able to have saved her if I had gone in.

Another time, I had an ambulance call and had to transport a patient to the hospital. When I got to the hospital, I walked by the trauma rooms which are right by the emergency room door. I looked in and saw the lifeless body of my nephew Derek Greene. He had been shot and killed by Rory Holland. I later found out that my other nephew, Gage Greene, had also been killed by Rory Holland.

After the death of my nephews, my wife told me that I was not right, but because we as firefighters pride ourselves on toughness, I tried to tough it out and I continued to work.

I responded to numerous drug overdoses which became more widespread recently with the opioid epidemic. During such calls I would have to do an emergency and quick assessment, administer Narcan if warranted, and perform other life saving measures including CPR. Unfortunately, many patients died.

I also responded to numerous suicides. Some of the suicides were by hanging and I had to cut patients down that had hanged themselves. I also responded to horrific car accidents which required me to retrieve dead and mangled bodies.

My symptoms got worse and by July of 2017 I was no longer able to do my job. I have anxiety and my mind races. I startle very easily if I hears sirens, loud noises, or bangs. I used to be a happy go lucky guy who was very social. Now, I have difficulty going out in public and I do not like crowds. If I go to a restaurant I have to sit with my back to the wall because I don't like having anybody behind me. I also have to sit facing the door. If someone is walking behind me, I will stop and turn to let them go by so that I will be behind them. I am always looking around the room and scanning to try to figure out if there is any potential danger or not. I knew coming here today would be very difficult, but I felt I needed to speak up because of the way myself and others have been mistreated by this system.

I have a lot of difficulty concentrating and I am forgetful. I will be having a conversation with somebody and then in the middle of a sentence I will lose my train of thought. My wife has to keep a calendar for me because I do not remember what I have to do. She will write my doctors' appointments and other appointments on there.

I don't sleep well at all. I have nightmares and I wake up thinking about my nephews and other calls that I have been on. I will wake up in a sweat. Oftentimes I will get up and go sit in the kitchen or another room because I can't sleep. Sometimes I wake my wife up from thrashing around. Other times she finds me sitting in the dark and will ask what I am doing.

I have a hard time controlling my emotions and I have crying spells. A son of a friend of mine committed suicide and when I went to his funeral, I became overwhelmed and broke down crying. The father of the person that committed suicide ended up consoling me, which made me feel terrible since I should have been the one consoling him.

Both my treating doctor and my therapist diagnosed me with Post Traumatic Stress Disorder ("PTSD") and both have stated that I am no longer capable of performing my job as a firefighter/EMT. I was also evaluated by an independent psychiatrist who also concluded that I have PTSD and that I am permanently unable to work as a firefighter. My brain is not functioning normally, I am not capable of making quick decisions, and there is a good chance someone could be seriously injured or die if I was to return to work. If it was one of your loved ones or family members that needed to be rescued from a fire or needed emergency medical care, you would not want me responding to that call since I am no longer capable of doing it.

I applied for MainePERS disability retirement benefits and I was told by the MainePERS "Medical Board" that I don't have PTSD and that I can do my job. I was never examined by this "Medical Board" and I have no idea who the person is that wrote the report because I was not given that information and I was told we are not allowed to question the Medical Board.

Based on the opinion of this so-called "Medical Board", my disability application was denied. My doctor, my therapist, and the independent psychiatrist that evaluated me are all dumbfounded by this result and cannot understand it. Not only did they tell me that I have PTSD, they told me my case was a classic case and they don't understand how someone could say that I don't have PTSD and that I could work as a firefighter.

After 37 years of service where I put my life on the line helping others, when I needed help, and when I had to swallow all of my pride and apply for disability benefits, the system that I have been paying into turned its back on me. This has been humiliating and financially devastating for me and my family. It is exactly this kind of mistreatment that results in people with mental health problems not coming forward and asking for help which is already a huge problem for firefighters who are reluctant to come forward because of the toughness culture. Unfortunately, the suicide rate among firefighters continues to climb. There are now more firefighter suicide deaths than line of duty deaths and the ignorance shown by the Medical Board and the punishment being administered by the MainePERS disability retirement system only makes it worse. For these reasons, I urge you to pass LD 1978 so that hopefully others will not have to suffer as I and my family have.

Respectively Submitted: Bradford "Skip" Jerome
Date Submitted: January 29th, 2020

I am here today to speak to the issue of what a legitimate claim of disability denial and the upholding of that denial can do to the claimant and his or her relationships, namely, what it has done to me and to my relationships. The devastation is almost incalculable.

~~Let me give a bit of background first for context. First, I am a driven person, although my conversational style and social demeanor might not indicate that. I have a busy mind, even now as it is constantly derailed by both external and internal stimuli...it is a matter of degree. I am goal oriented and always have been. My goals are quite different now with the change in my functional reality.~~

~~I started my family in my early twenties and finished my college education in my late twenties, choosing a degree in Elementary Education with a concentration in Language Arts because it drew on both my intellectual and creative strengths. I wanted to work with children because I believed then and believe now in the importance of preparing children to become adults able to fully participate in our democracy through the educational process. I traveled 90 miles each way to classes as a full-time student while my children were in early elementary school and our family made sacrifices so that I could do that. I graduated in May of 1989 and was hired as a first grade teacher in July of that year. Thus began a 24-year career as a teacher of grades 1-4, combined with single parenthood from 1990 onward.~~

~~It was not easy to fulfill the roles of teacher and single parenthood, but it was what I wanted to do. I do not think I am overstepping when I say that most teachers would agree that there are not ever enough hours to do the job with all that it could require. Knowing that always bothered me. The balance was always difficult but often very rewarding as I worked with many different children and their families - hundreds of them over the years.~~

~~Inasmuch as teaching effectiveness can be measured by the scores on student assessments, teaching effectiveness is also determined by subjective observation and evaluation. My performance evaluations were always high and in the last few years of my career, I developed a deep love for teaching students with reading and writing difficulties and assessing their progress as a means for determining further instruction and interventions. In the summer of 2011, when my children were well into adulthood and I had more hours open, I began the process of gathering information to begin graduate studies, something I never thought that I could or would want to do, with the goal being to have the option to be a literacy specialist at a later point in time.~~

I was a — teacher for — years.

In January of 2012, I fell on the ice two times in a nine-day period, hitting my head on the back left side. I went to the emergency room both times and went home with discharge instructions. After the second hit, the crushing headache was followed by new symptoms of blurred vision, a crushing fatigue, ringing ears, and, most concerning, changes in my speech, in my mental focus and decision-making. I was diagnosed with concussion later in that week by my primary care physician and had a neurological evaluation soon after and was given the diagnosis of post-concussive syndrome. I was referred to speech therapy in February of that year. I began the arduous process of rebuilding speech and cognitive processes and that therapy would last for the next year. Over the next year and a half, I would add to speech and neurology followups more rehabilitation in the forms of vestibular therapy for balance and dizziness, neuro-visual therapy for exercises to address my visual difficulties as well as corrective glasses and ongoing evaluation of my visual processes, cognitive behavioral therapy to help me cope with changes brought by brain injury, as well as ongoing supportive individual therapy. By the end of 2013, I had had two neuropsychological evaluations that supported the diagnosis of my neurologist but now changed the wording to Òpersistent post concussive syndrome.Ó I had attempted to return to work in September of 2012 and was unable to continue because the areas of impairment I experienced and as later described in my neuropsychological evaluation made reading difficult - print often swam on the page. I had a difficult time remembering what I had just read or recalling important conversational points. I struggled to tolerate lighted environments and movement that would happen in any busy environment and processing multiple demands and stimuli. This, added to the cognitive overwhelm that began as soon as my feet hit the floor in the morning. My ears constantly rang. The fatigue was overwhelming as well. In total, I could no longer navigate the work environment and its demands and I resigned the next April.

I filed for disability retirement benefits concurrent with my resignation and continued rehabilitative therapies. I was denied even though all of my providers concurred that the functional impairments I have were most likely permanent . I proceeded up the levels of appeal with approximately 1000 pages of medical records, detailed explanations by specialists as to why my impairments would continue and why that not allow me to work in my former capacity. I am grateful to all of these people who comprised my care team. I am grateful for the expert testimony by John Taylor, D.O., neurologist. I am grateful for the support and tenacity of my attorney, Gerard Conley. My case was true and it was complete. For nearly 3 years the appeal process continued to its end in the Maine Supreme Court and resulted in upholdings of the original denial in which it was determined that I had not met my burden of proof, and all but set aside the expertise and conclusions of the doctors and specialists who worked with me. Those upholdings also alluded to, if not directly stated, that I was motivated by secondary gain. I am grateful to the one justice on the supreme court who dissented and called for the focus to be on my functional impairment areas. Personally, I see no gain whatsoever in losing ones capacities, ones identity and many of oneÕs relationships to the devastation that traumatic brain injury can bring and how my particular injury caused areas of permanent impairment that can respond only to compensatory strategies.

I can quickly tell you that on the economic side of being denied my claim, my medical costs have been the greatest expense. I do not continue or initiate new therapies that I might benefit from aside from neurovisual rehab. We have sold a home and recently mortgaged the one that we currently live in. My 403b which is the 401k equivalent for teachers will be exhausted in a few months. Funds of other sorts drained. My husband at nearly 66, a Vietnam veteran who struggles with diagnosed PTSD and a mood disorder, is working two parttime jobs and is adding another to offset our debt requirements. Financial stresses in addition to the changes wrought by coping with the physical, cognitive and emotional/personality changes due to my brain injury, at times brings our marriage to the breaking point and exacerbates my comorbid anxiety and depression. It should not be this way.

We, (my husband and I) make our way through with help and support and at this point live in a very hand-to-mouth way. We move on determined that our driven personalities, our will to survive and our faith will see us through.

But I think more about these things:

My grandchildren have a grandmother who taught children to read but who now cannot navigate a bookstore because of visual challenges and vertigo in busy environments. Who cannot just go to the library for fun, for the same reasons. Who cannot read and enjoy print with them except in a limited way. Who finds it difficult to draw and color with them for more than a few minutes. who finds playing with legos excruciating and struggles to follow the quick pace of their video games. Little boys have a hard time understanding that.

They have a grandmother who cannot drive beyond a certain radius and in inclement conditions, who must take the bus or the train, who cannot drive at night. Who cannot just get to them. Who cannot just come to their activities and events at will. Little boys have a hard time understanding that, too, in a world where you can pretty much be anywhere anytime.

They have a grandmother who must adhere to a fixed number of hours of physical contact with them before cognitive/physical/emotional fatigue take their toll on what is already a restricted relationship, tinged at times with misunderstanding, regret, sorrow.

I have a hard time with that.

My children have a changed mother. My parents a changed daughter. My husband a changed wife. I could go on to list the many ways that I need and must have supports in my daily life. Those needs and supports are described in part in the medical findings of the many doctors and specialists who worked with me and assessed my condition. They are included in the 1000 pages of evidence.

That evidence was found to not meet the burden of proof.

I am no less disabled.

January 29, 2020

Senator Bellows, Representative Sylvester, members of the Committee on Labor and Housing, my name is Randy Bodge. I have been denied disability retirement from the Maine Public Employees Retirement System, known as MainePERS. Please support LD 1978 so all other current or future retirement system participants won't have to go through the same mistreatment my wife and I've endured.

In 2013, I was operated on to remove my gall bladder and to see what was on my intestines. That is when I found out that I have stage 4 carcinoid cancer. The surgeon removed what he could, but had to stop because I would have bled out on the table and died. I went to Dana-Farber in Boston for a second opinion, and they agreed with my original diagnosis.

My diagnosis and surgery came after I worked over 20 years, starting as a bridge operator and ending as a transportation operations manager, for the Maine Department of Transportation. My work for DOT started in 1991 as a drawbridge operator on the old Richmond-Dresden bridge. I worked on bridges throughout Maine's midcoast region, including the old Carleton Bridge, the bridges in Southport, South Bristol, Barters Island, and on the State Ferry Service's transfer bridges.

Because of the stage 4 carcinoid cancer, I currently get a shot every three weeks in my hip, and I will for the rest of my life. The side effects from this form of cancer and treatment are unbearable at times. I get up every day and do what I can, but I tire easily and I don't sleep well. I hide my pain, and I struggle with depression and anxiety. If you have never had cancer, you will never know or understand the pain that comes along with it.

I applied for disability retirement from MainePERS in the fall of 2013. My wife and I were shocked when MainePERS denied my claim.

Financially, I have had to live frugally and I have used all the money that I had set aside from my 457k plan to live on, as well as the income my wife earns from her two jobs. I also receive help with my medical from Maine General Medical Center and Medicare. Without that, I would not be able to afford my cancer treatments.

I have found with my dealings with MainePERS that they were very cold, heartless, and did not care about my situation. MainePERS is my social security and it's the same for every other person who participates. They told me I could take my money anytime I want to – which I am quite sure that is what they want me to do because it is in their best interest, not mine.

If I were to divest from MainePERS, the money would count as income, and would cause me to lose my Medicare through Social Security disability, which means the money would just go toward health insurance and medical treatments anyways.

Before judgment could be made on my case, I had a second hearing at the request of MainePERS. When I arrived, there was a whole new panel of hearing officers and lawyers, which made me wonder where the others were. Did they not agree on my case, so they removed them? Or did they leave and are no longer employed at MainePERS? I was told by my lawyer that it is not a common practice to have two hearings.

I feel their practices are unjust and unfair. I am not only fighting for myself, but I am fighting for every person who participates in MainePERS so that they don't go through what my wife and I have been through.

MainePERS is our social security, and all participants deserve to know they have their retirement there for them. The unfair practices at MainePERS need to end now! Please support LD 1978 to provide desperately needed reforms to the way MainePERS handles disability-retirement claims. Thank you.