



MAINE CHIEFS OF POLICE ASSOCIATION

P.O. Box 2431 • South Portland, Maine 04116-2431

Chief Edward J. Tolan (ret.), Executive Director, Tel: (207) 838-6583
email: mcopa@maine.rr.com Web site: www.mainechiefs.com

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Cumberland Police Dept.

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Statement of Support to L.D. 1123, An Act to Create a Presumption That a Cardiovascular Injury or Disease or Pulmonary Disease Suffered by Certain Law Enforcement Officers Is in the Course of Employment April 6, 2023

Senator Tipping, Representative Roeder, and distinguished Committee on Labor and Housing. My name is Charles Rumsey. I am the Chief of the Cumberland Police Department, and President of the Maine Chiefs of Police Association. I am submitting testimony on behalf of the Maine Chiefs of Police Association in support of LD 1123.

The Mission of the Maine Chiefs of Police is to secure a closer official and personal relationship among Maine Police Officials; to secure a unity of action in law enforcement matters; to enhance the standards of police personnel, police training and police professionalism generally; to devise ways and means for equality of law enforcement throughout the state of Maine; to advance the prevention and detection of crime; to prescribe to the Law Enforcement Code of Ethics; and to promote the profession of law enforcement as an integral and dedicated force in today's society sworn to the protection of life and property.

According to the bill summary,

This bill establishes a rebuttable presumption:

1. Of disability under the Maine Public Employees Retirement System for a law enforcement officer who suffers a disability as a result of a cardiovascular injury or a cardiovascular or pulmonary disease; and
2. That a law enforcement officer's cardiovascular injury or disease or pulmonary disease arose out of and in the course of employment under the Maine Workers' Compensation Act of 1992

The Maine Chiefs support LD 1123 because as Chiefs of police departments, we are directly responsible for the health and safety of our officers. We do everything that we can to protect against the various harms that might befall them in the line of duty.

We train for every situation so that our officers can return home at the end of their shift, but the reality is that Law enforcement officers are 25 times more likely to suffer death and disability from heart disease than from the violent action of a suspect, and the life expectancy of a police officer is 20 years less than his or her civilian counterpart, which is in large part due to heart disease problems.

The causes of these grim statistics can be boiled down to two main reasons:

First, irregular sleep schedules increase the risk of heart disease. There have been several studies on this subject, including one at Brigham and Women's Hospital which found that individuals with irregular sleep schedules were nearly twice as likely to develop cardiovascular disease.^{vi} Our law enforcement officers have to work night shifts. And, given the shortage of officers in the field right now, many of our officers are having to pick up additional night shifts. Law enforcement officers do not have the luxury of consistent sleep schedules, but our officers are willing to sacrifice their sleep routines so that the public can sleep safely at night.

Second, stress kills. The long-term activation of the stress response system and the overexposure to cortisol and other stress hormones that follows can disrupt almost all of a law enforcement officer's bodily processes. One study found that "people who experience a high level of psychological stress in the year before the study were twice as likely to have a heart attack in the 5-year follow up period of the study"^{vii} because the constant higher hormone levels lead to an increase in blood pressure which can lead to "inflammation in your arteries, higher levels of body fat, [and] greater insulin resistance."^{viii} This "can promote plaque buildup and arterial disease that increased the risk of a heart attack or stroke."^{ix} All of our officers have to deal with physical and psychological stress almost every single day of the job. The calls never get easier and each one weighs on you in different ways, but our officers are willing to carry that stress so that the communities we serve are safer.

LD 1123 establishes that if an officer suffers a cardiovascular injury or disease or pulmonary disease then there is a rebuttable presumption that the illness arose in and out of the course of their employment. Right now, these types of injuries are only covered if they occur *while* an officer is on duty. However, heart attacks do not pay attention to work schedules - they can occur at any time.

The Legislature previously recognized this presumption for firefighters and then recognized this presumption last year for corrections officers. Additionally, the federal Department of Justice's Public Safety Officers Program, which provides death and education benefits and disability benefits to officers catastrophically injured in the line of duty to public safety officers including survivors of fallen law enforcement officers, recognizes a presumption of coverage for heart attacks, strokes or vascular rupture if they occur within 24 hours of an officer being on duty.^v

It is clear: studies show that law enforcement officers have an escalated risk of heart attack because of the nature of their jobs.

We should listen to the evidence and pass this important piece of legislation to extend this protection to law enforcement officers so they and their families can have peace of mind that they will be covered if they suffer a cardiovascular injury or cardiovascular or pulmonary disease.

We want to thank Senator Lawrence for bringing this bill forward. For the reasons I previously stated, we would ask you to support LD 1123 and vote ought to pass on this bill to support our law enforcement officers and families. On behalf of the Maine Chiefs of Police Association, we want to thank the committee members for your work on this Committee.

ⁱ <https://www.nih.gov/news-events/nih-research-matters/irregular-sleep-patterns-may-raise-risk-heart-disease>; see also <https://www.webmd.com/heart-disease/atrial-fibrillation/news/20210924/night-shift-linked-to-heart-problems> (“The results also showed that working the night shift for 10 or more years was associated with an increased risk of coronary heart disease of 37%, compared to daytime workers); <https://pubmed.ncbi.nlm.nih.gov/29856365/> (“Furthermore, chronic disruptions of the circadian clock, as with night-shift work, contribute to increased cardiovascular risk.”)

ⁱⁱ <https://www.healthline.com/health/heart-attack/can-stress-cause-a-heart-attack#stress-and-heart-attack>

ⁱⁱⁱ <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/stress/art-20046037>.

^{iv} <https://www.healthline.com/health/heart-attack/can-stress-cause-a-heart-attack#stress-and-heart-attack>.

^v <https://bj.a.ojp.gov/psob-act>.