

131st Legislature
Senate
of Maine
Senate District 31

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Testimony of Senator Donna Bailey introducing
**LD 444, An Act to Designate First Responders and Other Public Safety
Professionals as a Special Risk Population for the Purposes of Improving
Insurance Coverage for the Effects of Trauma**
Before the Joint Standing Committee on Health Coverage, Insurance, and Financial Services
January 23, 2024

Representative Perry and Esteemed Members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services, my name is Donna Bailey, and I proudly represent Senate District 31, which includes Buxton, Old Orchard Beach, and Saco. Today I am pleased to introduce my bill LD 444, “An Act to Designate First Responders and Other Public Safety Professionals as a Special Risk Population for the Purposes of Improving Insurance Coverage for the Effects of Trauma.”

This critical initiative seeks to ensure that medical professionals consider the unique risk factors associated with the profession when recommending and conducting preventive screenings, and that insurance companies cover the screenings.

Our first responders, who courageously work together daily to address public safety emergencies and voluntarily expose themselves to situations most of us hope never to experience. They respond collectively, regardless of their agency size or full-time employee status, assisting all adjacent agencies when events such as large structure fires or significant traumatic events cannot be handled by one service alone.

The repeated exposure to traumatic events is a known factor in shortening the life expectancy of our first responders. These brave individuals face not only physical challenges but also significant mental and emotional burdens as they navigate the aftermath of emergencies. Recognizing the toll that repeated exposure to traumatic events takes on the personal health of first responders, this legislative body has commendably enacted several presumptive injury categories for workers' compensation benefits—which apply to an individual whether they are a fulltime employee, part-time employee or a volunteer.

Currently, there are several presumptive injury categories for workers compensation benefits linking the role of fire fighter, police officer, corrections officer, dispatcher, and EMS provider to cardiac arrest, cancer and post-traumatic stress disorder.

In this context, LD 444 aligns seamlessly with the existing legislative framework by designating first responders as a special risk group. By doing so, the bill not only enhances access to preventive health screenings but also addresses the broader issue of mitigating the health impacts of repeated exposure to traumatic events. Instead of providing benefits once a first responder is ill, the bill uses the same recognized universal approach to keeping them healthy.

Currently, preventative screenings necessary to catch the early onset of health impacts related to first responder risks are not engaged without a clear presenting factor unrelated to how the health effects in this population are present. For instance, most insurances do not cover negative screenings for cancer except in certain circumstances, while some have age related triggers like mammograms or screenings for colon cancer. Because of this, Bangor fire and many other large agencies pay for this to establish the negative baseline at the beginning of employment to enable the individual to track exposure to carcinogens from their fire response.

Not all agencies have the capacity to do this, but all agencies respond to the same events when they are needed, and their employees are exposed to the same risks.

Similarly, the average life expectancy of a police officer in the United States is twenty-two years less than their civilian counterparts. Currently, the life expectancy of a police officer is only 57 years, while their civilian neighbor enjoys a life expectancy of 69. The reasons for this are linked similar to other first responders related to factors such as mental stress induced by work schedules, shift work, hypervigilance, and psychological trauma.

While presumptions are established in statute, there is no level playfield to engage with, let alone deliver, prevention. LD 444 changes this.

This bill, like the presumption efforts, make sure that all first responders are evaluated for their real risks regardless of the size or capacity of the agency they work for, employment status, or insurance carrier and instead uses the well-established special population model to trigger appropriate screenings.

In the room and on zoom today are individuals who will share their personal stories, and medical research indicating why the current screening approaches need to be adjusted to better capture the health risks of this population.

The proactive approach advocated by LD 444 is a crucial step toward ensuring the continued physical and mental well-being of our first responders.

As I close, I have one suggestion: I ask the Committee to consider amending the definition of "Public safety agency" (25 M.R.S.A. §2921 6(B)) to include "...correctional, police, dispatch, or communication services" so that we can ensure we cover independent PSAP dispatchers, too.

Thank you for your time. I would happy to answer any questions.