

Testimony of Ernie Davis, Senior Director of Northeast State Government Affairs

**Blood Cancer United and Julia MacDonald, American Cancer Society Cancer
Action Network**

**LD 2129 " An Act to Prohibit Liens on Principal Residences and Wage
Garnishments for Medical Debt"**

Tuesday, February 17, 2026

Senator Bailey, Representative Mathieson, and distinguished members of the HCIFS Committee: my name is Ernie Davis, and I am the Senior Director of Northeast State Government Affairs for Blood Cancer United, and on behalf of the patients, survivors, caregivers, and volunteers we represent, I am here to testify in strong support of LD 2129.

At Blood Cancer United, our mission is to cure blood cancers and improve the quality of life of patients and their families. We exist to find cures, ensure access to treatments, and improve survivorship for blood cancer patients.

I am also testifying on behalf of ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society that advocates for evidence-based public policies to reduce the cancer burden for everyone. Our organizations have collaborated on medical debt legislation in dozens of states nationwide.

This bill builds on the landmark legislation passed with our support last session and is an important step toward protecting Maine people from the harmful consequences of medical debt. LD 2129 prevents collection agencies from placing a lien on a home or withholding wages from individuals burdened by medical debt, ensuring that unforeseen medical emergencies do not jeopardize Mainers' financial stability.

Medical debt is a widespread crisis in the United States. Nearly seven in ten adults report receiving a medical bill they could not afford, even with insurance. The consequences of medical debt are severe and long-lasting. Forty-two percent of people with medical debt have delayed or avoided necessary care because they feared taking on additional debt, and seventy-four percent report negative impacts, including damage to credit, housing insecurity, stress, anxiety, and depression. Cancer patients are especially vulnerable. Nearly half of cancer survivors report carrying medical debt related to their treatment due

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to repeated care, high cost-sharing, and lost wages. Medical debt is not a reflection of personal failure but rather a systemic problem in our health care system.

Addressing medical debt is crucial to accomplishing our collective mission of ending cancer as we know it. Individuals must first have access to quality, affordable health insurance coverage, and policies are also needed to reduce the impact of medical debt on individuals and families. LD 2129 helps ensure that a serious illness does not lead to lifelong financial harm. Reducing the burden of medical debt also has direct implications for health outcomes. Patients who are overwhelmed by debt are less likely to access preventive services, adhere to treatment plans, or complete recommended care. Policies such as LD 2129 help patients focus on their health and recovery rather than financial survival.

For these reasons, Blood Cancer United and the American Cancer Society Cancer Action Network strongly support LD 2129 and urge the committee to vote to pass. Thank you for your attention and for your commitment to protecting the health and well-being of Maine residents.

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[We are all about blood cancer | Blood Cancer United](#)

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