

Testimony in support:
LD 335, An Act to Safeguard Reproductive Rights
February 25th 2026

Good morning, Senator Ingwersen, Representative Meyer, and esteemed members of the committee. My name is Ellen Taraschi, and I am a nurse practitioner with Maine Family Planning (MFP). I'm here to support LD 335, "An Act to Safeguard Reproductive Rights."

Since October 2024, I've been working on the front lines of the HIV outbreak in Penobscot County, using our mobile medical unit. Our mission is simple and unwavering: to ensure everyone receives compassionate, dignified HIV testing and treatment.

In a typical year, the entire state of Maine sees only one or two HIV cases. Since the start of the outbreak response, MFP has conducted over 400 HIV tests in Bangor alone. Despite these efforts, our HIV case count has risen rapidly to 38 confirmed patients. With our current resources, we are not reaching everyone who needs testing and treatment.

Really, we should have seen this coming. We have the highest rates of hepatitis C in the nation and where hepatitis C shows up, HIV is soon to follow. People who are at risk for hepatitis C and HIV are also typically at risk for other sexually transmitted infections, such as gonorrhea, chlamydia, and syphilis, as coinfections are common. In fact, there has been a 500% increase in syphilis cases from 2014-2023.

For the first time in decades, babies are being born with congenital syphilis, signaling widespread undiagnosed infection among adults. Prior to 2022, there were zero reported cases of syphilis for at least 20 years. In 2023 alone, there were 104 cases. That is unacceptably high.

The reach of this sexual health crisis is ever widening. It truly goes to show that when we ignore Mainer's needs for preventative care and reduce capacity for proactive care, we end up having to react to an avoidable crisis.

Chronic underfunding and active disinvestment in sexual and reproductive health has created a fire that we are trying to put out without access to a firehose. A robust, adequately funded, sexual and reproductive healthcare network in Maine going forward would act as a systemic sprinkler system to put out embers before they turn into blazes.

Increased state funding would allow us to add staff and double our testing and treatment capacity. Currently, we are stretching limited, short-term, unstable, grant funding to respond to a growing public health emergency.

Now is not the time to shortchange sexual and reproductive healthcare funding. We need sustained investment to continue responding to this emergency and to prevent the

next one. With federal family planning funding under threat, Maine's state leaders must step up. A healthy constituency is the foundation of a healthy state.

HIV prevention and treatment, STI testing, vaccinations, cancer screenings, and basic primary care; these are not luxuries. They are basic public health necessities.

We urge our legislators to fill this growing financial void and invest in the long-term health of Mainers. These funds are urgently needed to stabilize our clinics, sustain our workforce, and ensure anyone who needs care can receive it, now and in the future.

Thank you for your time and consideration.