

Testimony in support of LD 227, “An Act Regarding Health Care in the State”

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Dear Senator Bailey, Representative Perry, and members of the Joint Standing Committee on Health Care, Insurance, and Financial Services. My name is James Myall. I’m an Economic Policy Analyst at the Maine Center for Economic Policy. I’m writing to testify in support of LD 227, “An Act Regarding Health Care in the State.” MECEP supports LD 227 because it would protect Maine doctors and provide a lifeline to people living under the threat of political persecution in states attempting to criminalize gender affirming care and abortion for youth and adults. Protecting these Americans is not only the right thing to do morally, but will promote the economic security and wellbeing of all of us.

Transgender Americans across the country have been the targets of pervasive and systemic harassment, creating an atmosphere of terror and uncertainty. According to the Human Rights Campaign, 22 states have passed gender affirming care bans for youth already.¹ These bans imperil the access to evidence-based, medically necessary health care for more than 100,000 transgender youth nationally.²

There has also been a wave of legislation which seeks to punish women who seek abortion care in other states, as well as those who help them. As more states ban or heavily restrict abortion access, large numbers of Americans are using their constitutional right to interstate travel to access the care they need. As many as one in five abortion patients now travels out of state.³ Some states are taking extreme measures to punish their residents for travel or assisting travel to places like Maine to conducting activity which is perfectly legal here.⁴

This bill would ensure that these states cannot overreach and attempt to punish people for activities which Mainers and their representatives have determined to be legal and medically necessary.

Lack of access to these kinds of medically necessary care has a severe adverse economic impact on Americans. Research has shown that these laws are severely harming the mental health of transgender youth,⁵ and poor mental health in adolescence can have ramifications for health and financial wellbeing for the rest of their lives. Having a serious mental illness can reduce annual earnings by up to \$27,000 annually,⁶ and experiencing depression in adolescence can reduce annual earnings in adulthood by 24%.⁷

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Similarly, access to abortion care allows women to pursue more educational opportunities, stay more attached to the labor force, and generally control their economic future. Abortion access also helps to reduce child poverty.⁸ These economic impacts are especially strong for women of color.

The potential for criminalization also creates harmful economic impacts. Being charged with a felony disrupts people's lives, leaving them vulnerable to poor health outcomes⁹ and significant labor market discrimination, making it difficult for these families to provide for themselves. Previously incarcerated people are unemployed at a rate five times higher than the general population,¹⁰ receive 50% fewer callbacks from employers, and have their lifetime earnings cut in half,¹¹ on average.

Providing a lifeline to transgender people and their families who are fleeing persecution in other states would only stand to benefit the state economy. Maine needs to continue to grow its working-age population, which means being a welcoming destination for all Americans, including those seeking abortion care or transgender care. While much of the impact of this bill will be to protect individuals who are temporarily visiting Maine for health care, it also has the potential to attract more permanent residents looking for a safe place to live. Transgender people¹² and those who receive abortion care are younger than Mainers as a whole, and are the kind of people our workforce needs.¹³ Similarly, health care providers are more likely to choose to practice in a state which protects them from hostile out of state lawsuits. There is already anecdotal evidence that states like Idaho are losing obstetricians as result of their harsh anti-abortion laws.¹⁴ LD 227 would demonstrate to both patients and providers that Maine is a welcoming place to visit or live.

Protecting human rights is imperative. But it's also something that provides real benefits to all of us as a society. When Mainers' rights are protected and their dignity preserved, they are more secure economically, and that ultimately benefits all of us in the long run. When the most vulnerable among us are able to thrive, we all thrive.

I urge you to vote ought to pass on LD 227 as amended.

Thank you for your consideration. If you have any questions, I can be reached at jmyall@mecep.org

Notes

¹ Human Rights Campaign, “Map: Attacks on Gender Affirming Care by State.”

<https://www.hrc.org/resources/attacks-on-gender-affirming-care-by-state-map>

² Williams Institute, “Prohibiting Gender-Affirming Medical Care for Youth.”

<https://williamsinstitute.law.ucla.edu/publications/bans-trans-youth-health-care/>

³ Guttmacher Institute, “The High Toll of US Abortion Bans: Nearly One in Five Patients Now Traveling Out of State for Abortion Care.” Dec 2023. <https://www.guttmacher.org/2023/12/high-toll-us-abortion-bans-nearly-one-five-patients-now-traveling-out-state-abortion-care>

⁴ Shefalia Luthra, “Abortion opponents are trying to deter people from traveling out of state for care.” *19th News*. Oct 12, 2023. <https://19thnews.org/2023/10/abortion-opponents-out-of-state-care/>

⁵ Child Trends, “Discriminatory Transgender Health Bills Have Critical Consequences for Youth.”

<https://www.childtrends.org/publications/discriminatory-transgender-health-bills-have-critical-consequences-for-youth>

⁶ PubMed Central, “Measuring the Lifetime Costs of Serious Mental Illness and the Mitigating Effects of Educational Attainment.” <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6597007/>

⁷ Brookings Institute, “Lasting scars: The impact of depression in early adulthood on subsequent labor market outcomes.” <https://www.brookings.edu/research/lasting-scars-the-impact-of-depression-in-early-adulthood-on-subsequent-labor-market-outcomes/>

⁸ Institute for Women’s Policy Research, “The Economic Effects of Abortion Access: A Review of the Evidence.” July 2019. https://iwpr.org/wp-content/uploads/2020/07/B377_Abortion-Access-Fact-Sheet_final.pdf

⁹ Health Affairs, “Incarceration Is A Health Threat. Why Isn’t It Monitored Like One?”

<https://www.healthaffairs.org/doi/10.1377/forefront.20211014.242754/full/>

¹⁰ Prison Policy Initiative, “Out of Prison & Out of Work: Unemployment among formerly incarcerated people.”

<https://www.prisonpolicy.org/reports/outofwork.html>

¹¹ Federal Reserve Bank of Richmond, “Incarceration’s Life-Long Impact on Earnings and Employment.”

https://www.richmondfed.org/publications/research/economic_brief/2021/eb_21-07

¹² Pew Research Center, “About 5% of young adults in the U.S. say their gender is different from their sex assigned at birth.” <https://www.pewresearch.org/short-reads/2022/06/07/about-5-of-young-adults-in-the-u-s-say-their-gender-is-different-from-their-sex-assigned-at-birth/>

¹³ Planned Parenthood, “Facts About Abortion Care.” July 27, 2020.

https://www.plannedparenthood.org/uploads/filer_public/b3/8c/b38c6365-2337-4576-b07d-6a56cbf42ed2/ppst_abortion_facts.pdf

¹⁴ Sheryl Gay Stolberg, “As Abortion Laws Drive Obstetricians From Red States, Maternity Care Suffers.” *New York Times* Sept 7, 2023. <https://www.nytimes.com/2023/09/06/us/politics/abortion-obstetricians-maternity-care.html>