



Opposition Testimony:

(L.D. 253) "An Act to Prevent the MaineCare Program from Covering Abortion Services"

(L.D. 682) "An Act to Amend Certain Laws Regarding Abortions"

(L.D. 886) "An Act to Regulate Medication Abortions"

(L.D. 975) "An Act to Repeal Laws Allowing Abortion and to Criminalize Abortion"

Joint Standing Committee on Judiciary

March 28, 2025

Senator Carney, Representative Kuhn, and members of the Joint Standing Committee on Judiciary, my name is Angela Leclerc. I am a Past-President of the Maine Academy of Physician Associates (MEAPA), a Gorham resident, and I practice critical care in Maine. I am speaking on behalf of MEAPA, a non-profit organization that represents over 1,000 PAs practicing in Maine and on behalf of past, present and future patients seeking access to healthcare in Maine. I am opposing L.D. 253 "An Act to Prevent the MaineCare Program from Covering Abortion Services", L.D. 682 "An Act to Amend Certain Laws Regarding Abortions", L.D. 886 "An Act to Regulate Medication Abortions", and L.D. 975 "An Act to Repeal Laws Allowing Abortion and to Criminalize Abortion".

My first child was born at 32 weeks. I was visiting a friend in Minnesota when I went into labor. My husband and I spent 5 weeks in the Neonatal ICU at the world-renowned Mayo Clinic. The second week we were there, we noticed a very tiny premature baby in an incubator who was alone for several days. We passed judgement immediately, as young, naïve parents do. At three weeks, we finally saw a young man and woman come to the unit to visit the premature boy.

The minute I saw the mother, my heart sank, my eyes welled with tears, and I had pangs of guilt running through my abdomen with a terrible nauseating sensation. The young mother was in a wheelchair, she was thin and quite ill appearing with a drawn pale face and what looked like oversized clothes. She was a cancer patient with an aggressive form of cancer who needed to give birth to her child prematurely, on purpose so she could begin her very lonely journey as a cancer patient.

We would later learn that she made a very difficult decision when she was diagnosed, just 22 weeks pregnant. After consultation with her physician specialist, she decided to deliver prematurely and hope that her baby would be healthy and really hope that she would also survive to be a part of that baby's life.



How many of you know someone with a chronic illness? Perhaps multiple sclerosis, lupus or other autoimmune conditions? Or, do you know someone who may have had cancer, around the time of childbearing age? Perhaps they were diagnosed early in their pregnancy and needed to start chemotherapy right away to have the best chance of survival. Medications commonly used to treat chronic autoimmune illnesses that are commonly diagnosed in woman of childbearing age and chemotherapy and other biologics used to treat cancer are referred to as teratogens in the medical literature. A teratogenic is a drug that is harmful to a developing fetus. It can cause structural and functional abnormalities to a fetus or embryo. This means, if a pregnancy was to survive, they have a high risk of having birth defects, developmental delays and other health problems.

Chances are not small that, a woman, your sibling, daughter or granddaughter, in the future will have an autoimmune condition or be diagnosed with some form of cancer in their child-bearing years.

Women have the right to make difficult decisions over their body that may include:

- Contraception to prevent pregnancy while taking teratogenic medications. This includes birth control pills, IUDs and other implantable birth control
- Surgical abortion to remove likely, early, wanted pregnancy to pursue life-saving treatments for their acute and/or chronic illness
- Contraception to prevent more pregnancies when more children would lead to significant psychological or physical burden
- Contraception or surgical abortion to choose not to have children, just because

Access to medical care must be maintained to all Mainers, supported through MaineCare and private insurers.

In closing, I urge you to remove personal judgement based on your personal beliefs. We appreciate the committee's commitment to serving Mainers and in this case patients in Maine who need healthcare. Healthcare should be non-partisan and all the above bills I am opposing, oppose healthcare for Maine women.

Thank you for your time and consideration,  
Angela Leclerc, MPAS, PA-C  
Past-President and current Delegate, Maine Academy of Physician Associates