**BI-STATE PRIMARY CARE ASSOCIATION** 

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April 16, 2019

House Committee on Judiciary State of Vermont 115 State Street Montpelier, VT 05633

Re: S. 37 – An Act Relating to Medical Monitoring

Sent via email to mbailey@leg.state.vt.us

Dear Chair Grad and Members of the House Committee on Judiciary,

Bi-State Primary Care Association appreciates the opportunity to provide comment on S. 37 – An Act Relating to Medical Monitoring. We appreciate the importance of ensuring individuals who are adversely impacted by toxic substances receive the opportunity for assistance with their medical care.

Established in 1986, Bi-State Primary Care Association (Bi-State) is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State's Vermont membership includes 12 Federally-Qualified Health Centers (FQHCs) delivering primary care at 64 sites and serving over 177,000 Vermonters. Our members also include Area Health Education Centers, Grace Cottage Rural Health Clinics, Planned Parenthood of Northern New England, and Vermont's free clinics.

Bi-State and our members are committed to ensuring Vermonters have access to the necessary primary and preventive services to ensure they are able to live, work, and play. Key to this is ensuring that the health centers around the state are able to provide these services while being compliant with state and federal laws. We are concerned that we will be unable to obtain insurance coverage under the current proposed bill. Additionally, we are concerned that we will be unable to attract and retain health care clinicians in a regulatory environment that is so different than other states.

We offer the following suggestions to ensure that Vermont's health centers can continue to thrive and provide necessary services throughout the state:

 S. 37, as currently drafted, provides exclusions for certain categories of toxic substances in Sec. 1 (7)(B)- Definitions. We request that a similar exemption be provided for health care providers, including health centers and hospitals. 2. If an exemption is not possible, we would request that the Committee consider amending S. 37 to eliminate the strict liability standard by removing sections 1-3 of the bill. We also request that if the Committee retains a requirement for medical monitoring, the Committee consider modifying the bill to provide for the recognition of claims for medical monitoring based on a negligence standard. This standard would ensure companies continue to evaluate processes and follow state and federal requirements, while ensuring Vermont maintains a functioning insurance market. Additionally, Vermont's law would be in alignment with that of numerous other states providing for an 'even playing field' for recruitment and retention.

We thank you for your consideration of these recommendations and appreciate the ability to work together with you to ensure that we continue to be able to offer high-quality, efficient primary care services throughout the state.

If you have any questions, please let me know. I can be reached at <u>gmaheras@bistatepca.org</u> or 802-229-0002 ext. 218.

Sincerely,

Georgia J. Maheras, Esq. Vice President, Policy and Programs Bi-State Primary Care Association