

12/2/24

Chairman Gerwatowski
Rhode Island Public Utilities Commission
89 Jefferson Boulevard
Warwick, RI 02888

RECEIVED
2024 DEC -9 AM 9:05
PUBLIC UTILITIES COMMISSION

Dear Chairman Gerwatowski,

Thank you for the kindness you showed me during the public hearing on November 20, 2024 re: RI Energy's Tariff Advice Filing to Amend Terms and Conditions for Distribution Service.

I had been planning to listen to the proceedings anonymously-while on a ladder painting a room- but your staffer was so tenacious in trying to fix the problematic telephone connection that I just couldn't disappoint your efforts by not speaking up.

That's what I get for multitasking!

Because I was so thoroughly unprepared, I'm not certain I made any sense.

As an amend, I've enclosed (1) a more coherent testimony, (2) a partial summary of my contacts with RI Energy regarding an AMR opt-out at my current residence, and (3) the American Academy of Environmental Medicine Recommendations Regarding Electromagnetic and Radiofrequency Exposure.

I do not underestimate the significance and complexity of the wireless issue, the weight of the Public Utilities Commission's responsibilities, or the challenge that powerful competing interests present.

I can only offer you the truth of my lived experience in the hope that it can be heard and make a difference.

Thank you, again.

Sincerely,



Jamie Orr
P.O. Box 133
Carolina, RI 02812
401-409-1070

JAMIE ORR (11/22/24) RI PUBLIC UTILITIES COMMISSION TESTIMONY

Current Address: 29 Old Richmond Townhouse Road, Richmond, RI 02812

Former Address: 198 South Weeden Road, Wakefield, RI 02879

In the late afternoon of March 27th 2023, a small cell site installation irrevocably turned my world upside-down. An omni-directional, 24/7-powered, 4G/LTE wireless antenna was activated on the pole supplying electrical service to my South Kingstown home of 23 years without my ability to stop it. (Electromagnetic frequency readings taken on the property at the time with the on-site engineer's industrial meter and my commercially available meter produced similar results.) Comprehensive measurements taken across time by a certified Electromagnetic Radiation Specialist determined that the indoor household EMF reading prior to activation was 9.66 microwatts per meter squared and the after-activation reading was 9,400 microwatts per meter squared. According to the internationally-recognized Building Biology Evaluation Guidelines, my home had been transformed from the EMF category of Slight Anomaly (0.1-10) to the highest EMF category of Extreme Anomaly (greater than 1,000 microwatts per meter squared). This was a home I had specially remodeled for accessibility. I am an ADA-eligible individual due to my significant neurological anomalies and unusual physical, visual motor challenges.

I can best describe the experience I had in accessing my home post-activation as similar to what I had begun encountering years earlier, but was successfully able to avoid, in public spaces with WiFi. Depending on the signal strength, I feel as if I'm a lightning rod or radio antenna. I can't tolerate the bioelectrical sensation that is something akin to standing in front of a heat lamp without feeling the heat, just the intensity. I begin to feel exhausted and within 10 minutes, my thinking becomes confused (i.e. I know something is wrong, but I can't quite figure out what it is. I have to work really hard to concentrate in order to power through whatever I was intending to do. Inevitably, I'm forced to admit what's happening and, in a kind of panic, just get away.) I gradually recover when removed from a source. My doctors and I attribute these responses to the well-documented, long-standing sensitivity of my central nervous system caused by birth trauma, and to the known biochemical reactions elicited by microwave frequency radiation on the human body. (The on-site engineer reported that he, too, along with his co-workers, "feel" the intensity of the waves and within 6 minutes get a metallic taste in the mouth.) In any case, I was forced to abandon my home and became virtually homeless for six months because the number of houses for sale was severely limited and most landlords, family, and friends refuse to shut off their home-based cell phones and WiFi for any length of time. During this ordeal, I asked for, but received no help (scarcely a reply or acknowledgment) from South Kingstown town officials, RI State government agencies and officials, my own U.S. Congressional delegation, or any of the 113 Rhode Island State Senators and Representatives. Ditto, non-profit organizations and attorneys.

In the beginning, I thought my experience with wireless technology was unique. My first reaction occurred while visiting my father in the Westerly Hospital about ten years ago. Knowing nothing about cell phones, I sat down next to my sister on a hospital bed but immediately pulled away from the sensation I felt. Unbeknownst to me, she had an active cell phone in her pocket. (I immediately dismissed the experience because we had more urgent matters to attend to.) Over time, when I began to notice similar reactions in specific public libraries, I recognized what most people cannot easily detect, the connection between my symptoms and newly installed WiFi routers. At the time the small cell site was activated on my home's electric pole, I still thought my reactions were singular and attributable to my unique brain injury. I was wrong. Since then, I have met Rhode Islanders without preexisting physical conditions who are also suffering from EMF radiation exposure. I personally know of families who: have left the state or are currently captive in dangerous housing situations within the state; who have lost their employment and income; who have become medically injured; who feel they can't protect their children; who have become socially ostracized by their attempts to avoid exposures. With hind-

sight, I feel thankful for the keen awareness I've had since birth, the ability I have to observe my own brain's processing, and the privilege of having been able to practice avoidance for so long. These make me one of the fortunate ones. I was able to identify the wireless danger from its public inception and to continue to keep connected through wired technology.

Now, hopefully, I can speak up for those Rhode Islanders who are simply trying to survive; those who are uncounted and untracked because they don't have the luxury of time, income, or social support to be able to speak out. Because I am so lucky, I am also uncomfortable complaining about how physically debilitating, financially depleting, emotionally demoralizing, and continuously destabilizing my life has become due to being displaced. I am living in the chaos of remodeling a too-large home (in too-remote a location) which my retirement planning never anticipated. I am estranged from my family and friends and, more generally, isolated from society. I fear the imminent threat of another small cell site being installed nearby and know that, even if I can opt-out of the RI Energy/PPL AMF meter and access a safe analog meter, my home will still be affected by the smart meter installations forming a Mesh Network throughout my neighborhood and community.

Additionally, I do not trust RI Energy to honor the opt-out option they put forward in September, 2023 which could preserve my health and safety. Specifically, I believe their assertion, "The Company has sole discretion to determine the alternative metering to be used for opted-out meters," may be an ADA violation. RI Energy has already sought to increase its monthly penalty (tariff) from \$13 to \$20 dollars, making it unaffordable for most people and a severe deterrent. (Vermont has a no-fee opt-out.) Why is it not possible for opt-out RI Energy customers to call in their monthly meter reading and waive the fee, since I have heard this option available among the customer service line prompts?

Furthermore, RI Energy has not, in fact, honored the current AMR (one-way transmitting meter) opt-out request I initiated in September, 2023 for my new house. My contacts with customer service representatives have been characterized by: lengthy wait times; no answer at all; no promised supervisor call backs; multiple, cross-country telephone transfers and disconnections; agents unfamiliar with the kind of request and required process; contradictory information from multiple agents; no communication and miscommunication within the metering department itself as well as other departments; an inability of agents to find my records over several months; service errors (two different technicians brought unacceptable digital non-com meters instead of the one necessary). I believe all of this indicates consumers will have difficulty accessing the RI Energy opt-out process even if they can afford it.

My experience in South Kingstown with the small cell site over a year ago has not ended. I share it as only one of many cautionary tales, especially now that I have become more informed: (1) This saturation of electromagnetic and radiofrequency exposure has never existed before; the change is in its infancy; no one knows how people and the planet will respond, (2) This is a local, state, national, international, and planetary hazard. It is not unique to me. People who are not ill become sick when smart meters are introduced into their surroundings, (3) Wireless companies themselves list electromagnetic frequency radiation among their designated environmental pollutants, (4) Medical professionals and organizations are already documenting and warning about both short and long term biological effects. The Rhode Island Department of Health has recently published a Fact Sheet addressing Radiofrequency Energy as a possible environmental hazard, (5) Every one of my neighbors has the freedom to install any kind of antenna on his/her property at any time, (6) There will be no public spaces left for sanctuary when the proposed federal bills seeking to allow antenna coverage in preserved natural areas are passed, (7) There is no redress for individuals like me if RI Energy/PPL is held harmless as they demand: "The Company shall not be liable for damage to the person or property of the Customer or any other persons resulting from the use of electricity or the presence of the Company's appliances and equipment on the Customer's premises." This is unacceptable.

JAMIE ORR (11/22/24) CONTACT SUMMARY WITH RI ENERGY/PPL

The following is a summary of contacts and does not include multiple other attempts to gain information via telephone.

Early September, 2023 I contacted RI Energy by telephone throughout the month to initiate an opt out for an existing electric meter. I had continued difficulty due to customer service personnel not being familiar with the concept or process.

October 12, 2023 RE: 75715-98016 POLE 1972 The AMR opt out form was sent to me via the U.S. Postal Service.

November 20, 2023

I finally reached the Metering Department to inquire whether my opt out form had been received or not and when the installation would occur. The service representative reminded me about the costs associated with opting out but she could not find any record of my request. (She told me the cost was \$44 to execute an exchange and there would be a monthly fee of \$11. This did not agree with the information enclosed with the opt out form.)

December 15, 2023

After multiple transfers and repeated disconnects, I was unable to get access to the Customer Connections Group. I was still seeking confirmation that my request had been received. (Customer Service hours: 7-4:30 M-F)

December 27, 2023

Because she was not able to tell me if my October request had been received or processed, at my request, the service representative emailed a supervisor asking him to call me back regarding the status of my opt out request and the next available service date.

December 28, 2023

After not receiving a callback, I initiated another call. A customer service representative confirmed seeing the notes from the day before and transferred me to a Team Leader on the Escalation Line. He said he could see the RIE emails that had been sent over time internally but he had no capacity to find out if my original paperwork had ever been received. He said it would have been better for me to have sent the form by email because the paperwork could still be sitting on someone's desk. In any event, the request could take ninety days to process, if it had been received. (I do not use email due to my visual limitations.)

February 9, 2024

A customer service representative verified that the opt out form was sent out October 12th. She said she saw all the notes regarding back office contacts with various customer service personnel. She contacted a supervisor, promising a callback within a day. There was no callback.

February 15, 2024

The first service RI Energy technician came to replace my existing meter with a plastic GE meter that was not an electro-mechanical analog meter.

February 16, 2024

I called RI Energy and requested customer service document my statement as follows: "I have an AMR Opt Out application on file. On 2/15/24, I refused a replacement meter because it was not a mechanical analog meter as required."

February 21, 2024

The second service technician came to replace the existing meter with the same plastic GE model as the first. She would not let me examine the meter or copy down the identifying information. She was argumentative telling me that, "It's crazy for you to pay over \$200 a year...EMFs are everywhere.." She did finally copy the information herself, but only from the top of the unit. It was not an electromechanical non-digital, non-communicating, non- RF radiation emitting meter with absolutely no computerized components.

February 26, 2024

Over the following days, despite multiple call attempts with lengthy hold times, it was impossible to reach the RI Energy Metering Department. They were experiencing "extremely high call volumes". A customer service representative confirmed that the wait time was 24 minutes and, by my request, documented the following statement, "I have temporarily refused installation of the second meter brought to my home last week until I have verified whether or not it is actually an electromagnetic analog meter as required." I requested a call back from a supervisor. None was ever received. I gave up and there is no way to tell how many other people like me have had similar experiences and reactions.



American Academy of Environmental Medicine

6505 E Central • Ste 296 • Wichita, KS 67206
Tel: (316) 684-5500 • Fax: (316) 684-5709
www.aaemonline.org

Executive Committee

President

A.L. Barrier, M.D., FAAO-HNS
One Hospital Drive
Columbia, MO 65212

President-Elect

Amy Dean, D.O.
1955 Pauline Blvd Ste 100D
Ann Arbor, MI 48103

Secretary

Charles L. Crist, M.D.
3009 Falling Leaf Ctr, Ste 1
Columbia, MO 65201

Treasurer

James W. Willoughby, II, D.O.
24 Main St.
Liberty, MO 64068

Immediate Past President

Robin Bernhoft, M.D., FAAEM

Advisor

Gary R. Oberg, M.D., FAAEM

Board of Directors

Craig Bass, M.D.
Amy Dean, D.O.
Stephen Genuis, M.D., FAAEM
Martha Grout, M.D., MD(H)
Janette Hope, M.D.
W. Alan Ingram, M.D.
Derek Lang, D.O.
Glenn A. Toth, M.D.
Ty Vincent, M.D.

Continuing Medical Education

Chairman
James W. Willoughby, II, D.O.
24 Main St.
Liberty, MO 64068

Executive Director

De Rodgers Fox

American Academy of Environmental Medicine Recommendations Regarding Electromagnetic and Radiofrequency Exposure

Physicians of the American Academy of Environmental Medicine recognize that patients are being adversely impacted by electromagnetic frequency (EMF) and radiofrequency (RF) fields and are becoming more electromagnetically sensitive.

The AAEM recommends that physicians consider patients' total electromagnetic exposure in their diagnosis and treatment, as well as recognition that electromagnetic and radiofrequency field exposure may be an underlying cause of a patient's disease process.

Based on double-blinded, placebo controlled research in humans,¹ medical conditions and disabilities that would more than likely benefit from avoiding electromagnetic and radiofrequency exposure include, but are not limited to:

- Neurological conditions such as paresthesias, somnolence, cephalgia, dizziness, unconsciousness, depression
- Musculoskeletal effects including pain, muscle tightness, spasm, fibrillation
- Heart disease and vascular effects including arrhythmia, tachycardia, flushing, edema
- Pulmonary conditions including chest tightness, dyspnea, decreased pulmonary function
- Gastrointestinal conditions including nausea, belching
- Ocular (burning)
- Oral (pressure in ears, tooth pain)
- Dermal (itching, burning, pain)
- Autonomic nervous system dysfunction (dysautonomia).

Based on numerous studies showing harmful biological effects from EMF and RF exposure, medical conditions and disabilities that would more than likely benefit from avoiding exposure include, but are not limited to:

- Neurodegenerative diseases (Parkinson's Disease, Alzheimer's Disease, and Amyotrophic Lateral Sclerosis).²⁻⁶
- Neurological conditions (Headaches, depression, sleep disruption, fatigue, dizziness, tremors, autonomic nervous system dysfunction, decreased memory, attention deficit disorder, anxiety, visual disruption).⁷⁻¹⁰
- Fetal abnormalities and pregnancy.^{11,12}
- Genetic defects and cancer.^{2,3,13-19}
- Liver disease and genitourinary disease.^{12,20}

Because Smart Meters produce Radiofrequency emissions, it is recommended that patients with the above conditions and disabilities be accommodated to protect their health. The AAEM recommends: that no Smart Meters be on these patients' homes, that Smart Meters be removed within a reasonable distance of patients' homes depending on the patients' perception and/or symptoms, and that no collection meters be placed near patients' homes depending on patients' perception and/or symptoms.

Submitted by: Amy L. Dean, DO and William J. Rea, MD

Approved July 12, 2012 by the Executive Committee of the American Academy of Environmental Medicine

Bibliography

1. Rea WJ, Pan Y, Fenyves EJ, et al. Electromagnetic field sensitivity. *Journal of Bioelectricity*. 1991; 10(1 &2): 243-256.
2. Xu S, Zhou Z, Zhang L, et al. Exposure to 1800 MHZ radiofrequency radiation induces oxidative damage to mitochondrial DNA in primary cultured neurons. *Brain Research*. 2010; 1311: 189-196.
3. Zhao T, Zou S, Knapp P. Exposure to cell phone radiation up-regulates apoptosis genes in primary cultures of neurons and astrocytes. *Neurosci Lett*. 2007; 412(1): 34-38.
4. Nittby H, Brun A, Eberhardt J, et al. Increased blood-brain barrier permeability in mammalian brain 7 days after exposure to the radiation from a GSM-900 mobile phone. *Pathophysiology*. 2009; 16: 103-112.
5. Awad SM, Hassan NS. Health Risks of electromagnetic radiation from mobile phone on brain of rats. *J. Appl. Sci. Res*. 2008; 4(12): 1994-2000.
6. Leszczynski D, Joenvaara S. Non-thermal activation of the hsp27/p38MAPK stress pathway by mobile phone radiation in human endothelial cells: Molecular mechanism for cancer - and blood-brain barrier - related effects. *Differentiation*. 2002; 70: 120-129.
7. Santini R, Santini P, Danze JM, et al. Study of the health of people living in the vicinity of mobile phone base stations: 1. Influences of distance and sex. *Pathol Biol*. 2002; 50: 369-373.
8. Abdel-Rassoul G, Abou El-Fateh O, Abou Salem M, et al. Neurobehavioral effects among inhabitants around mobile phone base stations. *Neurotox*. 2007; 28(2): 434-440.
9. Hutter HP, Moshammer H, Wallner P, Kundi M. Subjective symptoms, sleeping problems, and cognitive performance in subjects living near mobile phone base stations. *Occup. Environ. Med*. 2006; 63: 307-313.

10. Kolodynski AA, Kolodynska VV. Motor and psychological functions of school children living in the area of the Skrunda Radio Location Station in Latvia. *Sci. Total Environ.* 1996; 180: 87-93.
11. Magras IN, Xenos TD. RF radiation-induced changes in the prenatal development of mice. *Bioelectromagnetics.* 1997; 18:455-461.
12. Ingole IV, Ghosh SK. Cell phone radiation and developing tissues in chick embryo - a light microscopic study of kidneys. *J. Anat. Soc. India.* 2006; 55(2): 19-23.
13. Phillips JL, Singh NP, Lai H. Electromagnetic fields and DNA damage. *Pathophysiology.* 2009; 16: 79-88.
14. Ruediger HW. Genotoxic effects of radiofrequency electromagnetic fields. *Pathophysiology.* 2009; 16(2): 89-102.
15. Lee S, Johnson D, Dunbar K. 2.45 GHz radiofrequency fields alter gene expression on cultured human cells. *FEBS Letters.* 2005; 579: 4829-4836.
16. Demisia G, Vlastos D, Matthopoulos DP. Effect of 910-MHz electromagnetic field on rat bone marrow. *The Scientific World Journal.* 2004; 4(S2): 48-54.
17. Lai H, Singh NP. Magnetic-field-induced DNA strand breaks in brain cells of the rat. *Environmental Health Perspectives.* 2004; 112(6): 687-694. Available from: <http://ehp03.niehs.nih.gov/article/info:doi/10.1289/ehp.6355>
18. Mashevich M, Foldman D, Kesar, et al. Exposure of human peripheral blood lymphocytes to electromagnetic fields associated with cellular phones leads to chromosomal instability. *Bioelectromagnetics.* 2003; 24: 82-90.
19. Ban R, Grosse Y, Lauby-Secretan B, et al. Carcinogenicity of radiofrequency electromagnetic fields. *The Lancet Oncology.* 2011; 12(7): 624-626. Available from: [http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045\(11\)70147-4/fulltext?_eventId=login](http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(11)70147-4/fulltext?_eventId=login)
20. Lubec G, Wolf C, Bartosch B. Amino acid isomerisation and microwave exposure. *Lancet.* 1989; 334: 1392-1393.