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Majority Report of the Committee on **HEALTH COVERAGE**, **INSURANCE AND FINANCIAL SERVICES** reporting **Ought to Pass as Amended by Committee Amendment "A" (H-210)** on Bill "An Act To Prevent Discrimination in Public and Private Insurance Coverage for Pregnant Women in Maine"

(H.P. 594) (L.D. 820)

Signed: Senators:

SANBORN, H. of Cumberland GRATWICK of Penobscot

Representatives:

TEPLER of Topsham BRENNAN of Portland BROOKS of Lewiston FOLEY of Biddeford MASTRACCIO of Sanford MELARAGNO of Auburn

Minority Report of the same Committee reporting **Ought Not to Pass** on same Bill.

Signed:

Senator:

FOLEY of York

Representatives:

BLIER of Buxton MORRIS of Turner PRESCOTT of Waterboro SWALLOW of Houlton

READ.

Representative TEPLER of Topsham moved that the House **ACCEPT** the Majority **Ought to Pass as Amended** Report.

The SPEAKER: The Representative from Topsham may proceed.

Representative **TEPLER**: Thank you, Madam Speaker. LD 820, which is the matter at hand, will allow women, regardless of their income, to make decisions about their pregnancies in consultation with their medical providers without the fear of being denied coverage.

Fifteen states already provide comprehensive coverage within their Medicaid program and eight others provide expanded coverage. The decision about whether to have an abortion is deeply personal. It involves a complex weighing of a woman's unique circumstances, her medical needs, her private morality and her own body. That is why it is a decision that must be made by a woman and her healthcare provider. More than half of the country's Medicaid-insured population are afforded broader coverage of abortion than those living in Maine. Maine women deserve the same basic healthcare that others receive across the country.

As chair of the HCIFS committee, I heard the stories of dozens of women who came forward to talk about their decisions to have an abortion and the hardships that they faced when coverage for that abortion was denied. They were honest, they were courageous, and they were heartbreaking. We heard about women dealing with addiction, women in violent relationships, women desperate to find the money to pay for an abortion, and women who were struggling to raise a family and knew they could not afford another child, and women who received tragic news about their health and their pregnancies that meant abortion was the safest option for them. I also have heard about women who experienced miscarriage and were denied coverage because of the similarities between the procedures and the medications used for miscarriage treatment as for those that are used for abortion. All of these people knew that their decision was the right one for them and for their families and for their future.

So, as you vote on this legislation, I urge you to consider the consequences of what these restrictions might mean for Maine women and their families. Thank you.

Representative MORRIS of Turner **REQUESTED** a roll call on the motion to **ACCEPT** the Majority **Ought to Pass as Amended** Report.

More than one-fifth of the members present expressed a desire for a roll call which was ordered.

The SPEAKER: The Chair recognizes the Representative from Turner, Representative Morris.

Representative **MORRIS**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. I rise today to speak in opposition to the pending motion.

Everybody in this body knows the history of this issue; the 1973 Supreme Court ruling and *Roe v. Wade* effectively legalized abortion in the United States. In the 46 years since that ruling, no issue has been more polarizing to our nation. This debate today is not about the 46-year argument over whether we are pro-life or pro-choice. To be sure, there are many people who I know and respect that have a pro-choice position. While I may take a different perspective, I can respect that those that believe the decision should be a private one for the woman based on her life circumstance. But I believe this bill goes further. I believe this bill crosses a line from being pro-choice to being pro-abortion. It seeks to require that taxpayers pay for abortions, currently not allowed with Medicaid dollars because of the Hyde Amendment.

Let's be clear what the Hyde Amendment does and what we're talking about. The Hyde Amendment does allow for coverage for abortions if the pregnancy is a result of rape, incest or there is a threat to the mother's life if she carries the baby to term. The bill asks those of us morally opposed to abortion as a method of birth control to pick up the tab. Many of the people that I know that are pro-choice object to the idea of requiring taxpayers to pay for or mandating that insurance cover what is ultimately an elective procedure, not healthcare. This bill seeks to treat abortion as just another routine medical procedure like a tonsillectomy rather than the very difficult and life-altering operation that it is.

Don't take my word for it; I encourage you to read the book *Unplanned* by Abby Johnson. Abby was the director for a Planned Parenthood clinic in Bryan, Texas. One day she was asked to take part in ultrasound-guided abortion at her clinic. After seeing the fetus on the screen, it reminded her of her own baby and after witnessing the procedure firsthand, what she saw mortified her so much that she quit her job with Planned Parenthood and became an ambassador for life.

We should also be worried about the unintended consequences of this bill. In addition to require that taxpayers pay for abortion through MaineCare, it mandates that private insurance cover abortion services as well. We heard from many people in the testimony, business owners that did not want to have to cover such a procedure.

How many Mainers will lose their health coverage because their employers don't want to be forced to pay for coverage for a procedure that they find morally reprehensible? Perhaps the most objectionable thing about this bill is the title itself. To suggest that there is some nefarious discrimination taking place, as if there should be the responsibility of the public at large or your insurance to pay for the consequence of a person's decisions is both offensive and disingenuous. If we believe that an individual is free to make their own choices, then why should we not expect them to pay for their own consequences?

For me, this issue does come down to the basic question of when does life begin. We now know that a heartbeat can be detected as early as three weeks gestation. As President Reagan once said, simple morality dictates that unless and until someone can prove the unborn human is not alive, we must give it the benefit of the doubt and assume it is alive. I urge this body to reject the pending motion. Thank you.

The SPEAKER: The Chair recognizes the Representative from Harpswell, Representative McCreight.

Representative **McCREIGHT**: Thank you, Madam Speaker. Madam Speaker, Women and Men of the House, I stand to ask your support of LD 820, a bill that requires that any insurer, public or private, that covers pregnancy care must cover the full range of pregnancy care. That means prenatal, postnatal, and abortion services.

This bill puts an end to using a women's access to insurance coverage as an unequal discriminatory barrier to a safe, legal abortion. I'll repeat something you've certainly heard before; no one, no politician, no insurance company should ever come between any person and their healthcare provider in making personal medical decisions. This is just as true for decisions about whether to continue a pregnancy as it is for other healthcare decisions. By putting restrictions on some people's access to medical care through selective insurance coverage, we've created a system that opens the door for those with means to pay while slamming it for those less fortunate. It's unfair and it's discrimination.

Polling was done last month to get the latest opinions on access to abortion services from Maine voters. Sixtv-five percent personally believe abortion should be legal in all or most cases and regardless of their personal feelings a majority of voters say that if a woman has decided to have an abortion the experience should be supportive, that was 83%, affordable, that was 79%, available in her community, and that was 79%, without added burdens, 76%, and covered by her insurance, and that was 70% of Mainers. Put simply, a majority, or 76% of Mainers, believe women should be able to put their own medical decisions about abortion without politicians or insurance companies denying care. In fact, more than seven in ten Mainers believe politicians should not be allowed to deny a woman's healthcare coverage for abortion just because she's poor and that it's vital that a woman be able to consider all her options, including abortion, no matter what type of health insurance she has.

Regardless of age, gender, party, or region, a majority of Mainers agree that politicians and insurance companies should not be denying women coverage for abortion services. Equal coverage for the full range of pregnancy care including safe, legal abortion, is not only the right thing to do, it's the smart thing to do in terms of health and in terms of cost. We support people on their path to self-sufficiency and economic security by removing barriers and increasing the option people have in achieving their personal goals, whether it's about finishing high school or college, continuing their education even further, following their chosen career path or whether and when to start a family. Abortion is legal in 50 states. Blocking access to this legal, safe medical procedure is merely thinly-veiled discrimination. The Hyde Amendment was passed in 1976 specifically to prevent federal Medicaid coverage of abortion except in extreme circumstances, which you'd still have to prove and fight for. This policy by design and intent singles out people in poverty, especially people of color, who are eligible for Medicaid coverage by specifically preventing them from access to abortion care. Passage of LD 820 will end this discriminatory policy and bring full access to pregnancy care to Maine people. Fifteen states have already chosen to use their state healthcare resources to provide abortion care and another seven have expanded coverage for circumstances beyond the Hyde Amendment's restrictions.

Before abortion was legal, hospital wards were full of patients who had tried to end pregnancies by any means they could find; toxic chemicals, coat hangers, physical violence. Many developed severe infections and though some recovered many became infertile or died. When abortion was declared legal in the United States, we finally had access to safe abortions without needing to resort to those dire consequences. When women are denied access to abortion and forced to continue a pregnancy, they are much more likely to live in poverty, to experience serious health complications from the pregnancy, to have less healthy babies, to stay in violent relationships where forced pregnancy is used to keep control and to suffer from mental health disorders. Denying coverage isn't just discriminatory, it causes lasting consequences. Instead of denying access to abortion, let's stop interfering in personal medical care decisions and let's make sure we are increasing access to the safest, most effective contraception, to family planning services, to accurate information about sexual health and reproduction. We know that reducing unintended pregnancies reduces the number of teen pregnancies, reduces the number of babies with neonatal abstinence syndrome due to drug exposure, reduces the number of abortions and benefits our entire society by reducing child poverty and long-term consequences that cause so much in lost personal and economic potential. Choosing whether and when to become a parent is one of the most important decisions we will make, and it's vital that we have the opportunity to consider all the options available to us, no matter our income or our type of insurance. I urge you to support the Ought to Pass motion on LD 820. Thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Knox, Representative Kinney.

Representative **KINNEY**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. It's no secret that I'm a pro-life conception to natural death legislator but this bill is not about whether or not abortion is legal in the eyes of man because that ship sailed many years ago.

This bill requires the Department of Health and Human Services to provide coverage to a MaineCare member for abortion services. The bill provides that abortion services that are not approved Medicaid services must be funded by the State. It also requires that health insurance carriers that provide coverage for maternity services also provide coverage for abortion services. It applies this requirement to all health insurance policies and contracts issued or renewed on or after January 1, 2020, except for those religious employers granted an exclusion of coverage. What about religious employees or religious taxpayers that have to foot this bill?

Having said that, we can consider these points. We know the Hyde Amendment is a federal legislative provision that precludes the use of federal funding to pay for abortions except to save the life of the mother or if the pregnancy is due to rape or incest. Former U.S. Surgeon General, C. Everett Koop, once said protection of the life of the mother as an excuse for an abortion is a smokescreen. In my 36 years of pediatric surgery, I have never known of one instance where the child had to be aborted to save the mother's life. If toward the end of pregnancy complications arise that threaten the mother's health, the doctor will induce labor or perform a cesarean section. The doctor's intention is to save the life of both the mother and the child. The baby's life is never willfully destroyed because the mother's life is in danger. So it's interesting that this bill anticipates that the federal funding will not be available and thus our Maine citizens will foot the bill.

LD 820 also forces health insurance carriers that provide coverage for maternity service provide for abortion services. Fair is fair, right? Well, we know the Supreme Court has looked at the so-called discrimination aspect of funding live birth and abortion. We know that the Supreme Court has said it is perfectly legitimate to support life and perfectly correct to not support abortion as abortion is inherently different from other medical procedures because no other procedure involves the purposeful termination of a potential life. What if that's the person who finds a cure for pancreatic cancer or diabetes, heart disease, Alzheimer's -- sorry. The list goes on and on.

This is not about healthcare. A life is taken every time an abortion is performed and just because it's legal doesn't make it right. It's an extreme form of birth control.

It's not even about access because it's so accessible in Maine, so easily available to get an abortion in Maine that people are traveling from at least 18 different states including Hawaii - I mean, you can't get much farther away from Maine than Hawaii - and Canada because it's so readily available here.

The Constitution of the State of Maine has religious freedom -- this is Section 3, religious tests prohibited, religious teachers, all individuals have a natural and unalienable right to worship almighty God according to the dictates of their own consciences and no person shall be hurt, molested, or restrained in that person's liberty or estate for worshipping God in the manner and season most agreeable to the dictates of that person's own conscience nor for that person's religious professions or sentiments provided that that person does not disturb the public peace nor obstruct others in their religious worship and all persons demeaning themselves peaceably as good members of the State shall be equally under the protection of the laws and no subordination nor preference of any one sect or denomination to another shall ever be established by law nor shall any religious test be required as a qualification for any office or trust under the State and all religious societies in this State, whether incorporate or unincorporate, shall at all times have the exclusive right of electing their public teachers and contracting with them for their support and maintenance. Again, LD 820 violates the Maine Constitution.

On December 5, 2018, I signed a little paper and I held my hand up and swore; I, MaryAnne Kinney, do swear I will support the Constitution of the United States and of this State so long as I shall continue a citizen thereof, so help me God. I, MaryAnne Kinney, do swear I will faithfully discharge to the best of my abilities the duties incumbent on me as a Representative in the 129th Legislature of the State of Maine according to the Constitution and laws of this State, so help me God.

In closing, we know that abortion is not healthcare. We know there is no crisis causing the legislation to come forward and we know, unfortunately, abortions are very easy to get. At this point, Madam Speaker, I make a motion to Indefinitely Postpone LD 820 for it's unconstitutional.

The same Representative moved that the Bill and all accompanying papers be **INDEFINITELY POSTPONED**.

Representative MOONEN of Portland **REQUESTED** a roll call on the motion to **INDEFINITELY POSTPONE** the Bill and all accompanying papers.

More than one-fifth of the members present expressed a desire for a roll call which was ordered.

The SPEAKER: Now, I have in queue about 20 people. I'm assuming that the people in queue want to speak on the roll call? If so, you may leave your name in queue and I will continue to call on you. So, the pending question is now Indefinite Postponement and the Chair will continue with the Members who are in queue. The Chair recognizes the Representative from Portland, Representative Moonen.

Representative **MOONEN**: Thank you, Madam Speaker. Madam Speaker, Women and Men of the House, I rise in opposition to the pending motion and in support of LD 820 for a number of reasons, primarily that I believe that a woman's healthcare should be between her and her provider and that the government and politicians should not be involved.

The SPEAKER: The Representative will defer. The Chair recognizes the Representative from Dixfield, Representative Pickett, and inquires as to why he rises.

Representative **PICKETT**: Madam Speaker, Point of Order; I believe that the motion on the floor is to indefinitely postpone and all testimony should be given toward that; correct?

On **POINT OF ORDER**, Representative PICKETT of Dixfield asked the Chair if the remarks of Representative MOONEN of Portland were germane to the pending question.

The SPEAKER: The Chair will answer that the Chair inquired to Members if they would like to continue debate after the indefinite postponement was offered and offer to Members to please remove their names from the queue if they would like to vote immediately. Because a very large number of people are still in queue, the debate continues on the motion at hand, which is indefinite postponement. The Representative may continue.

The Chair advised Representative PICKETT of Dixfield that the remarks of Representative MOONEN of Portland were germane to the pending question.

Representative **MOONEN**: Thank you, Madam Speaker. I am opposed to the motion to Indefinitely Postpone because I support this bill.

The SPEAKER: The Representative will defer. The Chair recognizes the Representative from Caribou, Representative DeVeau, and inquires as to why he rises.

Representative **DeVEAU**: I have a question to the previous motion.

The SPEAKER: The Representative may proceed with his question.

Representative **DeVEAU**: My understanding is this is an undebatable motion.

On **POINT OF ORDER**, Representative DeVEAU of Caribou, regarding the remarks of Representative MOONEN of Portland, asked the Chair if the issue before the House was up for debate.

The SPEAKER: The Chair would answer in the negative. The motion is debatable. The motion is Indefinite Postponement.

The Chair advised Representative DeVEAU of Caribou that a motion to Indefinitely Postpone is up for debate.

The SPEAKER: The Representative may proceed.

Representative **MOONEN**: Thank you, Madam Speaker. I am opposed to the motion to indefinitely postpone because I support LD 820 because I believe a woman's healthcare should be between her and her doctor and that government and politicians should not get involved. Also, I support LD 820 because the current restriction violates our state's constitution. Every pregnant person faces two constitutional protected choices; to continue a pregnancy to term or end it. Regardless of her decision, it is undisputed that someone who is pregnant will need medical care. In contrast to the broad coverage provided to MaineCare recipients who continue their pregnancies. DHHS withholds abortion coverage from MaineCare eligible people in nearly all circumstances. Our law court has recognized that the right to make intensely personal decisions about one's body, one's health, and one's intimate relationships free from unwarranted government interference is a fundamental constitutional right protected by the Maine The decision to continue or terminate a Constitution. pregnancy lies at the core of that right. By providing coverage for all necessary medical expenses for patients who decide to continue a pregnancy but withholding coverage for patients who decide to terminate their pregnancy, the State imposed coercion on this most personal of decisions. Forcing or coercing a woman to carry her pregnancy to term against her will, delaying her access to necessary abortion care, and/or compelling her to make dangerous sacrifices in order to afford abortion jeopardizes her right to pursue and obtain her own liberty and safety.

In addition, current MaineCare restriction the discriminates against Mainers in violation of Article I, Section 6-A of the Maine Constitution because poor and low-income people will receive MaineCare coverage for the healthcare they need only if they exercise their right to continue their pregnancies and not if they exercise their right to end the pregnancy. This is a textbook example of unequal treatment of similarly-situated individuals solely on the basis of the exercise of one constitutional right as opposed to another. Courts in other states have found that identical restrictions violate similar or identical prohibitions on discrimination by covering only one of two mutually exclusive options. For a patient population that are dependent on MaineCare, the State takes the decision away from the patient, who is in the best position to decide what is best for them. LD 820 corrects that wrong that has harmed low-income people in Maine for decades. I urge you to follow my light in opposition to this motion and in support of this bill.

The SPEAKER: The Chair recognizes the Representative from Oxford, Representative Dillingham.

Representative **DILLINGHAM**: Thank you. I have a question for the Chair.

The SPEAKER: The Representative may proceed.

Representative **DILLINGHAM**: It is my understanding that we are currently debating the motion of Indefinite Postponement. Members can continue to debate that motion but if we would like to go forward and hold the vote on the indefinite postponement measure, should it fail, we would then be back to the motion of Ought to Pass and Members could then continue to debate the Ought to Pass motion; is that correct?

The SPEAKER: The Chair would answer in the affirmative. So when the indefinite postponement motion was made, that did take precedence over the previous motion which was Ought to Pass. Because there are members who are in queue, we are now debating that new motion, the Indefinite Postponement motion. If Members would like to hold a vote on the motion for Indefinite Postponement, Members

would need to de-press their button so that I may go ahead and call that vote.

The Chair recognizes the Representative from Portland, Representative Moonen.

Representative **MOONEN**: Thank you, Madam Speaker. I would like to ask a question through the Chair.

The SPEAKER: The Representative may proceed.

Representative **MOONEN**: Thank you, Madam Speaker. So, if we want to vote on this motion to Indefinitely Postpone, it makes sense for Members to de-press their button to end the debate on Indefinite Postponement so we can vote on it and then return to debating on the other motion should Indefinite Postponement fail.

The SPEAKER: The Chair would answer in the affirmative.

Representative **MOONEN**: Thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Knox, Representative Kinney.

Representative **KINNEY**: Thank you, Madam Speaker. May I pose a question through the Chair?

The SPEAKER: The Representative may proceed.

Representative **KINNEY**: Thank you. My question would be through the Chair for the Representative from Portland, he mentioned a section of the Constitution in Article I and I think I misheard the section that he referred to where abortion was specifically spelled out in the Constitution and I was wondering if I could have him just repeat that section of Article I.

The SPEAKER: The Representative from Knox, Representative Kinney, has posed a question to the Representative from Portland if he would like to answer.

The Chair recognizes the Representative from Portland, Representative Moonen.

Representative **MOONEN**: Thank you, Madam Speaker. I rise to answer the question of the Member from Knox. I said that the current MaineCare restriction discriminates against Mainers in violation of Article I, Section 6-A of the Maine Constitution. Thank you.

The SPEAKER: A roll call has been ordered. The pending question before the House is Indefinite Postponement of the Bill and all accompanying papers. All those in favor will vote yes, those opposed will vote no.

ROLL CALL NO. 69

YEA - Alley, Andrews, Arata, Austin S, Bickford, Blier, Bradstreet, Campbell, Corey, Costain, Curtis, DeVeau, Dillingham, Dolloff, Drinkwater, Faulkingham, Fecteau J, Foster, Griffin, Haggan, Hall, Hanington, Hanley, Harrington, Head, Hutchins, Javner, Johansen, Keschl, Kinney, Kryzak, Lockman, Lyford, Marean, Martin J, Martin R, Martin T, Mason, Millett, Morris, Nadeau, O'Connor, Ordway, Perkins, Perry J, Pickett, Prescott, Reed, Rudnicki, Sampson, Sheats, Skolfield, Stanley, Stearns, Stetkis, Stewart, Strom, Swallow, Tuell, Verow, Wadsworth, White B, White D.

NAY - Ackley, Austin B, Babbidge, Babine, Bailey, Beebe-Center, Berry, Blume, Brennan, Bryant, Caiazzo, Cardone, Carney, Cloutier, Collings, Cooper, Crockett, Cuddy, Daughtry, Denk, Dodge, Doore, Doudera, Dunphy, Evangelos, Farnsworth, Fay, Fecteau R, Foley, Gattine, Gramlich, Grohoski, Handy, Harnett, Hepler, Hickman, Hobbs, Hubbell, Hymanson, Jorgensen, Kessler, Kornfield, Landry, Madigan C, Mastraccio, Matlack, Maxmin, McCrea, McCreight, McDonald, McLean, Melaragno, Meyer, Moonen, Morales, O'Neil, Paulhus, Pebworth, Peoples, Perry A, Pierce T, Pluecker, Reckitt, Riley, Riseman, Roberts-Lovell, Rykerson, Schneck, Sharpe, Sylvester, Tepler, Terry, Tipping, Tucker, Warren, Zeigler, Madam Speaker. ABSENT - Brooks, Cebra, Craven, Grignon, Higgins, Ingwersen, Stover, Talbot Ross, Theriault.

Yes, 63; No, 77; Absent, 9; Excused, 1.

63 having voted in the affirmative and 77 voted in the negative, with 9 being absent and 1 excused, and accordingly the motion to **INDEFINITELY POSTPONE** the Bill and all accompanying papers **FAILED**.

The SPEAKER: Before we go further with debates and as the queue re-forms, I will remind Members that if they are in the chamber they need to vote and if they are not in the chamber when the bell rings they need to come in and vote. In this instance, we held the vote open but it is the responsibility of Members to be in their seats to vote and in the future the vote will close and if Members have not voted who are in their seats, I will call on those Members to stand up and deliver their vote.

The Chair recognizes the Representative from Dixfield, Representative Pickett.

Representative **PICKETT**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. I stand today in opposition to the pending motion.

For some time now, the abortion advocates and pro-life advocates have differed with but also tolerated each other's position. Advocates for the abortion side recently were still talking about abortion being safe and rare. They told us that as long as we do not force someone to have an abortion or to pay for one, we should not deny them their right to have an abortion. That philosophy, however, seems to have changed or possibly even disappeared as we confront multiple overreaching bills in this legislative session. LD 820 would thus force Maine taxpayers to pay for abortions.

A recent Marist College poll tells us that 61% of Americans do not support taxpayer-funded abortion and that includes 40% of Americans who identify as pro-choice. So, we can clearly see that there is no call from the public for this move to generate taxpayer-funded abortions. In testimony at the public hearing, we did not hear that the Maine women were not allowed to get an abortion. Perhaps they might have to wait a day or even travel a bit but, again, why do we need taxpayer monies for a service that is already available to them.

Now, if you take time to study the abortion industry including the giant organization known as Planned Parenthood, you will find that they generate an amazing amount of funding. So, again, I ask you, Madam Speaker, why must taxpayers, including a strong majority who are against abortion, fund staffing and facilities for this business and industry.

Abortion is not healthcare. Do not be fooled. In fact, the Supreme Court has told us the State has a clear interest in raising babies. Proponents gave us no numbers or feedback that demonstrated this legislation is needed. LD 820 is clearly part of an agenda run amok this legislative session, in my opinion. If there is a positive, Maine people, I believe, are standing up and taking notice and seeing what is actually going on here.

I believe, personally, that life begins at conception and I do not want my taxpayer dollars to pay for taking the life of a child. That's my own personal belief and I do not want my taxpayer dollars paid in any way, shape or form for that procedure. So I hope, Madam Speaker, you and others here in this chamber will join me in defeating this motion. It's not a motion about rights of women, it's a motion about taxpayers having to take and pay for something that they do not believe in nor do they want and having it legislated to them that your tax dollar will go for it. Thank you, Madam Speaker. The SPEAKER: The Chair recognizes the Representative from Saco, Representative O'Neil.

Representative **O'NEIL**: Madam Speaker, I rise in support of the legislation before us.

The issue before the chamber is difficult to discuss. The decision of when and whether to become a parent is one of the most personal decisions we make in our lives. Each of us has formed a position on this issue that is integral to our values and our personal experiences. When a woman must make such an important decision as when or whether to become parent, it is essential that each woman is able to make her decision with all options available to her, regardless of how little she earns or how she is insured.

When the State or insurance companies elect to cover one healthcare option and deny another, the right to make such a decision personally, privately, and in the interest of one's own health and safety is taken away. We've heard that when a woman is denied access to an abortion once she has already made the decision to end her pregnancy, that woman is four times more likely to fall into poverty. She and her child are more likely to experience serious health complications during her pregnancy and she is more likely to stay tethered to an abusive partner.

This last point was explained when the Maine Coalition to End Domestic Violence testified in support of this legislation. I'm going to share part of that testimony here because I think it's important to hear. A woman's reproductive health is often a target of control for an abusive man. Some abusers will use deceptive tactics to force a woman to become pregnant against her will. A man might poke holes in condoms, hide his partner's pills or keep her from her medical appointments. In these cases, an abusive partner uses the child to control the woman and to limit her options to escape. It's an unfortunately solid plan from his perspective since having a child together will keep them connected for many years. Such behavior is called reproductive coercion and it has a real impact on the rates of unintended pregnancy. Forty percent of women who have been exposed to abuse report that their pregnancy was unintended compared to just 8% of pregnant women who have not experienced abuse. The coalition's testimony continues. So many women I have spoken with have named an unexpected pregnancy as the reason their escape plans fell apart, saying it is like he always just knew when I was getting ready to leave. If a woman does manage to get out, the abuser will use the connection forged through the child to continue his harassment, coercion and violence, using visitation, court processes and any other tool at his disposal. This is a pattern that the coalition sees over and over again. At the same time, some abusive partners are more violent during pregnancy. Homicide is the second leading cause of traumatic death for pregnant and recently pregnant women in the U.S., accounting for 31% of maternal injury deaths. The safety risks are too real. Domestic abuse is widely recognized as among the most pressing issues facing women but often our solutions to the problem are developed in isolation, heavily focused on the criminal justice system, without adequate consideration for the framework of supports, services and needs that help us all live safe and secure lives. Autonomy over one's own body and the ability to decide when and if to have a child are central to survivors' wellbeing and cannot be separated from other efforts to help them live and thrive in safety and freedom. For so many women, family planning and abortion services are crucial parts of their safety plan as they seek to lead more independent, free and self-sustaining lives both during and after abuse. A survivor's ability to decide whether or not to

have a child has so much to do with her ability to manage the risks posed by her abusive partner. It is also key to being able to manage one's long-term economic security, which is what survivors cite most often as the barrier that keeps them trapped by their abusive partner.

I want to share my own story here, or a couple of stories. When I was in college, I was raped twice. Sadly, this experience is not uncommon for young women. It was at a time when I was not ready emotionally or financially to have a child and I faced the prospect of being made pregnant by people with whom I had no interest in raising a child. Aside from the trauma I experienced, it was terrible to consider that something might happen to my body and my future that I didn't want. My access to emergency contraception prevented me from having to make a different decision. I couldn't think very clearly at the time but I had a friend who helped me access it. But I know every woman does not have the opportunity to make the choice that I made for a host of reasons, especially in the instance of deception by an abusive partner. It scares me to think of a woman having that choice taken away from her simply because she doesn't have the right insurance coverage or she doesn't have the money to access the appropriate healthcare procedure.

I have also had an experience with domestic abuse and being controlled by a partner. It was terrifying. It was very difficult to remove myself from the situation and to get myself back on my feet. When I identified that I was unsafe, it took me over a year and a half to exit the relationship safely. Over many months, I took small steps to remove important belongings from our home so that it wouldn't be noticed. More than once when I removed a few small things and brought them to my mom's house, my partner became suspicious and it led to a frightening situation. I can't imagine trying to remove myself from a dangerous situation like that when a pregnancy or a child is part of the picture. I can't imagine how scarv and difficult it would be to get out. That's what this comes down to for me; making sure that women have every healthcare choice available to them so that they can make determinations about the trajectory of their own lives, safety, and health, regardless of their insurance coverage and circumstance. Thank you.

The SPEAKER: The Chair recognizes the Representative from Winter Harbor, Representative Faulkingham.

Representative **FAULKINGHAM**: Thank you, Madam Speaker. Madam Speaker, Ladies and Gentlemen of the House, I rise in opposition to the pending motion.

I'd like to read an excerpt from the book *Liberty Defined* by Dr. Ron Paul, an OB/GYN who delivered more than 4,000 babies. The fact is that the fetus has legal rights, inheritance, a right not to be injured or aborted by unwise medical treatment, violence or accidents. Ignoring these rights is arbitrary and places relative rights on a small living human. The only issue that should be debated is the moral one; whether or not a fetus has a right to life. Scientifically, there is no debate over whether a fetus is alive and human. If not killed, it matures into an adult human being. It is that simple. So, the timeline of when we consider a fetus human is arbitrary after conception, in my mind. On this matter, I agree with Dr. Paul. The science is settled.

There are many more moral arguments against abortion but that isn't even what we're debating today. Today, we are debating who bears the responsibility for paying for elective abortions, so let's lay it out. In Maine, abortions are legal and easily accessible. There are nine facilities that perform abortions throughout the state. Abortions are affordable, ranging from \$500 to \$1,000. Abortions that are in the case of rape, incest, or the safety of the mother are covered by DHHS Rule 90.05 by insurance and MaineCare already.

Maine abortion laws are not discriminatory. The courts have ruled on this. So why is this bill even brought forward? No matter what side of the abortion issue you are on, we should all agree that this isn't the proper role of government to fund elective abortions. Right now, elective abortions are rare and affordable. Why? Because the government doesn't fund them. If government starts funding elective abortions, first, the price will rise, second, the frequency will increase. We should all agree that these are bad outcomes. Please join me in voting no on the motion.

The SPEAKER: The Chair recognizes the Representative from Biddeford, Representative Foley.

Representative **FOLEY**: Madam Speaker, Women and Men of the House, I rise today in support of LD 820.

As a member of the Health Coverage, Insurance and Financial Services Committee, I listened closely to the testimony at the public hearing on this bill. We heard from faith leaders, medical providers, experts on sexual assault and domestic violence, who all supported the bill. But, most importantly, we heard from women who had made the decision to have an abortion and how insurance denying coverage harms them and their families.

It was clear that these women had carefully considered their decision. Some were already parents, others were just starting a career. Some were fortunate enough to have insurance cover their abortion, others were faced with desperate choices between borrowing money from family, holding off on paying their rent or delaying care.

We heard from women who were so desperate they considered harming themselves because they knew they wanted an abortion but didn't know how they would pay for it. We heard from a woman who after receiving devastating news about her pregnancy had to travel across the country to get the care she needed, and pay tens of thousands of dollars for medical treatment. It was heartbreaking. I believe we can do better for Maine women and this bill is one step towards that end.

LD 820 is an issue of equity and access. Abortion is a safe and legal medical procedure. It is part of the full spectrum of healthcare choices that are available to women. By limiting coverage or refusing to cover this service, we are denying women access to the full range of healthcare that they deserve. For those who may not know, the cost of a medication abortion is about \$500 out of pocket and the cost of an aspiration abortion may be \$1,000 or more. A recent Federal Reserve Board survey of Americans showed that 40%, four in ten Americans, would have trouble finding the cash to cover a \$400 unexpected emergency expense.

LD 820 is about equity and access so that people's healthcare choices are not limited by how much money they make or what their background is. I hope that you will follow my light in supporting and respecting the right of women to have access to the full range of healthcare services. Thank you.

The SPEAKER: The Chair recognizes the Representative from Caribou, Representative DeVeau.

Representative **DeVEAU**: Thank you, Madam Speaker, fellow Representatives of the House. I rise today in opposition to LD 820.

I had a testimony typed up by my aide because I wanted to make sure that today especially I was going to be politically correct and I'm already sensing that I'm going to be swaying from that testimony because of some things that I've been hearing from both sides of the aisle. Some of the things that I've been hearing, while they may be true, really have to sit down and look at the totality of the issues. The section in our constitution, Article 1.6 and 6A, if you read it, you can actually see that it plays on both ends of this protection, whether it is as the Representative from Portland said it favors the abortion bill, I say it actually supports the taxpayer in the opposition to this. I also realize that generally as some side discussion that we've had here, a lot of these bills have already been decided on November 7th and this is probably one of those bills that's already been decided and we've been up here speaking for a number of hours or, excuse me, about an hour or so, and the discussion is something that's probably not going to sway either party.

But something that I did want to make notice of, and my son who is 15 is very interested in what I'm doing down here because he misses dad. He's a lot smarter than I am. He understands the Constitution; he's read both the State's and the U.S. Constitution and a lot of times he'll ask me questions that are beyond what I would expect from a 15-year-old. And some of the things he asks when we're talking about, you know, some of these tough bills that are coming up such as this one is; well, wait a second, dad, why is it that it's the taxpayer's responsibility to pay for someone who had sex? Now, this is -- he's 15, so we've had the talk and then he's had the many -- the multiple versions that's taught and spoke of at school about the talk. So he understands the process and how things happen and he says well, isn't it something that's pretty simple to fix, dad? I said well, what do you mean, son? He says if I can't afford the new game on my computer, I work to make sure that I go and get it and then I make a choice of whether or not I'm going to do it. He said if a person is in love with somebody and they can't afford a child, shouldn't they not have sex? And I said well, son, that would be putting the responsibility back on those individuals and I said to me, as a commonsense person, or I like to think commonsense, we have gotten away from making the individual or individuals in this case responsible for their actions. Now, I agree, and one of the things, and I am using my notes, Maine currently has programs in place through Planned Parenthood as well as Obama's Affordable Care Act to allow greater access to birth control with little to no expense to the patient. The SAFE program helps fund abortions for women who cannot pay the full costs. There are a number of families looking to adopt children and the list of alternatives to abortion could go on. I'm not opposing women's rights, and this is what I've said, because I don't, but it's a right to choose and it's about what makes sense for the Maine taxpayer.

So in thinking back to my son who's 15, who says why is it that it's the taxpayer's responsibility when these adults are having this? And I said well, son, there's cases where, you know, something's happened, like somebody's been raped, due to incest or -- I'm sorry, the three big ones that everybody talks about. And he says yeah, but, dad, is that what this bill is really aimed at? And I said no, son, because those are already covered. The State will cover those, the Feds will cover those, there's organizations that will cover those. And he asked me again, then why is it the taxpaver's responsibility? Son, I don't know. I said I'm new down there, to me this doesn't make sense for me to be paving taxes because somebody can't make a good choice on their own because this is an elective procedure. I think the Bangor Daily quoted me on what my testimony in the public hearing was, I won't repeat it, but it's an elective procedure. And he says okay, then, let me ask you

again, dad; why are we paying for it? He said I thought our taxes was to go and fix roads. And I said yeah, that's one of the things that we use it for. He said but why is the Department of Transportation now saying that they can't do a lot of the repairs to the roads and I said because right now our budget's, you know, we're working on our budget, we're trying to get it somewhere where it's manageable, and there's going to be cuts. Okay, well, what about, you know, the, you know, some other programs? I said those are things we have to look at and take priorities on those to determine if we're going to be funding those, appropriation handles that. He kept coming back for almost a half hour back to the one point; why is it the taxpayer's responsibility to pay for these abortions? It shouldn't be. Planned Parenthood is one of the largest businesses out there and nationally that has huge amounts of money in their coffers that is given to them from people who are generous in donations, through other means as well. If they're that well off that they can make so many donations to political PACs and things like that, then why aren't they putting it to what the intended purpose was.

And I just want to point out one last thing. I received some information today in reference to another - okay, I got to be careful about this one - about a comment that was made So, during the public hearing, there was some before. questions on the number of testimonies that were given and one of the groups fact-checked a lot of this stuff for me and the number of testimonies given was 781 testimonies. That way, they looked at what was submitted via email and what was submitted in the House -- excuse me, in the committee when they handed it off. The numbers against were 623, the numbers for were 151. That's 80% of the people who testified that day on that public hearing, over 80% of them were against this bill. These are the people that we, this body here, represent and if 80% of them are telling us that they do not approve of this bill then who is it for -- who is it from us? Who are we to say screw you guys, we're going to pass it --

The SPEAKER: The Representative will defer. The Representative will please refrain from using that language on the floor of the House.

The Representative may proceed, with that warning.

Representative **DeVEAU**: And I apologize. So, a couple other things that I wanted to mention on that; there was only seven that were not for or against the bill. And the last thing I want to mention is that there was question of well how many -there was only two times that the religious exemption was discussed on this and I want to make a point that it was actually 125 times that it was mentioned. Thank you.

The SPEAKER: The Chair recognizes the Representative from Falmouth, Representative Pierce.

Representative **PIERCE**: Thank you, Madam Speaker. Madam Speaker and Fellow Members, I rise before you today in support of LD 820 because I fundamentally believe the decision about a pregnancy is best left to a woman in consultation with her healthcare provider.

Abortions need to be a safe, affordable medical procedure for a woman to consider if and when she needs it and there are countless reasons why someone might make the decision to end a pregnancy. It could be she is not ready to become a parent, it could be she is already a parent and not prepared to have another child, it could be she is excited to become a parent but learns that her health will be compromised by her pregnancy, or she receives tragic news that a baby she was planning for is seriously sick. All of these circumstances, insurance coverage is frequently denied.

When I was pregnant, I remembered my provider walking me through a myriad of tests that I would take to determine if the pregnancy was healthy. I remember the pangs of anxiety as I waited for the results and the relief when the news was good. Those memories become small blips in a pregnancy, quickly replaced by joys and excitement of parenthood. But that is not the case for everyone. Erin Wolf, a constituent of mine, shared her story when testifying in support of this legislation. She talked about the miscarriages she experienced before becoming pregnant with their third child. She was thrilled and her family was very excited to grow. But at 16 weeks, she had some routine lab work done and the results were slightly elevated. Her provider reassured her that this can happen, she was doing everything right, and not to worry. But the results led to other tests and increasing anxiety for Erin and her husband. She couldn't sleep, she couldn't eat, as she counted down the days until the final test would hopefully make this all go away and she could focus on the months ahead. Sadly for Erin and her family, it wasn't good news. His condition was dire, the baby's. He had the most severe type of spina bifida. It was the worst news for a couple but after careful consideration Erin, with the support of her husband and the medical provider, made the decision to end the pregnancy. It wasn't easy, and my heart goes out to Erin and her family.

Sharing her story during the public hearing was the first for her. Like many of the women who spoke for the first time about their abortions, she was nervous and worried about the response, but she was committed for speaking not just for her family but for the countless other women who could not be there that day. Erin was fortunate. Erin had insurance. But if she had been insured by Medicare or another plan, she would've been forced to pay out of pocket \$15,000 to receive the medical care she needs. That would've been a punishing end to an already very sad story. For Erin and other women in this situation, I urge you to follow my light. Thank you.

The SPEAKER: The Chair recognizes the Representative from Carmel, Representative Reed.

Representative **REED**: Thank you, Madam Speaker. Thank you, Ladies and Gentlemen of the House. I too rise in opposition to the pending motion.

There is no way under the sun that taxpayers should be expected to fund abortions. It has been consistently unpopular all across the United States, with more than 60% of the registered voters in opposition to funding abortions. Even the federal government has long opposed the funding of abortions because many Americans don't believe in it. I have always been pro-life and have never understood how we can take a life of an unborn child and call it freedom. This is what relativism and secular humanism does to a nation. Once you take God out of anything, it's all downhill from there.

To me, this is an attack upon the First Amendment right of freedom of religion. This law before us is not about medical necessities or healthcare or about a compelling interest, it's about power. It has often been said that the power to tax is the power to destroy. This bill presently before us runs roughshod over a Christian's conscientious objection to abortion and, to add insult to injury, we are being asked to fund something that many of us don't even believe in. Are there any rights beside the rights of progressives? Will there be anything left in Maine?

The SPEAKER: The Representative will defer. The Chair will issue a warning to the Representative to please remember not to impugn the motives of other Members. The Representative may proceed.

The Chair reminded Representative REED of Carmel that it was inappropriate to question the motives of other members of the House.

The SPEAKER: The Representative may proceed.

Representative **REED**: Will there be anything left in Maine that will be untaxed after this session? And what about the enormous cost of this to the taxpayers? I remember a few months past my 13th birthday, my father and brothers and I were shingling the old farmhouse and right out of the blue my father said, you know, son, if you're going to dance, you have to pay the fiddler. I'll be very honest about that, I didn't have the foggiest idea of what he was talking about at that time. But as I got older, I came to better understand what he was trying to tell me. Ordinarily a very quiet man, this is my father's way of telling me that my decisions that I would make would have consequences. I wish that he were here today so that I could tell him what he told me then is no longer true because here today we are saying go ahead and dance and don't worry about that fiddler because we're going to stick the taxpayers with the bill to pay him.

This is a bad idea. I just hope all across Maine the taxpayers are watching closely what is going on here in this State House. If they aren't upset over this bill, they probably won't be upset over anything. I'm opposed to abortion because every child born or unborn is a gift from God. Life begins at conception regardless of what the secular humanist might say. God knows the unborn child even while he or she is in the womb. I hope that many of you here today will stand up for the taxpayers and for those who are pro-life and vote to defeat this bill. Thank you, Madam Speaker, and thank you Ladies and Gentlemen of the House.

The SPEAKER: The Chair recognizes the Representative from Brunswick, Representative Tucker.

Representative **TUCKER**: Thank you, Madam Speaker and Ladies and Gentlemen of the House. Every family has its secrets and its tragedies. One of my sisters-in-law almost died because safe legal abortion was unavailable at that time and she went underground to find an unscrupulous and shifty person to perform a so-called back alley abortion. She was in hiding because of the shame, afraid to let her mother and sisters know. After returning from the procedure, she started bleeding. She and her boyfriend tried to hide the bleeding until the landlady found out and forced them to go to the emergency room. She was hemorrhaging and almost died. Luckily, she survived, married her boyfriend, and had two healthy kids. But this near-death experience scarred her emotionally.

A few years after that all happened, the 1973 Roe v. Wade decision came down. I was in law school at the time and when the decision came down, everybody was reading and discussing it. But there were only two of 90 students in the class who were women. The legal banter in the lunchroom was stilted and unreal. It focused on theoretical basis of the decision, constitutional considerations, legal precedence, privacy, the right to be left alone and there were many snarky remarks. There was little discussion of the real plight of girls and young women sometimes in panicked, confused and desperate situations. Luckily, gender balance in many professions has changed since then, beneficially. The health insurance committee has six women legislators including both chairs, all of whom voted Ought to Pass. We should listen to them. This is significant and persuasive.

The calm explanation of the nature and financial availability of all options will avoid panic, fear, and shame that sometimes can drive desperate people to impulsive and regrettable acts. The hostile environment surrounding abortion debate confuses, scares, and panics some young women, especially those without the resources, the support, the education and money. And it can drive some of them to injury or death. These horrors are not theoretical, but real. This bill will save lives. Thank you.

The SPEAKER: The Chair recognizes the Representative from Bradley, Representative Lockman.

Representative **LOCKMAN**: Thank you, Madam Speaker. Madam Speaker, I wish to pose a question through the Chair for anyone who cares to answer.

The SPEAKER: The Representative may proceed.

Representative **LOCKMAN**: I'm wondering why, given the fact that the abortion industry is so well-funded and that Planned Parenthood can actually afford to pay its CEO \$525,000 a year, why Planned Parenthood doesn't do pro bono abortions if they care so much about low-income women. Thank you, Madam Speaker.

The SPEAKER: The Representative has posed a question. Is there anyone who wishes to answer? The Chair recognizes the Representative from Gardiner, Representative Harnett.

Representative **HARNETT**: Thank you, Madam Speaker, Women and Men of the House. I rise today in support of the pending motion and as a co-sponsor of LD 820.

Today I am speaking for myself and also on behalf of my friend, the Good Representative from House District 40 in Portland as she is not able to be here today.

The SPEAKER: The Representative will defer. The Chair will remind the Representative; one Representative may not speak on behalf of another, but the Representative may proceed on behalf of himself. The Representative may proceed.

Representative **HARNETT**: Let us be honest with one another; we have a history that treated many among us unfairly, as less than equal, and indeed less than human due to their race, ethnicity, the color of their skin, and their ancestry, including the people that lived in Maine before the Europeans arrived. We also have a history of treating women as less than just because of their gender. One of the unfortunate results of that history is that many of our laws, even those described as fair and balanced, have a disproportionate impact on minority groups. Restrictions to reproductive healthcare have been particularly harmful to women of color and women who are poor. In 1980, Supreme Court Justice Thurgood Marshall wrote that the Hyde Amendment was designed to deprive poor and minority women of the constitutional right to choose abortion.

As the Good Representative from Portland noted at the public hearing on this legislation, because of our long history of social and economic inequality, linked to discrimination, women of color are more likely to rely on Medicaid or other public programs for healthcare services. For these same reasons, women of color are also at a higher risk for adverse reproductive healthcare outcomes. That means they are also disproportionately affected by the restrictions on the kinds of reproductive healthcare services that are accessible through public programs. The United States Census Bureau reports that poverty and unemployment rates for people of color in Maine are more than double what they are for white non-Hispanic Mainers. Prohibiting MaineCare, the state healthcare program for the poor and indigent from covering full reproductive healthcare in many, many circumstances is an issue of racial discrimination. Most people think of access to healthcare, reproductive healthcare, as a women's issue, which of course it is, but this restriction intentionally discriminates against poor women who are disproportionately women of color. In this way, the restriction in coverage is a policy that not only violates reproductive rights and the principals of gender equity, but one that undermines racial and economic justice as well. Constitutional rights should not be reserved to those who can pay for them. Those rights are not for sale only to the highest bidder. We must take a hard and honest look at the historical existing and deeply entrenched inequities that impede the ability of women of color, poor women and those denied insurance benefits provided by their employers. When we identify those inequities, we must correct them. LD 820 does just that.

I know you all will follow your conscience. I also hope that you will address the longstanding racial and economic disparities that are embedded in our laws and support LD 820. Thank you.

Representative MOONEN of Portland assumed the Chair. The House was called to order by the Speaker Pro Tem.

The SPEAKER PRO TEM: The Chair recognizes the Representative from Alfred, Representative Sampson.

Representative SAMPSON: Thank you, Mr. Speaker and Ladies and Gentlemen of the House. I'd like to ask this question; is it legal for any one of us, you, me, and all the Members in this room, to go to our surrounding neighbors and forcibly take their money? It is not. It's illegal. It's a crime. Yet here we are, considering a bill allowing the state government to do what we as individuals are not allowed to do. That is to force taxpayers, our fellow citizens, to pay or to give us their money in other words. Therefore, how can we allow the State to do what individuals are not allowed to do? Isn't it still illegal? Abortion is an extreme vet elective procedure. This decision is an individual's choice and therefore an individual's responsibility. We as a legislative body, the representatives of the people, have no right to force the State to pay for a person or the people's individual personal choices. This is an extreme example of a flawed bill and I would ask that you oppose it. Thank you.

The SPEAKER PRO TEM: The Chair recognizes the Representative from New Gloucester, Representative Arata.

Representative **ARATA**: Thank you, Mr. Speaker. Mr. Speaker and Ladies and Gentlemen of the House, I rise in opposition to this motion.

As I listened to testimony about LD 820, I found that many people were confused about abortion funding and didn't realize that taxpayer-funded abortion is already legal when medically necessary. The Hyde Amendment states the following, quote, the limitations established in Section 301 shall not apply to abortion, number one, if the pregnancy is the result of an act of rape or incest or, number two, in the case where a woman suffers from a physical disorder, physical injury, or physical illness including a life-endangering physical condition caused by or arising from the pregnancy itself that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.

Now, I realize that many people in this room don't understand what the big deal is about abortion. However, we all have people in our lives, such as parents, siblings, and friends, who we love and respect and who sincerely believe that abortion is murder and that paying for an abortion makes them an accessory to murder. We know that these friends and relatives do not oppose abortion out of judgement or any desire to oppress women. Rather, it is based on love and the knowledge that all life is precious. A vote for this legislation is telling these good people that they must participate in something that goes against their very core values or we will put them in jail. Refusing to pay taxes is a Class C crime in Maine, with a penalty of up to five years in jail. We try to pass laws to keep good people out of jail, not put them in jail. It simply does not make sense to support this extreme legislation.

Now, if this motion fails, the worst thing that can happen is that an inconvenient baby might be born. I was born in 1973, which was a terrible year to be a fetus. There was the Vietnam War, a stock market crash, the oil embargo, a recession, high inflation and *Roe v. Wade*. My father, the Representative from Vassalboro, was a college senior with little money and terrible job prospects. He has never told me this, but I know that I was an inconvenient baby. But in spite of this, I think I've been a blessing to him, even when I vote opposite of him.

Today is my youngest son's 16th birthday. I cried when I found out that I was pregnant with him because having three babies in four years is difficult. But he's turned out to be an incredibly good and kind person and I'm so glad that he was born.

We all have people in our lives who were inconvenient babies who have given more to us than we could've ever imagined. So, please, please vote against this motion. Thank you, Mr. Speaker.

The SPEAKER PRO TEM: The Chair would point out that the Representative from Vassalboro had no point of order or objection to those comments.

The Chair recognizes the Representative from Kennebunk, Representative Babbidge.

Representative **BABBIDGE**: Thank you. Mr. Speaker. Mr. Speaker, Ladies and Gentlemen of the House, I realize we won't change minds on the legal right of women to determine whether to carry an unexpected and unwanted pregnancy to term. To me, today's debate is about justice. It's about treating women as human beings. We used to not allow females into the classroom. Access to public education today is not discriminatory by gender. Today, we do not cover full reproductive healthcare for women. When women face an unwanted pregnancy and are in crisis, why do we compound the adverse personal and potentially adverse societal consequences by refusing to cover a legal medical right? This is a woman's issue but it is an issue for all of us, men and women, because it's an issue of justice. In our Constitution and in the court cases that have helped define the Constitution, constitutional rights are not granted according to ability to pay. Women of lower income who, in need of exercising this right, deserve reproductive healthcare. Equal access regardless of ability to pay. Thank you, Mr. Speaker.

The SPEAKER PRO TEM: The Chair recognizes the Representative from Pittston, Representative Hanley.

Representative **HANLEY**: Thank you, Mr. Speaker. Mr. Speaker, Ladies and Gentlemen of the House, I rise in opposition to the pending motion for a lot of reasons, a multitude of reasons.

I am a Catholic man and thus my deeply held religious beliefs is that life begins at conception. And, at that moment, in my mother's womb, science and biology has proven that I existed totally at that moment, maybe not in space, but certainly in composition.

The other component to this that is so upsetting for me, I mean, I believe that abortion is always wrong in every way

because it is ending of an innocent human life, but that isn't the issue of the bill. The issue of the bill is it's going to force people in this state through the confiscation of their wealth to pay for something they are deeply opposed to morally. Imagine if this chamber introduced legislation where we had to pay for the euthanasia of kittens, puppies, cats, dogs, and we were to use taxpayer dollars to do it. Do you think there'd be an outcry for that? I'm certain the halls would be full of people complaining about that legislation. So we are forcing many people, and by the way, all my constituents that have contacted me, I have only had one in opposition. Dozens and dozens and dozens of communications opposed to this. And I ask you to reconsider what we might be thinking to do here and defeat this measure. Thank you.

The SPEAKER PRO TEM: The Chair recognizes the Representative from Dexter, Representative Foster.

Representative **FOSTER**: Thank you, Mr. Speaker, Ladies and Gentlemen of the House. I rise in opposition to this measure.

One step closer. With all respect for the opinions offered here from both sides today, I rise not to discuss my opinions on abortion, although they are very strong and heartfelt. I rise in regards to this particular motion and I will address a few points that I think are appropriate. First of all, we are asking the taxpayers and we are asking businesses and those who support medical plans through those businesses to spend their money on something that they possibly are deeply against; something that we have never done in this state before in regards to funding abortion. Taxpayers will see a tax increase through one means or another, the small businesses will see increases in their medical insurance premiums, even those who in the past have not had to offer this funding in their medical plans will have to do so.

My discussions with those involved in committee and with others who were attending and other means of finding out the information, I could not find a single instance where someone, some woman wanting an abortion had to carry that child to fullterm and have the baby due to a lack of funds. Polls show that people are opposed, a majority of those are opposed to funding abortion through their tax dollars. My understanding is that may be a narrow margin in certain parts of the country and in this state, but I can assure you, in my part of Maine, that is a very strong majority. And most of those citizens also oppose abortion. But we're talking about the funding of it by forcing them to help pay for it.

My fear is that this extreme measure is taking us one step closer. In my time here, my short time here in this House, it appears that we are in a great hurry to find ourselves listed among the most liberal states in this country, even though the constituents in my area, my part of the state, are far from that and don't want to go there. We all have heard the recent law signed into statute in New York allowing abortion up to the date that the baby was due to be delivered. My fear is that this measure, this extreme measure we are about to take here today unless you follow my light and vote against it, is taking us one step closer to that and at that time, you will hear from me my views on taking life of an unborn fetus. And I will only make one point to an earlier remark in regards to miscarriage, recently, two weeks ago. I suffered the loss of a muchheralded grandchild to a miscarriage and I assure you that the medical plan which is state-funded through the school department will pay for that miscarriage. I wish that it weren't so.

The Speaker resumed the Chair.

The House was called to order by the Speaker.

The SPEAKER: The Chair recognizes the Representative from Eliot, Representative Meyer.

Representative **MEYER**: Thank you, Madam Speaker, Women and Men of the House. I rise in support of the pending measure.

The intention of LD 820 is to remove barriers to decisionmaking about a pregnancy that exists currently in insurance coverage. Abortion has been a safe and protected medical procedure for more than 40 years when the U.S. Supreme Court issued its decision in Roe v. Wade. The court ruled that people have a constitutional right to make decisions about when or whether to bring a new life into the world. The deeply personal decisions about a pregnancy are best left to the person and her medical provider, and the government's role is to protect this right and not to restrict or interfere with it.

We cannot achieve quality affordable healthcare for all Mainers while the range of reproductive healthcare services available to a woman continues to be limited by her income and what type of insurance she may have. It is a simple truth; cost is a barrier to care and that cost has lasting impacts on women, especially poor women. Maine's poorest women must pay out of pocket for a service largely covered by private insurance. For a pregnant woman who is already struggling to get by, the cost of an abortion is often far more than she could possibly afford on her own. This hardship is exemplified by the fact that one in four Medicaid-qualified women who seek an abortion is forced to carry her pregnancy to term because of the cost. The entire system creates a vicious cycle of poverty. That's because women's socioeconomic success is intrinsically tied to the reproductive lives. Forcing women to carry an unwanted pregnancy to term guadruples the odds of living below the federal poverty line. Family planning is a key to achieving life goals and unwanted pregnancies can prevent women from obtaining an education, entering or remaining in the workforce and reaching financial self-sufficiency.

I'll conclude with the words of Reverend Marvin Ellison. In the midst of our moral disagreements about abortion, I hope that, at the very least, we might share a commitment to the principle of noncoercion. That in matters of pregnancy, childbirth, and parenting, people should be free to make their own reproductive decisions without force or pressure, including without financial pressure. Before us is the ability to address equal access to reproductive healthcare, providing basic fairness and greater justice for Maine people and their families. Thank you.

The SPEAKER: The Chair recognizes the Representative from Lisbon, Representative Mason.

Representative **MASON**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. I stand in very strong opposition against this pending motion.

I received many again of these pink slips asking me to oppose this measure, along with emails, phone calls, and the people I meet in the great town of Lisbon, more nays than yeas on this bill. But, Madam Speaker, also because of my Lord and Savior who lives in my heart, in his Book, it tells me that life begins at conception. And one day I will stand before Him and give an account for what I do in this chamber and everything I do in my personal life. This is my personal belief.

There are other ways to use tax dollars. Use them for adoption agencies, give them some tax dollars. How about promoting abstinence? I have a friend that went to China to adopt a little boy. How about cutting some red tape in this state so it's easily accessible to adopt a child? How about cutting costs in this state to help the adoption of a child?

I strongly stand against this. This is not healthcare. It's the taking of a life. Let's use our tax dollars to stop the screams of the unborn. Thank you, Madam Speaker.

The SPEAKER: The Chair will remind Members of two things; the first is there is no use of props during debate, so if you might be reading something off a piece of paper, that's fine, but not to use anything else lifted in your hand as a prop. And also just a reminder to please address comments not towards other Members in the chamber, but towards the rostrum.

The Chair reminded all members that no props were allowed during the floor debate.

The Chair further reminded all members to address their comments toward the Speaker.

The SPEAKER: The Chair recognizes the Representative from Lincoln, Representative Hanington.

Representative **HANINGTON**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. I've been sitting here listening to testimony on both sides and I remind myself the question at hand; are we going to be good stewards of the taxpayers' money? Even though I could stand up here and probably speak for hours on my belief, but I'm not going to go there because the question at hand is; are we going to allow taxpayers' money to pay for this?

I've got probably 900 emails, if not more. Eighty percent of them were outside of CD-2. And out of those 80%, I would say that probably 90% was to allow taxpayer-funded abortion. But the reason why I stand up this afternoon is when I took an oath to represent my district, my hometown of Lincoln and six surrounding towns, I said to myself I'm going to fight to be a good steward of your money, do what is morally and ethically right. And with that said, Madam Speaker, ladies and gentlemen, I would say that 99.99% of the emails that I got in my district, 100% in Lincoln, do not allow my money to perform abortion and I do not want my money to perform abortion outside of whatever is covered in the Hyde Amendment. Thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Waterville, Representative Madigan.

Representative **MADIGAN**: Thank you, Madam Speaker, fellow Members of the House. I rise today in support of this bill.

And today I speak for my sister. My sister is one of the people I am closest to in my life. My sister has a rare birth defect. She was born with only one kidney, half a uterus, one fallopian tube, and a defective ovary on the side of her body with the defects. Growing up, she and the rest of our family had no idea. When she hit puberty, she had periodic abdominal pain, but no one had any answers. In fact, it was usually recommended she just take Prozac. But she got sicker. She lost her job. I helped her get MaineCare. Finally, she had healthcare coverage. Her doctor tried to discover the source of her abdominal pain. An ultrasound picked up some weird results. She was in her early 30s and finally her birth defect was discovered. Her defective ovary was the source of her lifelong standing pain but that wasn't all. According to her doctor, she would not be able to carry a baby to term. Her uterus could burst, leading her to bleed out, killing her and any unborn child. And if you've ever had to sit to anyone with their doctor and hear what that's like, I recommend against it. Then she learned that some activists disagreed with her doctor's opinions, including some medical professionals. This led to my

sister to speak out about this issue. Why should her choices about what to do what was best for her, including the ability to make a decision to save her life depend on her insurance coverage, her employer's values and choice in their covered benefits or our discussions here? And whether someone thinks the risk of her uterus bursting is great enough to quality as life-threatening. I am glad my sister never had to make that decision. She almost didn't make it after an emergency hysterectomy and subsequent sepsis as I sat by her side. I'm glad she is alive today. She wanted to be here but at the moment she is in the emergency room. She still has complications from these birth defects including intense pain and vomiting that requires medical care, sometimes from specialists in Boston because we often can't treat this problem here. This made my sister an activist, someone who frankly you would never guess, you would never guess that about my sister. She's funny, she's amazing, but she's not like me in wanting to do this kind of stuff at all. And I'm really glad she never had to make that decision.

My sister wants people to know that there are others like her. They don't debate, they don't care about procedural issues in this body, they actually don't care much about the kind of things we talk about here. What they want is they want that decision just to be between them and their doctor. We all pay for things we don't like with our tax dollars. Our country is a pretty contentious place, in case you haven't noticed, and I believe, like my sister believes, that the most difficult and heartbreaking decision that she might have had to make or anyone should be left to a woman and her doctor, not to the government through their Medicaid rules, not to someone's employer or health insurance carrier, not to someone who may have different values who may even be their healthcare provider.

I'm voting in support of this bill and I urge you to do the same. Thank you.

The SPEAKER: The Chair will inform Members there are eight people in the queue. And the Chair will also remind Members to direct comments towards the rostrum only.

The Chair reminded all members to address their comments toward the Speaker.

The SPEAKER: The Chair recognizes the Representative from Vassalboro, Representative Bradstreet.

Representative **BRADSTREET**: Thank you, Madam Speaker. Madam Speaker, Ladies and Gentlemen of the House, I rise today in opposition to the pending motion.

First, I'd like to say perhaps the Representative from New Gloucester inadvertently used me as a prop when she was giving her speech, so I think that's probably okay. And perhaps she was inconvenient but, you know, not half as inconvenient as some of the people around here at times. We in our family have adopted a culture of life. We look at everybody, both the born and the unborn, as being sacred and of infinite value.

What this bill does is expand something that I think is very wrong. My views on abortion were formed many years ago when I saw the image of a baby being aborted. I won't go into it because it's really too graphic. I will say, though, that the baby was fighting for its life right up to the end. I believe that perhaps it should be required viewing of people to look at that video or something like it, that imaging, before we vote anything this important concerning abortion.

I do think it's wrong. This is an extreme measure. I would never vote for anything to expand abortion. Thank you.

The SPEAKER: The Chair recognizes the Representative from Penobscot, Representative Hutchins.

Representative **HUTCHINS**: Thank vou. Madam Speaker. Thank you, Members of the House. I rise in opposition to this but I also, to bring it back to what we're talking about, is the funding of this particular issue and I'm assuming, like anything that we turn over to government, we talked about the procedure costing \$500, when we turn it over to government paying for it, within two years it'll be \$1500. I think that probably would be maybe even a lowball. But, as a grandfather of ten children, ten grandchildren, I should say, I do value life quite a considerable amount. The two voungest of my adopted grandchildren, two out of the ten are adopted, are the result of what we would consider in this country rape. And they are the most precious little children you can ever imagine. So I'm straying also from the issue but I'm just telling you to try to get back to the part of the funding of it and I suspect that the more that it is funded through state or federal government, the more it's going to cost. Thank you very much.

The SPEAKER: The Chair recognizes the Representative from Winthrop, Representative Hickman.

Representative **HICKMAN**: Thank you, Madam Speaker, Women and Men of the House. I rise in support of the pending motion.

In *Harris v. McRae*, which upheld the constitutionality of the Hyde Amendment in 1980, I will quote briefly from the dissenting opinion by Justice William Brennan which was joined by Justice Thurgood Marshall and Justice Harry Blackmun and is this opinion that mostly informs my decision to rise in support of this motion.

I write separately to express my continuing disagreement with the court's mischaracterization of the nature of the fundamental right recognized in Roe v. Wade and its misconception of the manner in which that right is infringed by federal and state legislation withdrawing all funding for medically necessary abortions. Roe v. Wade held that the constitutional right to personal privacy encompasses a woman's decision whether or not to terminate her pregnancy. Roe and its progeny established that the pregnant woman has a right to be free from state interference with her choice to have an abortion, a right which at least prior to the end of the first trimester absolutely prohibits any governmental regulation of that highly personal decision. The proposition for which these cases stand thus is not that the state is under an affirmative obligation to ensure access to abortions for all who may desire them, abortion on demand, it is that the state must refrain from wielding its enormous power and influence in a manner that might burden the pregnant woman's freedom to choose whether to have an abortion or not. The Hyde Amendment's denial of public funds for medically necessary abortions plainly intrudes upon this constitutionally protected decision for both by design and in effect it serves to coerce indigent pregnant women to bear children that they would otherwise elect not to have. When viewed in the context of the Medicaid program, to which it is appended, it is obvious that the Hyde Amendment is nothing less than an attempt by Congress to circumvent the dictates of the constitution and achieve indirectly what Roe v. Wade said it could not do directly. Under Title 19 of the Social Security Act, the federal government reimburses participating states for virtually all medically necessary services it provides to the categorically needy. The sole limitation of any significance is the Hyde Amendment's prohibition against the use of any federal funds to pay for the costs of abortion, except where the life of the mother would be endangered if the fetus were carried to term. As my Brother Stevens persuasively demonstrates, exclusion of medically necessary abortions from Medicaid coverage

cannot be justified as a cost-saving device. Rather, the Hyde Amendment is a transparent attempt by the legislative branch to impose the political majority's judgement of the morally acceptable and socially desirable preference on a sensitive and intimate decision that the Constitution entrusts to the individual. Worse yet, the Hyde Amendment does not foist that majoritarian viewpoint with equal measure upon everyone in our nation, rich and poor alike, rather it imposes that viewpoint only upon that segment of our society which because of its position of political powerlessness is least able to defend its privacy rights from the encroachments of state-mandated morality. The instant legislation thus calls for more exacting judicial review than in most other cases. When elected leaders cower before public pressure, this court more than ever must not shirk its duty to enforce the Constitution for the benefit of the poor and the powerless, end-quote.

It seems that there are 15 other states in the nation who have tried to correct this error by allowing for medically necessary abortions to be funded by Medicaid in those states and I heard earlier from a Representative who I cannot remember that if we were to pass this law, Maine would be some outlier, some liberal state above and beyond what the Representative perceives it already to be. I will point out that Alaska is one of the states that has allowed for this, and I don't believe that anyone in this chamber would characterize Alaska as a liberal state. And so I ask this body to consider the privacy rights of poor and powerless women and vote for this amendment. Thank you.

The SPEAKER: The Chair recognizes the Representative from Orrington, Representative Campbell.

Representative CAMPBELL: Thank you, Madam Speaker, Men and Women of the House. We all bring our own stories to this body and I was just in the hall answering a phone call and the Good Representative from Bangor came out and said, you know, I remember your floor speech way back when, it must've been in the early '90s. The Good Representative from Eagle Lake remembers the number of abortion bills we had before us. So I was recalling, just a little background, I have three beautiful boys, one born in '77, two, twins, born in '88. But between '77 and '88, my then wife and I had problems conceiving. So, we traveled to Yale-New Haven and had our first in vitro fertilization. At that time, it wasn't legal to freeze fertilized eggs so they were all implanted. My wife had a hard time carrying, so we got a hospital bed and had it in the living room and we'd count the weeks. First, we counted the cells developing, doubling. Then we get to 15 weeks, 16 weeks, 17 weeks, 18 weeks, and having a really hard time carrying those three beautiful boys. Come the 19 weeks and she just couldn't hang on any longer. So we went to the hospital and she delivered three beautiful baby boys. She held them in her hands and watched them die. So that was my testimony of the day. When I got home and told her about it, she said well you forgot one thing; you forgot that in order to die, they had to live. Well, we were so fortunate because 19 weeks, we didn't have to bury those beautiful boys.

So I just want you to think when you cast your vote that, to me, this is about life. It's not about money, it's about life. Thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Brewer, Representative Verow.

Representative **VEROW**: Thank you, Madam Speaker and Ladies and Gentlemen of the House. I received many thoughtful and sincere opinions from my constituents on this particular bill and most of them were in opposition for two reasons; one of them is that they see this as a mandate and the other was that they were opposed to taxpayer funding of abortions. I appreciated their comments, as always, and I will take them into consideration when I cast my vote. So, thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Winter Harbor, Representative Faulkingham.

Representative **FAULKINGHAM**: Thank you, Madam Speaker. I rise to pose a question through the Chair but first I just wanted to respond to a couple comments that I heard.

The first comment I wanted to address was that I've heard over and over abortion phrased as a constitutional right but I think it's an important distinction to note that abortion is not a constitutional right, as a matter of fact, the Constitution says nothing of abortion. It may be declared constitutional, but it is not a constitutional right. And I just wanted to reiterate that we've heard a lot of very difficult stories from both sides and I just thought it should be reiterated that abortions in the case of rape, incest, and the safety of the mother are already covered under DHHS Rule 90.05. So, Madam Speaker, may I pose a question about the fiscal note?

The SPEAKER: The Representative may proceed with the question.

Representative **FAULKINGHAM**: And I hope that someone will answer this question. I have a question regarding the fiscal note. What does it mean when the Department of Professional and Financial Regulation to say they do not anticipate any additional cost as a result of this bill but in the same amendment DHHS says it will cost the General Fund \$375,000?

The SPEAKER: The Representative from Winter Harbor has posed a question to anyone in the chamber who is able to answer. Seeing none, the Chair recognizes the Representative from Weld, Representative Skolfield.

Representative **SKOLFIELD**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. I wasn't going to rise today, but I got looking at my desk this morning. We were all given a little card from the Boys and Girls Clubs of the State of Maine and they said it says on that little wristband that great futures start here. And they wanted to thank us for all that we do for youth in our great state. I just thought it would be nice to remind us of that. Thank you.

The SPEAKER: The Chair recognizes the Representative from Madison, Representative Curtis.

Representative **CURTIS**: Thank you, Madam Speaker. Madam Speaker, Ladies and Gentlemen of the House, I rise also in opposition of LD 820.

At first glance, the title of this proposal seems fair-minded and rational. Who would object to providing proper healthcare to a woman carrying a precious life inside of her body? Nonetheless, as with so many of our legislative proposals, the devil is in the details. Think with me about how many bills we deliberate on a regular basis to preserve and prolong life. Naloxone to prevent death of overdose, building codes to protect public health, safety, and general welfare, strengthening testing for lead for school in our school's drinking water, amending laws governing the use of child safety restraints, increasing the penalty for passing a school bus to preserve the life of the student riders, the establishment of special funds to be used for pedestrian safety, extending MaineCare coverage to the uninsured to provide lifesaving healthcare, and the list goes on.

Madam Speaker, in your testimony on LD 1312, you spoke of how you cannot stop thinking about the children who had been killed, harmed, or terrorized by gun violence, that you

are haunted by their faces, their names, their parents' breaking voices as they echo stories of how their child was, what they dreamed of, who they loved, and how they died.

The SPEAKER: The Representative will defer. So, the Chair will remind the Representative that we are debating LD 820 and -- the Chair is still continuing -- and reference to a Member's testimony on another bill is not germane to the subject at hand. We've given wide latitude during this debate to talk about many aspects and history and such of the bill at hand, but the Chair will remind the Member to not talk about another bill that is not before the body at the moment.

The Chair reminded Representative CURTIS of Madison to stay as close as possible to the pending question.

The SPEAKER: And the Representative may proceed.

Representative **CURTIS**: You cut me off before I was going to make my statement that I agree with your sentiments. I cannot stop thinking about the children who were never given the opportunity to be given a name or have a face seen or develop their dreams or learn to love. LD 820 takes away choices on several levels. First and foremost, the unborn's ability to make choices is terminated before their first breath is even taken. Taxpayers, including many of us in this chamber today, lose their ability to choose via a decree obligating us to pay for a procedure that we are morally and ethically opposed to. When the cost of health insurance continues to skyrocket, adding additional coverage through MaineCare and requiring private insurers to cover abortion procedures removes the choice from the consumer and the taxpayer and the insurer.

Madam Speaker, when the purpose of our world-leading healthcare system is to sustain life, why are we imposing taxpayer funding to end life? The recent Consensus Economic Forecasting Commission report from April lays out their ongoing concern about the demographic situation in Maine and the resulting impacts of workforce availability. Likewise, there are reports that the U.S. economy does not have enough workers, leaving millions of jobs unfilled. With hundreds of thousands of lives terminated through abortion each year, think of the economic impact. Think of the teachers, the doctors, the firemen, the policemen, the plumbers, the electricians, the small business owners and, yes, even the legislators that are not here with us today since their lives were unduly terminated. With so much grief and hardship linked to cancer, AIDS, hunger, and so many other societal struggles, can we not fathom the possibility that those with the answers may have already been aborted? I cannot in good conscience as a public servant find any redeeming value in passing this initiative. Franklin Graham raises a valid concern on the issue on this very subject when he said it's ironic, Madam Speaker, in New York a murderer, a rapist, a serial killer, a pedophile, a school shooter cannot receive a lethal injection but a child in the womb can.

Madam Speaker, I stand with you in asking, what do you value most. If we believe the lives of our children are of utmost important responsibility, what will we do about it. To those of us who have held our children, our grandchildren and, yes, some of us older folks even held our great-granddaughter or our great-grandson in our arms and marveled at how God has blessed the reproductive rights of the women in our families. I would beg you, Madam Speaker, to join with me and to vote this bill down. Can we not work together to develop a bill that will truly be reproductive? Life is precious and must be protected from conception to the grave and I believe that all of us here today would support such a bill.

Again, Madam Speaker, I'm proud of your statement we will choose life, our children first, every time. Will we choose

the life of our child every time? You were correct in saying isn't every single life worth it. Maybe it's time we change our focus. Maybe it's time we think about a positive difference that we could make here today by debating a bill that would help fund adoption of babies to couples who are unable to conceive on their own. What joy would that bring to not only the couple but to the life-giving mother who will have the satisfaction of knowing her child will be loved and cared for.

You see, Madam Speaker, LD 820 seeks to apply tax dollars toward ending life. This is not a very good return on investment when the same dollars could be applied to saving a life, a life that could be responsible for generations to come, yielding unfathomable civic and private gains. Our own oath as public servants to faithfully discharge to the best of our abilities the duties incumbent upon us according to the constitution and laws of this state set forth that we are not to deprive anyone of life, liberty or property without due process. Madam Speaker, let us know ignore our oath and continue to erode the public's faith in their government. Let us stand together to ensure that those we serve as well as those without a voice are given due process under the law of this great state. for as our 40th president said, we cannot diminish the value of one category of life, the unborn, without diminishing the value of all human life. And, Madam Speaker, I apologize for taking a bill and bringing it to the floor, but I'm asking you to go with me and vote this bill down and let's work together to put together a true reproductive bill. Thank you, Madam Speaker.

The SPEAKER: The Chair recognizes the Representative from Yarmouth, Representative Cooper.

Representative **COOPER**: Thank you, Madam Speaker, Ladies and Gentlemen. I rise in support of the pending motion.

Much has been said during this debate about the use of taxpayer or ratepayers' funds for the support of a policy that many parts of the population oppose. They view this as a morally objectionable choice. But let's be clear; this bill, this issue, is about the public policy in favor of access to a lawful medical procedure. It is not about tax policy.

In my lifetime, I have lived through several bloody, expensive wars which I believe were ill-conceived and recklessly executed. My tax dollars paid for those wars and I had no choice, morally, objectionably, though I felt they were. That is what it means to be part of a democracy. Thank you.

The SPEAKER: The Chair recognizes the Representative from Orono, Representative Tipping.

Representative TIPPING: Thank you, Madam Speaker. Madam Speaker, Women and Men of the House, access to abortion is often sold as a women's issue but when women cannot control their reproductive futures, it's more difficult for them to advance economically. And since women make up more than half the population and close to half the workforce, it matters to all of us when something is holding them back. Because of restrictions in Maine law, women who receive health coverage through MaineCare face two sets of financial obstacles if they have made the decision to end a pregnancy. First, they must cover the direct costs of medical treatment without insurance which is already more money than many Mainers are able to come up with in the case of an emergency and this money must be raised urgently as delays increase costs and risks for women. Second, these women must also bear the practical costs imposed by trips to their medical provider including childcare, because 60% of women seeking abortion are already parents, transportation, women are often driving hours to the nearest provider, whether that's Bangor, Augusta or Portland, and time off from work. Also, women who have decided to have an abortion but can't afford the out of pocket costs inflicted by lack of insurance coverage face major consequences over the course of their lifetime. Studies show that women in these circumstances are more likely to live in poverty, with poorer health outcomes for the woman, higherrisk pregnancies, increased exposure to substances for both mother and child, and the list goes on.

Denying insurance coverage of abortion, which for many is fundamentally denying access to abortion, isn't just a burden on the woman. The way we address these restrictions reflects the value we place on women as full members of society. If we are a state that values women regardless of income, then it's time to pass this legislation. That's why I'm supporting LD 820.

The SPEAKER: The Chair recognizes the Representative from Buxton, Representative Blier.

Representative **BLIER**: Thank you, Madam Speaker, Ladies and Gentlemen of the House. We're here today discussing a bill that would give medical rights to women that we feel that they do not have. The point is is that if a young woman who is pregnant and doesn't want to be pregnant and she is in a bathroom confused and just, you know, overwhelmed with what's going on in her life and she drops her cellphone into the toilet and ruins that. What would be more of an inconvenience, to live without the cellphone or to live with a child? So, my point is, is this; if abortion is healthcare, then wouldn't cellphones be healthcare as well? I would go crazy without my cellphone so shouldn't we provide cellphones to the public as well? And so I vote that this Ought Not to Pass for the protection of life. Thank you.

The SPEAKER: A roll call having been previously ordered, the pending question before the House is Acceptance of the Majority Ought to Pass as Amended Report. All those in favor will vote yes, those opposed will vote no.

ROLL CALL NO. 70

YEA - Ackley, Austin B, Babbidge, Babine, Bailey, Beebe-Center, Berry, Blume, Brennan, Bryant, Caiazzo, Cardone, Carney, Cloutier, Collings, Cooper, Craven, Crockett, Cuddy, Daughtry, Denk, Dodge, Doore, Doudera, Dunphy, Evangelos, Farnsworth, Fay, Fecteau R, Foley, Gattine, Gramlich, Grohoski, Handy, Harnett, Hepler, Hickman, Hobbs, Hubbell, Hymanson, Jorgensen, Kessler, Kornfield, Landry, Madigan C, Mastraccio, Matlack, Maxmin, McCrea, McCreight, McDonald, McLean, Melaragno, Meyer, Moonen, Morales, O'Neil, Paulhus, Pebworth, Peoples, Perry A, Pierce T, Pluecker, Reckitt, Riley, Riseman, Roberts-Lovell, Rykerson, Schneck, Sharpe, Sheats, Sylvester, Tepler, Terry, Tipping, Tucker, Warren, Zeigler, Madam Speaker.

NAY - Alley, Andrews, Arata, Austin S, Bickford, Blier, Bradstreet, Campbell, Corey, Costain, Curtis, DeVeau, Dillingham, Dolloff, Drinkwater, Faulkingham, Fecteau J, Foster, Griffin, Haggan, Hall, Hanington, Hanley, Harrington, Head, Higgins, Hutchins, Javner, Johansen, Keschl, Kinney, Kryzak, Lockman, Lyford, Marean, Martin J, Martin R, Martin T, Mason, Millett, Morris, Nadeau, O'Connor, Ordway, Perkins, Perry J, Pickett, Prescott, Reed, Rudnicki, Sampson, Skolfield, Stanley, Stearns, Stetkis, Stewart, Strom, Swallow, Tuell, Verow, Wadsworth, White B, White D.

ABSENT - Brooks, Cebra, Grignon, Ingwersen, Stover, Talbot Ross, Theriault.

Yes, 79; No, 63; Absent, 7; Excused, 1.

79 having voted in the affirmative and 63 voted in the negative, with 7 being absent and 1 excused, and accordingly the Majority **Ought to Pass as Amended** Report was **ACCEPTED**.

The Bill was **READ ONCE**. **Committee Amendment** "A" (H-210) was **READ** by the Clerk and **ADOPTED**. Under suspension of the rules, the Bill was given its **SECOND READING WITHOUT REFERENCE** to the Committee on **Bills in the Second Reading**.

Under further suspension of the rules, the Bill was PASSED TO BE ENGROSSED as Amended by Committee Amendment "A" (H-210) and sent for concurrence.

Majority Report of the Committee on **VETERANS AND LEGAL AFFAIRS** reporting **Ought Not to Pass** on Bill "An Act Regarding State Licensure for the Sale of Spirits for Offpremises Consumption"

(H.P. 979) (L.D. 1357)

Signed: Senators:

LUCHINI of Hancock CYRWAY of Kennebec HERBIG of Waldo

Representatives:

SCHNECK of Bangor ACKLEY of Monmouth ANDREWS of Paris COOPER of Yarmouth DOLLOFF of Rumford HANINGTON of Lincoln HUBBELL of Bar Harbor McCREIGHT of Harpswell

Minority Report of the same Committee reporting **Ought** to **Pass as Amended by Committee Amendment "A" (H-201)** on same Bill.

Representatives: HICKMAN of Winthrop STROM of Pittsfield

READ.

Signed:

On motion of Representative SCHNECK of Bangor, the Majority **Ought Not to Pass** Report was **ACCEPTED** and sent for concurrence.

By unanimous consent, all matters having been acted upon were **ORDERED SENT FORTHWITH**.

CONSENT CALENDAR First Day

In accordance with House Rule 519, the following items appeared on the Consent Calendar for the First Day:

(S.P. 348) (L.D. 1128) Bill "An Act To Clarify Statutes Related to Establishing a Municipal Charter Commission" Committee on **STATE AND LOCAL GOVERNMENT** reporting **Ought to Pass**

(S.P. 209) (L.D. 696) Bill "An Act To Protect Public Employees from Identity Theft" Committee on **STATE AND** LOCAL GOVERNMENT reporting Ought to Pass as Amended by Committee Amendment "A" (S-77)

(S.P. 290) (L.D. 1011) Bill "An Act To Clarify Filing Requirements for Proposed Rules" Committee on **STATE AND LOCAL GOVERNMENT** reporting **Ought to Pass as Amended by Committee Amendment "A" (S-73)**