

# MAINE STATE LEGISLATURE

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Senate Legislative Record  
One Hundred and Twenty-Ninth Legislature

State of Maine

Daily Edition

First Regular Session  
beginning December 5, 2018

beginning at Page 1

Tabled - May 2, 2019 by Senator **LUCHINI** of Hancock

Pending - **ACCEPTANCE OF EITHER REPORT**

(In House, the Majority **OUGHT TO PASS AS AMENDED** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-164).**)

Senator **LUCHINI** of Hancock moved the Senate **ACCEPT** the Minority **OUGHT NOT TO PASS** Report, in **NON-CONCURRENCE**.

**THE PRESIDENT:** The Chair recognizes the Senator from Knox, Senator Miramant.

Senator **MIRAMANT:** Thank you, Mr. President. Men and women of the Senate, this bill seeks to allow nicknames without having to do a legal name change. The sponsor uses a nickname, wants it known that way. We've had some other folks talk about how they changed their name. What did I say here?

**THE PRESIDENT:** The Chair recognizes the Senator from Androscoggin, Senator Libby.

Senator **LIBBY:** Mr. President, would you clarify the motion that's before us?

**THE PRESIDENT:** The Chair was in error. The motion is the Minority Ought Not to Pass report, which is correct on the board. The Chair said Majority Ought to Pass. The report that Senator Luchini moved was the Minority Ought Not to Pass report. Is that clear? The Chair recognizes the Senator from Knox, Senator Miramant, and forgive the Chair for interrupting him.

Senator **MIRAMANT:** No problem. It wasn't me for a change. I love it. Okay. In case I didn't ask, I'd like a roll call.

Senator **MIRAMANT** of Knox requested a Roll Call.

Senator **MIRAMANT:** So the sponsor, we had some people talk about how they've changed their name legally so that their nickname could be used on the ballot. There are protections from people coming up with random names or changing their position on the ballot because it's still on the ballot by last name. So I think it's kind of been drastic. A little easier way and it would support folks who really are not known by their William instead of a Billy Bob, just as a random example. Thank you. So I'd just like you to give it consideration, Mr. President.

On motion by Senator **MIRAMANT** of Knox, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

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Senate at Ease.

The Senate was called to order by the President.

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On motion by Senator **LIBBY** of Androscoggin, **TABLED** until Later in Today's Session, pending the motion by Senator **LUCHINI** of Hancock to **ACCEPT** the Minority **OUGHT NOT TO PASS** Report, in **NON-CONCURRENCE**. (Roll Call Ordered)

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The Chair laid before the Senate the following Tabled and Later Assigned (5/8/19) matter:

HOUSE REPORTS - from the Committee on **HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES** on Bill "An Act To Prevent Discrimination in Public and Private Insurance Coverage for Pregnant Women in Maine"

H.P. 594 L.D. 820

Majority - **Ought to Pass as Amended by Committee Amendment "A" (H-210)** (8 members)

Minority - **Ought Not to Pass** (5 members)

Tabled - May 8, 2019 by Senator **LIBBY** of Androscoggin

Pending - **ACCEPTANCE OF EITHER REPORT**

(In House, the Majority **OUGHT TO PASS AS AMENDED** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED**.)

Senator **H. SANBORN** of Cumberland moved the Senate **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED** Report, in concurrence.

On motion by Senator **TIMBERLAKE** of Androscoggin, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

**THE PRESIDENT:** The Chair recognizes the Senator from Cumberland, Senator H. Sanborn.

Senator **H. SANBORN:** Thank you, Mr. President. When it comes to the most important decisions in life, such as whether and when to become a parent, it is vital that a woman is able to consider all the options available to her, no matter how much money she has in her bank account and no matter how she gets her health insurance. The decision about whether to have an abortion or not is deeply personal. It involves a complex weighing of the 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 health care provider alone. L.D. 820 would allow women, regardless of income, to make decisions about their pregnancies without the government or an insurance company denying their coverage. Fifteen states already provide comprehensive coverage for Medicaid eligible women and eight others provide expanded coverage. More than half of the county's Medicaid insured population are afforded broader coverage of abortion than those living in Maine. It's time for Maine to fix this inequity and provide Maine women with the same ability to make their own decisions about their pregnancies that other women, whether in Alaska, Montana, Kansas, or Vermont, can. Maine women deserve the same basic health care

that others receive across the country. Today women insured by MaineCare have no access to abortion, even if they're health is gravely at risk, even if the pregnancy has gone horribly wrong, and even if their health care provider recommends an abortion. Women in violent relationships have no coverage. Women covered by private insurance have fewer protections under our law and with private insurance today a woman pregnant from a sexual assault has no protections. A woman whose life is in jeopardy has no protections. We should contrast this with our public employees, who do have these protections through their publicly paid and funded insurance plans. So our state and local tax dollars are already being used to pay for this type of care, but just only for certain women while others cannot access the care. Abortion rates are at their lowest since Roe v. Wade, thanks in large part to the improvements in birth control and policies like the Affordable Care Act that has expanded access to health care. Even so, one in four women will make a decision to have an abortion at some point in her lifetime. Sixty percent of these women will already have at least one child and nearly 40% will be living in poverty. Abortion is a safe, legal medical procedure and women should be able to access care without politicians deciding who does or does not qualify for coverage.

As Chair of the Health Coverage, Insurance and Financial Services Committee, I had the privilege of hearing the stories of women who came forward to talk about their decisions to have an abortion and the hardships they faced when coverage was denied. We heard from women struggling with addiction, women in violent relationships, women desperate to find the money to pay for an abortion, women who were struggling to raise their family and knew they could not have another child, and heart wrenching stories from women who received tragic news about their health and their pregnancies that meant that an abortion was the safest option for them. They all knew that the decision to have an abortion was the right one for them, for their families, and for their future. As you consider the merits of this legislation please consider what you would want the experience to be for a woman who decides that abortion is the right decision for her. I know what I want. I want her to be supported by her loved ones. I want her to get high quality health care from a trusted provider. I want her to be safe and I want her to be treated with dignity. I do not want her to be harassed. I don't want her to have to walk through protesters and I don't want her to have to delay or forgo the care she needs and wants because she cannot scrape together the money to pay for it. Today we can take one step in insuring that all Maine women, regardless of their income, are afforded this safety and this dignity. Decisions about pregnancy and abortion belong to Maine women, not to me, not to any government agency, and not to any insurance company. I urge you to vote in favor of the pending motion on L.D. 820. Thank you.

**THE PRESIDENT:** The Chair recognizes the Senator from Penobscot, Senator Guerin.

Senator **GUERIN:** Thank you, Mr. President. Mr. President, ladies and gentlemen of the Senate, as a member of the IDEAB Committee I would like to point out that L.D. 820 takes away a businessperson's choice as to whether or not to provide abortion coverage in a benefit package. Many pro-life businesspeople will be forced to drop their health care coverage that they offer their employees to prevent their resources from being used to abort beautiful little baby boys and girls. L.D. 820 will have the negative

effect of lowering the number of people privately insured in the state of Maine. In the public realm, polling consistently shows that 60% to 70% of Americans do not want to support taxpayer funded abortion. Let me repeat that. Sixty to seventy percent of Americans do not support taxpayer funded abortion. There are more serious budgeting priorities for the State of Maine.

Secondly, I would like to speak as a woman who came of age in the generation of abortion legalization. My friends and I were told by the abortion industry that abortions were not killing babies, instead telling us the fetus was just a blob of tissue. I'm sure everyone in this room has heard that before. Well today scientific medical advances have proved that, as young women, we were lied to. Pregnancy sonograms clearly show little boys and girls sucking their thumbs, stretching and turning. We can now see if a baby is a boy or a girl. Many people name their baby and post their picture long before the baby makes its sunshine debut. These are real human beings and our tax dollars should not be used to end their lives. Please join me in supporting our pre-born babies by opposing the pending motion.

**THE PRESIDENT:** The Chair recognizes the Senator from Oxford, Senator Keim.

Senator **KEIM:** Thank you, Mr. President. Ladies and gentlemen of the Senate, L.D. 820 is not about abortion access. Since 2016 Maine Family Planning has offered telemedicine chemical abortion at all 17 of their statewide locations. The Maine CDC reports that abortions are being performed on women in every single county throughout Maine, regardless of her zip code. In fact, according to the most recent 2017 figures, published by Maine's CDC, women from 17 different states have their abortions performed right here in Maine, though many of these states do have very liberal abortion laws. These include: Alaska, Delaware, Georgia, Hawaii, Idaho, Kansas, Massachusetts, Missouri, New Hampshire, New York, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, West Virginia, and Wisconsin. Additionally, the 2017 Maine CDC reports that three women from Canada also came to Maine for their abortions. Clearly, abortion access in Maine is not an issue. In fact, this is precisely what the State of Maine Cumberland County Superior Court found in the 2017 Medicaid/MaineCare lawsuit filed by Maine Family Planning, Planned Parenthood of Northern New England, and Mabel Wadsworth. The defendants, the State of Maine Department of Health and Human Services, prevailed in this lawsuit. The court decision, dated October 24, 2017, Justice Horton writes, 'The plaintiffs have no record of any woman being denied access to abortion services due to her inability to pay.'

L.D. 820 would be a radical alteration, overturning 40 years of Maine law which prohibits the Maine people's tax dollars paying for elective abortions, even though there is no data to suggest that any woman has ever been denied an abortion in Maine. In keeping with the Hyde Amendment, Maine people already pay for the abortion of any MaineCare recipient if her health or life is in danger or for hardship cases in which the pregnancy was the result of rape or incest.

L.D. 820 would force every Maine taxpayer to fund elective, non-medically necessary abortion right up to the point of viability for any reason. Maine people are fair minded and reasonable. This is reflected in the most recent survey of registered Maine voters, conducted April 29<sup>th</sup> through May 2<sup>nd</sup> 2019, this year. This survey found the majority of Maine voters oppose taxpayer funding of abortions, 62% are opposed. Additionally, the majority

of women opposed taxpayer funded abortion. This bill is too extreme and it is not in keeping with the values of most Maine people. Whatever happened to the abortion lobby demanding that the government keep out of women's reproductive rights? Proponents of L.D. 820 are now demanding full government intervention to the point of coercing taxpayers to pay for elected abortions. This is a major overreach. Do we want our state to be the place where the right of conscience and the religious liberty of our people is trampled and sacrificed to political ideology. The people of Maine have empowered us with the right to task, but we must remember this represents a very taking of their lifeblood. The term 'taxpayer' is so often used that we forget the full meaning. Every week Maine people give up their time, their most finite and precious resource, in exchange for a paycheck. As lawmakers, we have been given the authority to dip into the paycheck but we are entrusted to do so judiciously, with grave consideration on the spending of those dollars. Our decision today cannot be to strip the religious liberty of Maine people through taxation. In L.D. 820 we are being asked to give what is not ours to give. Let those who wish to fund abortions donate their money to the cause. Maine people should not be forced to have their hard earned tax dollars used to take the life of a living pre-born child. I urge you to oppose L.D. 820.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator Cyrway.

Senator **CYRWAY:** Thank you, Mr. President. Ladies and gentlemen of the Senate, I'm a realist and last fall I went and took a walk and I said, 'I'm going to go see what's actually happening out here in Waterville, Maine.' So I went to Women's First, and I kind of felt weird being a man and going into a place where the door said Women's First, but I went in. I asked, 'How's things going and I'd like to know a little more about what you're doing.' They welcomed me in and they showed me the areas that they work with young ladies and young men in situations when young teenagers, or young women, that get pregnant in assorted ways that they're not really happy about the situation or maybe they're nervous or maybe they've been involved in drugs or they've been involved in situations with their family which they've had some discussions of whether they should have the baby or not. It's so many things that can happen. But there are answers out there. I went in and these people were welcoming any ladies to go in and take the time and sit with them and discuss with them the importance of what they have. They have a life and they have a future and they also can make good decisions on what can happen from where they are at that point. They get a chance to even have an ultrasound and see their baby's heartbeat and see a picture of what their child looks like. When they see that it's amazing. It's like, 'Wow, I can't do this now. I feel that there is a life and I do have something to look forward to and I have a dream. I can picture something. I have hope.' This is what this takes away, hope. We have coverage right now for any medical issues. We have all that coverage, but we need hope. That is what I'm seeing as lacking this year, in this session, and I hope we start thinking about that. We have a life here and I hope, and I have hope, that everyone here will think about that. These people have a chance. Don't take it away because if we go and do this then they don't even have to think about it. They don't have to go and research and see what's out there and what they can do. Who knows, I mean, they might even have a family instead of just thinking about a job all day long and saying, 'Well,

I'm going to be rich. I don't have to support a family.' But you know what? It's not money. Money is not what runs this. It's life. Don't take life away. That's what we're doing here. I talked with the Pastor this morning. He couldn't believe it, that we're even discussing this. Please follow my light. Thank you, Mr. President.

**THE PRESIDENT:** The Chair recognizes the Senator from Arostook, Senator Carpenter.

Senator **CARPENTER:** Thank you, Mr. President. Ladies and gentlemen of the Senate, obviously there's a lot of deep feelings of passion on both sides of this issue and a few minutes from now I'm going to cast a vote that's going to make me real unpopular with some members of my own party, and I regret that. I don't really want to talk about that. I want to talk a little bit about life and I want to call out some of the folks here who consider themselves to be pro-life. I'll call you out again before the session's over with because there's more to life than just birth. There's the feeding. There's the housing. There's the clothing. There's educating. Regardless of the circumstances you're born into, regardless of the income or the work ethic of your parents, regardless of the national origin that you happen to have, later this session we're going to have other bills about funding some of those other aspects of life. So for the supporters and the activists here who might applaud my vote this morning, I just hope that you're there a little later on to remind some of the folks who are going to vote the same way that I do this morning and ask them to support little children going to school; having enough food, breakfast, lunch, dinner; protection from abuse; to give them the funds to house themselves and to clothe themselves. So, please, keep that in mind because I will remind you later on this session.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator Bellows.

Senator **BELLOWS:** Thank you, Mr. President. Ladies and gentlemen of the Senate, we do our constituents a disservice. We are wrong if we refer to this as taxpayer funding for abortion because this is an insurance coverage bill. What the pending motion seeks to do is require that insurance companies cover abortion just like any other routine medical procedure. Certainly our constituents expect this Body to be political, but they do not expect insurance companies to be political in terms of decisions about what is a covered medical procedure and what isn't. There is no allocation of funds in this bill. It is simply an insurance coverage bill.

Second, I think it's really important that we not judge who might be impacted by this bill, and I was so moved by the courage of the women who came before the committee to share their stories. I'm going to share the story of one, of Dana Pierce, who wrote her story in the Press Herald, and I will quote. 'On January 25<sup>th</sup> my husband and I went to what we thought would be a routine ultrasound in the 32<sup>nd</sup> week of a normal pregnancy. I'm a veterinarian, he's a surgeon. We know how to read an ultrasound and we quickly realized that something was very wrong. The ultrasound revealed that our son had lethal skeletal dysplasia, the results of a random genetic mutation. He would not be able to breathe outside of me. Additionally, his femur was broken and there were other healed fractures. I find it difficult to convey the magnitude of grief we experienced in those moments. The staff was very gentle and considerate, but there was no way to make

his diagnosis okay. We wanted to be clear with the providers. We knew this was a lethal condition. We would end the pregnancy. At that moment of profound pain and loss we just needed to know the plan. I assumed I would be admitted to the hospital that day, or maybe the next. However, that's when I learned I couldn't be treated in Maine. We would have to fly across the country to one of the four places that would treat patients like me. It is hard to put into words how that realization broke me.' I'm going to skip a couple of her paragraphs for the purposes of time, but I do want to go on to say, 'While some insurance companies cover abortion there is no guarantee your health insurance will. Mine didn't. So amid our shock and grief and the scramble for last minute plane tickets to Colorado, childcare for our three year old daughter, and hotel reservations, we had to bring money for the abortion itself, \$25,000. Advocating for others is a way we are coping with our grief. I am working with my providers here in Maine so they are better prepared to help other patients like me. Abortions later in pregnancy are so very rare, so stigmatized, and so misunderstood. We didn't know what to expect. We didn't know what questions to ask. For people who have their own experience, please know you are not alone in your grief. Your decisions are understood and respected.' I just think it's really important. We cannot imagine what it must have been like for Dana and her husband, who very much wanted their child, their child who suffered from a lethal and painful condition, and that is why they chose abortion.

Earlier it was said that there is no data to suggest that any woman has been turned away from exercising her decision to have an abortion here in Maine. That is simply not true. Again, there is a turn-away study conducted by Advancing New Standards in Reproductive Health that did, in fact, survey 30 abortion facilities around the country, surveyed women, and did, in fact, find that women are turned away because of lack of insurance coverage. So this bill is simply about requiring our insurance companies to cover abortions, just like any other medical procedure, to ensure that it remains safe, legal, and available so that women and their families, in consultation with their doctors and their churches, can make their own decisions. There is no allocation of taxpayer funding. It is wrong to say that this is taxpayer funding for abortions. This is simply expansion of insurance coverage so that insurance may not make political decisions or discriminate against women based on their choices. Thank you.

**THE PRESIDENT:** The Chair recognizes the Senator from Oxford, Senator Hamper.

Senator **HAMPER:** Thank you, Mr. President. Mr. President, ladies and gentlemen of the Senate, \$375,843 on the fiscal note for FY 20-21. Hearing scuttlebutt that the Department is being pushed into funding this within existing resources. I'm asked to fund life. I'm asked, in the future, looking at funding of life. \$375,000 is enough to cover three more slots on the Section 21 wait list. Simple as that. If the Department can do this they can do that. Elective surgery. Elective. The Senator from Kennebec, Senator Bellows, decided to go with the motion. I'll tell you my story. In 1979, January, my first son was born. We were told after about 10 days after he was born the blisters on his back was due to he was jaundice and he got burns from the florescent lights. We continued to research and continued to research. Ten weeks later I was at Boston Children's counting the breaths of my

first son as he exited life. My wife was pregnant again in 1980. First child died due to a genetic skin disease, epidermolysis bullo'sa. We were told there was a one in four chance. We rolled the dice. We lost. Standing in the delivery room watching my second son being born, and as he was exiting, if you will. As he was half way out the doctor rolled him over and watched the left elbow go by void of skin. Epidermolysis bullo'sa. We were told during her pregnancy that we could go and have a skin biopsy done in utero and we would take the risk of not only damaging the child but then we would know. We would know whether or not he had this lethal disease. We chose not to because we put it in God's hands as to the fate of the child. I had not, at that point, considered the whole pro-life/pro-choice debate. This was 1980, so I was 25 years old and had not considered my stance on pro-life until I was forced into this situation with my second child, Mathew. We realized that abortion wasn't an option for us, that we were going to take the child as he was going to be. Eight weeks later I essentially pulled the plug on my second child at age 25. The whole abortion issue is very, very tender to me for these reasons. I just would like to summarize what I'm going to say here, summarize this bill to me. It's just simply a question of who pays for fetal dismemberment. Thank you, Mr. President.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator Cyrway.

Senator **CYRWAY:** Thank you, Mr. President. This is life. We're talking about life. This goes beyond medical care. Right now 34 states, including Maine, already follow federal standards of providing abortions in endangered life, rape, and incest. They take care of medical treatment. If we need medical, we do. We have doctors that do take care of that. We don't want to go beyond that and just say, 'I can't have a baby because I'm not ready or I don't want to have one because, you know, I don't like this guy anymore.' This is life. I can tell you there's a lot of stories out there where a lot of ladies, and I've talked to them because I'm with law enforcement. I've actually gone to homes and there is nothing more important than their child. Nothing. Don't take that away from me. That's what we're doing here, we're taking their child away before they even get a chance to understand it. Let's not take that decision away from these nice ladies that will have a chance in life to enjoy life with their children. Thank you.

**THE PRESIDENT:** The Chair recognizes the Senator from Androscoggin, Senator Timberlake.

Senator **TIMBERLAKE:** Mr. President, ladies and gentlemen of the Senate, I'm not standing before you to tell you whether you should be pro-choice or pro-life or not. I'm here to ask a couple of very short, simple questions. In my feeling, this bill is a taxpayer funded. This is not here and it's not about, it's making businesses, this bill is telling businesses that they have to supply insurance to supply abortions, even if you don't believe it in your business, even if you're a pro-life business. I think the United States has been down this road not too long ago with a company that has won this case. The question I present through the Chair, if I may, is: why wasn't this bill ever sent to the Insurance Board to find out what this is going to cost the businesses and the State of Maine? This was exempted from having that happen. I think it's wrong. I think it's a disservice to the businesses of the state of Maine and the State of Maine itself. I would also like to read,

because we heard this wasn't going to cost the taxpayers of the state of Maine, in the summary of the bill: this bill requires the Department of Health and Human Services to provide coverage to a MaineCare member for abortion services. This bill provides that abortion services that are not approved Medicare services must be funded by the State. This bill also directs the Department of Health and Human Services to adopt the rules no later than March 1, 2020. This is paid by the taxpayers of the state of Maine. This is being forced on the people who have strong pro-life beliefs and you are now telling them they have to pay for abortions. I think it's wrong. Thank you, and I still pose my question through the Chair to be answered, why it wasn't put to the Insurance Board.

**THE PRESIDENT:** The Senator from Androscoggin, Senator Timberlake, has posed a question through the Chair for anyone who can answer. The pending question before the Senate is Acceptance of the Majority Ought to Pass as Amended Report. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

**ROLL CALL (#95)**

**YEAS:** Senators: BELLOWS, BREEN, CARSON, CHENETTE, CHIPMAN, CLAXTON, DESCHAMBAULT, DILL, GRATWICK, HERBIG, LAWRENCE, LIBBY, LUCHINI, MILLETT, MIRAMANT, SANBORN H, SANBORN L, VITELLI, PRESIDENT JACKSON

**NAYS:** Senators: BLACK, CARPENTER, CYRWAY, DAVIS, DIAMOND, DOW, FARRIN, FOLEY, GUERIN, HAMPER, KEIM, MOORE, POULIOT, ROSEN, TIMBERLAKE, WOODSOME

19 Senators having voted in the affirmative and 16 Senators having voted in the negative, the motion by Senator H. SANBORN of Cumberland to **ACCEPT** the Majority **OUGHT TO PASS AS AMENDED** Report, in concurrence, **PREVAILED**.

Bill **READ ONCE**.

Committee Amendment "A" (H-210) **READ** and **ADOPTED**, in concurrence.

Under suspension of the Rules, **READ A SECOND TIME** and **PASSED TO BE ENGROSSED AS AMENDED**, in concurrence.

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All matters thus acted upon were ordered sent down forthwith for concurrence.  
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The Chair laid before the Senate the following Tabled and Later Assigned (5/2/19) matter:

Bill "An Act To Protect Maine Children and Students from Preventable Diseases by Repealing Certain Exemptions from the Laws Governing Immunization Requirements"  
H.P. 586 L.D. 798  
(S "A" S-66 to C "A" H-120)

Tabled - May 9, 2019 by Senator **LIBBY** of Androscoggin

Pending - **FURTHER CONSIDERATION**

(In Senate, May 2, 2019, on motion by Senator **MILLETT** of Cumberland, the Majority **OUGHT TO PASS AS AMENDED** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-120) AS AMENDED BY SENATE AMENDMENT "A" (S-66)** thereto in **NON-CONCURRENCE**.)

(In House, that Body **INSISTED** on its former action whereby the Bill was **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-120)**.)

Senator **LIBBY** of Androscoggin moved the Senate **RECEDE** and **CONCUR**.

On motion by Senator **TIMBERLAKE** of Androscoggin, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

**THE PRESIDENT:** The Chair recognizes the Senator from Kennebec, Senator Pouliot.

Senator **POULIOT:** Mr. President, men and women of the Senate, the chief architect of our Constitution, James Madison, once proclaimed in Republics: the great danger is that the majority may not sufficiently respect the rights of the minority. I stand in opposition to this bill for three primary reasons. First, this bill is a solution in search of a problem. If there truly is a crisis to be solved why is implementation of this bill being delayed for over two years? Second, if there were a problem this bill would do nothing to address it. Our adult vaccination rate is below 20% yet we're told without any evidence that raising the school rate by 2% to 3% will have a positive impact on public health. There is simply no data to support this. Finally, this bill shreds the fundamental liberty to decide, without coercion, whether or not to consent. When the State identifies those who have used exemptions and then threatens to deprive their children of an education unless they submit to that procedure then we, as a society, have crossed a line that ought never be crossed. Empowering the government to inject people against their will is far more dangerous than anything this legislation purports to solve.

Much has been made of the amendment to L.D. 798 that would expand medical exemptions but no matter how expanded medical exemptions still require doctors willing to write them. A couple of questions that this poses. As our medical providers are rapidly consolidated into several umbrella entities, how many medical providers will be forbidden to write medical exemptions no matter how warranted? Of those permitted to write them, how many will have the courage to do so given the fact that many proponents of this bill have made no secret their intention to identify and marginalize those who do. When a parent finally finds a provider who will agree to consider a medical exemption,