

4/12/2013

House Finance Committee,

We represent all private Obstetrician-Gynecologist physicians practicing in Fairbanks. We are writing to express concern with two recent bills: HB 173, and SB 49. These similar bills seek to define medical indications for Medicaid funding of abortion.

The list of medical indications in both bills is far from a complete list of potential maternal complications of pregnancy for which abortion could be considered medically indicated. This may cause some women to delay getting necessary care should they have a medical indication not listed. Aside from the needless suffering that this might cause, this would also be a much more expensive option for the state of Alaska, when a patient might require further hospitalization or treatment.

The bill would also prohibit Medicaid payment of abortion in cases of fetal anomalies, even lethal ones. In cases that the fetus has no chance of survival, an option is often given to the mother to have an abortion. The risks of ongoing pregnancy and childbirth are far more dangerous than aborting the pregnancy. This can also save her the mental anguish that would go with carrying a fetus to term; a baby that is likely to suffer once he or she is born. Some women when faced with such a choice will decide to continue the pregnancy, and we support them in this choice, however the majority will opt for abortion. These complications of pregnancy are luckily not common, but as obstetricians we have, each one of us, encountered them multiple times in our careers.

We urge you not to make a determination of the worth of these bills on financial considerations alone, but do note that it is very likely that these bills will be challenged in the courts, which would be again a needless waste of taxpayer expense, especially as these bills do not have much chance of being upheld.

As physicians we are already required to document medical necessity when requesting payment from Medicaid for procedures performed, including abortion. It is our understanding that there have not been attempts made to limit Medicaid payments for other procedures by legislation.

We feel that passage of these bills have the potential to significantly adversely impact OB/Gyn medical care in Alaska. Please take the responsible action, and vote no to prevent these bills from becoming law.

Thank you,

Dr. Ellie Hogenson, MD, FACOG; Dr. Kimberly Mudge, DO, FACOG  
Chena Obstetrics & Gynecology

Dr. Peter Lawrason, MD, FACOG  
Obstetrics & Gynecology

Dr. Karl Baurick, MD, FACOG; Dr. Doris Heilman, MD, FACOG  
Interior Women's Health

Dr. Mark Miles, MD, FACOG  
University Women's Health

Dr. Richard Hess, MD, FACOG  
Tanana Valley Clinic

~~Joanie~~

~~From: kime mcclintock [mcclintock.k@gmail.com]  
Sent: Saturday, April 13, 2013 10:08 AM  
To: jcleary@gci.net  
Subject: testimony~~

TO: House Finance Com.  
RE: SB 49

To Whom it may concern:

My name is Kime McClintock and I am a constituent in SD L. I am currently attending graduate school in New Orleans. I oppose SB 49 and urge the committee members to join me.

I testified on this bill in March in Senate Judiciary. I would like to add three things to my previous comments. First, I support the women's health amendment—family planning is not only a wise financial investment, but improves the health outcomes of women, children, and families. But we cannot expand health access to some women at the expense of others. This bill ultimately hurts women, sets bad precedence, and negates any good done by the family planning amendment.

Secondly, I am continually shocked that this bill and others preceding it do not take into consideration the ample research and evidence which show that restricting access to abortion—which this bill does—will not improve women's health or address the root cause of the need for abortion. Countries with the strictest abortion policies do NOT have lower rates of abortion: they DO have higher rates of unsafe abortion and maternal deaths related to unsafe abortion. This is not where I want Alaska to head.

Lastly, I want to thank my Senator, Kevin Meyer, for returning my call regarding this bill and address two comments he made. Unfortunately, as he called me after midnight, I was not able to voice these comments directly. His point was that "this bill is simply trying to address what is medically necessary and make sure that we're only paying for what is medically necessary." First, Medicaid pays for plenty of health care services which do not fit into your definition of medically necessary. And I believe they should—it is good health care policy to pay for care that prevents people from being in dire health situations. Secondly, I believe that all abortions are medically necessary. No woman wants to be in that situation; no woman takes that decision lightly. Women across the world seek unsafe abortions when safe options are unavailable. They choose to pursue unsafe and unhygienic abortions—which often lead to death or disability—for a procedure that they think is necessary. It is offensive to take this reality lightly. Women seek abortion care because they find it medically necessary, having come to that conclusion with their doctor, family, and faith. It is discrimination to say that their medically necessary care is different from other women's medically necessary care.

Thank you for your time. Again, please oppose SB49.

Kime McClintock

6525 Midwinger Blvd. 907-351-2089  
Anchorage, AK 99516  
House Dist. 23  
Senate Dist L

4/13/2013

TESTIMONY FOR HOUSE FINANCE COMMITTEE RE: SB49—A BILL  
RESTRICTING ACCESS TO ABORTION FOR LOW INCOME WOMEN

I urge you to vote against SB49. I believe that it doesn't matter if you are Republican or Democrat, that it is a basic tenant of a free society that government should not interfere in the personal decisions of its citizens. Especially as a woman, I do not want the government making decisions for me, for my body, for my health, and not for important decisions in my life.

I understand that you want to decrease the number of abortions in this state. I agree that is a laudable goal. But I submit that the best way to decrease abortions is to provide full funding for Family Planning and comprehensive Sex Education in our schools. Then all women have access to effective Birth Control and all sexually active people have the information they need to protect themselves from pregnancy. Those two methods have been proven to prevent the need for abortion.

I understand you also want to save money and balance the state budget. I believe this is an ineffective way to do that and that limiting access to abortion for low income women will actually cost more money. Medical costs associated with pregnancy and child birth are much higher than those for the abortion procedure. In addition, at the end of that there is a child. A poor child who has new medical expenses which will then be covered by Medicaid. A poor child who may need additional services of all sorts.

I understand you may have an objection to abortion as a general moral principle of your own. But abortion is still legal in this country. You may not want to have to pay for someone else's decisions, and you don't want government to have to pay either. However in a democratic society, that is what government does. It often pays for programs and services that some of its citizens don't support; there are countless examples from all sides of debate: foreign wars, foreign aid for repressive governments, subsidies for tobacco companies, tax subsidies for oil companies, support for environmental protection or State Parks. Any time the government pays for something there is a group which could object. But again, abortion is still legal in this country. And as long as I have access to it, then poor women have a right to equal access to it.

What we have left is another attempt on the part of the government to intrude into women's lives, and to control them. Do the members of this government think they know better than any particular woman what is best for her, for her life, for her family, maybe for the children she already has? Do they know what is in her conscious, in her heart? Can they walk in her shoes?

Submitted by:  
Barbara Joan Cleary (Joanie)  
6525 Michigan Blvd.  
Anchorage, AK 99516  
907-346-1878

House Dist. 23  
Senate Dist. L

Barbara Cleary  
April 13, 2013

Dear House Finance Secretary,

I am writing to give public testimony against SB49, which would eliminate public funding for abortion in most cases by limiting Medicaid coverage to "medically necessary" abortions.

Alaskans have long rejected government intrusion in women's decision-making. The Alaska Constitution requires that all women have access to abortion care regardless of their economic status. Likewise, our state Supreme Court has long recognized that abortion should be available and affordable for low income women facing a variety of circumstances, without government intrusion.

SB49 is blatant government interference in women's decision-making, and puts women's health at risk. Funding restrictions in the bill would potentially deter or delay women from seeking early abortion care and make it more likely that women will continue a potentially health-threatening pregnancy, undergo later abortion procedures that could endanger their health, or bear unwanted children.

I understand that the Senate added an amendment to SB49 that would implement a program under Medicaid giving more low income women access to birth control. I support increased access to family planning, but it should not come at the cost of reduced access to the full range of reproductive health care, including abortion. The inclusion of that amendment to fund family planning for low income women does not change the fact that SB49 is a bad bill for women's health.

Pregnancy decisions should be left up to a woman and her doctor. Current state regulations already require doctors to certify that publicly funded abortions are medically necessary, and an additional layer of certification was recently added by the DHSS. To my knowledge no problem exists with the system of evaluating medical necessity under current law.

I am concerned that proponents of SB49 are pushing an ideological agenda at a time when they should be focusing on the very real issues that matter most to Alaskans, like education, the economy and energy.

I urge you to reject SB49.

Thank you,

Cindy Litman, House District 34

715 Sawmill Creek Rd.  
Sitka, AK 99835  
907.623.3969

To: The Alaska State Legislature  
Juneau, Alaska  
Fax # 907-465-6813

From: Heather Vice  
Anchorage, Alaska: I vote!  
907-562-1828

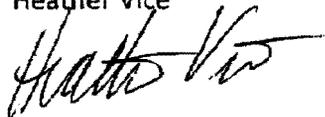
Re: SB49

I am 28 years old, born and raised in Anchorage, Alaska. All of my female health care comes from Planned Parenthood, because I cannot afford anything else. I have been working in the culinary industry since high school; this industry is low paying and often does not offer health insurance.

I have always felt safe and welcomed during my appointments at Planned Parenthood. The staff has treated me in a professional manor and with respect.

I oppose Senate Bill 49

Sincerely,  
Heather Vice

A handwritten signature in black ink, appearing to read "Heather Vice", written in a cursive style.

TO: House Finance Secretary for distribution to Committee Members  
FROM: Susan E. Schrader, Juneau / House District 32  
DATE: April 12, 2013  
RE: SSSB 49 am: Medicaid Payment for Abortions  
VIA: fax to 907-465-6813

I am opposed to SB 49, as it represents yet another attempt of politicians to intervene in the very personal medical decisions of Alaskan women - decisions that should be left up to women to make in consultation with their family, their faith, and their physician.

I have no illusions that my comments will influence those of you who are philosophically opposed to abortion rights; however, I would like to address those of you who appreciate the complexity of this issue and the challenges any woman faces who must decide whether to raise a child, consider adoption, or end her pregnancy.

Senator Coghill has stated that this legislation brings clarity to the term "medically necessary." But I think all of us are sophisticated enough to realize that SB 49 is simply another attempt to limit access to abortion.

**Limiting access to Medicaid-funded abortions will NOT reduce the number of abortions; it will only limit the number of *safe, legal* abortions. It will drive women to seek out illegal procedures – we have only to look at the years before *Roe v. Wade* for the evidence.**

The State of Alaska's request for federal approval to extend Medicaid eligibility for family planning services is long overdue, and I am pleased to see the Senate Amendment to SB 49 that addresses the Women's Health Program. We know that family planning and birth control services are very effective at reducing the number of abortions, and these methods do so **without trampling on women's freedom to make our own health care decisions.**

**Unfortunately, the amendment to SB 49 to enhance access to family planning for some women comes *at the expense* of other women's right to autonomy and privacy in their health care decisions. For this reason, Alaskan legislators should not support this bill.**

Susan E. Schrader  
2623 John Street  
Juneau, AK 99801  
907-789-1269

House Finance Committee Hearing  
April 13, 2013  
9:00am

Subject: Please Amend Senate Bill 49

Thank you for giving me the opportunity to testify on Senate Bill 49. I respectfully urge the committee members to oppose Senate Bill 49 for many reasons. This bill is unnecessary in that it seeks to define a concept that has already been defined and clarified by the Supreme Court. Medical necessity should continue to be left up to women and their doctors, just as we allow other healthcare to be decided between patients and their providers.

I do wholeheartedly support the provision for the Women's Health Program. Research in countries around the world shows that abortion rates are lowest in places where women and men have access to affordable contraception. If any member wishes to reduce the number of abortions in Alaska then they should support the provision that provides better access to birth control for low-income women. A significant portion of unintended pregnancies occur in the low-income population served by Medicaid. When we reduce the unintended pregnancy rate, we also reduce abortions.

That being said, nobody's health care access should come at the expense of other people, especially when it comes to safe, legal, and medically necessary procedures.

As members of the other body so eloquently stated, the piece of Senate Bill 49 that seeks to redefine "medically necessary" is unconstitutional and will likely be challenged in court.

In order to provide the best health care for Alaskan women, without wasting state resources litigating what had already been decided, I respectfully urge the members of this committee to amend Senate Bill 49 by deleting the unconstitutional redefinition and narrowing of the term "medically necessary" and move the rest of the bill to the House Floor and make it law before the deadline tomorrow at midnight. Thank you.

Miriam Landau  
3037 Doil Drive  
Anchorage, AK 99507  
House District 25, Senate District L