ALASKA STATE LEGISLATURE
HOUSE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE
April 6, 2017
3:02 p.m.

MEMBERS PRESENT

Representative Ivy Spohnholz, Chair
Representative Bryce Edgmon, Vice Chair
Representative Sam Kito
Representative Geran Tarr
Representative David Eastman
Representative Jennifer Johnston
Representative Colleen Sullivan-Leonard

MEMBERS ABSENT

Representative Matt Claman
Representative Dan Saddler

COMMITTEE CALENDAR

HOUSE BILL NO. 10
"An Act relating to the duties of the Department of Health and Social Services; relating to child-in-need-of-aid proceedings; relating to child protection; and amending Rules 6(a), 6(b)(2) and (3), 10(c)(2) and (3), 10(e)(2), 10.1, 15(f)(2), 17(c), 17(d)(2), 17.1(b), 17.1(d)(3), 17.2(a), 17.2(e), 17.2(f), 17.3, 18(c), and 19.1(c), Alaska Child in Need of Aid Rules of Procedure, and repealing Rules 17.1(a), 17.1(c), and 17.1(d)(2), Alaska Child in Need of Aid Rules of Procedure."

- HEARD & HELD

SENATE CONCURRENT RESOLUTION NO. 2
Proclaiming April 2017 as Sexual Assault Awareness Month.

- MOVED SCR 2 OUT OF COMMITTEE

SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 54
"An Act providing an end-of-life option for terminally ill individuals; and providing for an effective date."

- HEARD & HELD

HOUSE BILL NO. 25

"An Act relating to insurance coverage for contraceptives and related services; relating to medical assistance coverage for contraceptives and related services; and providing for an effective date."

- SCHEDULED BUT NOT HEARD

PREVIOUS COMMITTEE ACTION

BILL: HB 10
SHORT TITLE: CHILD IN NEED OF AID/PROTECTION; DUTIES
SPONSOR(s): REPRESENTATIVE(s) WILSON

01/18/17	(H)	PREFILE RELEASED 1/9/17
01/18/17	(H)	READ THE FIRST TIME - REFERRALS
01/18/17	(H)	HSS, JUD
04/06/17	(H)	HSS AT 3:00 PM CAPITOL 106

BILL: SCR 2
SHORT TITLE: SEXUAL ASSAULT AWARENESS MONTH: APRIL 2017
SPONSOR(s): SENATOR(s) MEYER

02/08/17	(S)	READ THE FIRST TIME - REFERRALS
02/08/17	(S)	STA, HSS
02/24/17	(S)	STA REFERRAL WAIVED UC
02/27/17	(S)	HSS AT 1:30 PM BUTROVICH 205
02/27/17	(S)	Heard & Held
02/27/17	(S)	MINUTE(HSS)
03/01/17	(S)	HSS AT 1:30 PM BUTROVICH 205
03/01/17	(S)	Moved SCR 2 Out of Committee
03/01/17	(S)	MINUTE(HSS)
03/03/17	(S)	HSS RPT 5DP
03/03/17	(S)	DP: WILSON, BEGICH, VON IMHOF, GIESSEL, MICCICHE
03/06/17	(S)	TRANSMITTED TO (H)
03/06/17	(S)	VERSION: SCR 2
03/08/17	(H)	READ THE FIRST TIME - REFERRALS
03/08/17	(H)	STA, HSS
03/21/17	(H)	STA AT 5:30 PM GRUENBERG 120
03/21/17	(H)	Moved SCR 2 Out of Committee
03/21/17	(H)	MINUTE(STA)
03/24/17	(H)	STA RPT 7DP
03/24/17	(H)	DP: JOHNSON, WOOL, LEDOUX, KNOPP, BIRCH, TUCK, KREISS-TOMKINS
04/04/17	(H)	HSS AT 3:00 PM CAPITOL 106
04/04/17	(H)	Heard & Held
04/04/17	(H)	MINUTE(HSS)
04/06/17	(H)	HSS AT 3:00 PM CAPITOL 106

BILL: HB 54
SHORT TITLE: TERMINALLY ILL: ENDING LIFE OPTION
SPONSOR(s): REPRESENTATIVE(s) DRUMMOND

01/18/17	(H)	READ THE FIRST TIME - REFERRALS
01/18/17	(H)	HSS, JUD
03/14/17	(H)	HSS AT 3:00 PM CAPITOL 106
03/14/17	(H)	<Bill Hearing Canceled>
03/27/17	(H)	SPONSOR SUBSTITUTE INTRODUCED
03/27/17	(H)	READ THE FIRST TIME - REFERRALS
03/27/17	(H)	HSS, JUD
03/28/17	(H)	HSS AT 3:00 PM CAPITOL 106
03/28/17	(H)	Heard & Held
03/28/17	(H)	MINUTE(HSS)
04/06/17	(H)	HSS AT 3:00 PM CAPITOL 106

WITNESS REGISTER

REPRESENTATIVE TAMMIE WILSON
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Presented HB 10 as the sponsor of the bill.

CHRISTY LAWTON, Director
Central Office
Office of Children's Services
Department of Health and Social Services
Juneau, Alaska
POSITION STATEMENT: Answered questions during discussion of HB 10.

CHRISTINE MARASIGAN, Staff
Senator Kevin Meyer
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Presented SCR 2 on behalf of the resolution sponsor, Senator Meyer.

TARA BURNS
Community United for Safety And Protection
Anchorage, Alaska
POSITION STATEMENT: Testified in support of the resolution.

REPRESENTATIVE HARRIET DRUMMOND
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented SSHB 54, as the sponsor of the bill.

KRISTIN KRANENDONK, Staff
Representative Harriet Drummond
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Presented SSHB 54, on behalf of the sponsor of the bill, Representative Drummond.

KRISTEN HANSON, Chair
Patients' Rights Action Group
New York, New York
POSITION STATEMENT: Testified for James Hanson during discussion of HB 54.

WILLIAM HARRINGTON
Anchorage, Alaska
POSITION STATEMENT: Testified in support of HB 54.

KARMELLE DEILLE
Anchorage, Alaska
POSITION STATEMENT: Testified in opposition to HB 54.

PAMELA SAMASH, President
Right to Life
Nenana, Alaska
POSITION STATEMENT: Testified in opposition to HB 54.

JEANNE ANDERSON, MD
Katmai College
Anchorage, Alaska
POSITION STATEMENT: Testified in opposition to HB 54.

MARILYN GOLDEN, Senior Policy Analyst
Disability Rights Education and Defense Fund
Berkeley, California
POSITION STATEMENT: Testified in opposition to HB 54.

FRANK MCGILVARY
Fairbanks, Alaska
POSITION STATEMENT: Testified in opposition to HB 54.

ACTION NARRATIVE

3:02:57 PM

CHAIR IVY SPOHNHOLZ called the House Health and Social Services Standing Committee meeting to order at 3:02 p.m. Representatives Spohnholz, Edgmon, Kito, and Sullivan-Leonard were present at the call to order. Representatives Johnston, Tarr, and Eastman arrived as the meeting was in progress.

HB 10-CHILD IN NEED OF AID/PROTECTION; DUTIES

3:05:13 PM

CHAIR SPOHNHOLZ announced that the first order of business would be HOUSE BILL NO. 10, "An Act relating to the duties of the Department of Health and Social Services; relating to child-in-need-of-aid proceedings; relating to child protection; and amending Rules 6(a), 6(b)(2) and (3), 10(c)(2) and (3), 10(e)(2), 10.1, 15(f)(2), 17(c), 17(d)(2), 17.1(b), 17.1(d)(3), 17.2(a), 17.2(e), 17.2(f), 17.3, 18(c), and 19.1(c), Alaska Child in Need of Aid Rules of Procedure, and repealing Rules 17.1(a), 17.1(c), and 17.1(d)(2), Alaska Child in Need of Aid Rules of Procedure."

3:05:27 PM

REPRESENTATIVE TAMMIE WILSON, Alaska State Legislature, paraphrased from the Sponsor Statement [Included in members' packets], which read:

> Inequality should not be tolerated! Currently, the Office of Children Services (OCS) has two discriminatory standards for Alaska's children. Congress passed the Indian Child Welfare Act (ICWA) in 1978 as a response to then-prevalent culturally insensitive state government child welfare practices that negatively impacted "Indian children", their families, and their tribes. The ICWA aims to ensure that Indian children are removed from their parents only after carefully crafted efforts have been made to maintain the Indian family. In 1996, the Alaska Court System received a major federal grant to study and improve the state's handling of child protection cases, including child abuse, neglect, foster care, and adoption litigation. These cases are called child in need of aid cases, or CINA. The CINA guide describes how these cases are handled by the state, the roles played by various individuals, agencies, and courts. The child's ethnicity changes the level of the State's duty. When the child in custody is Indian, the

State has an affirmative duty to make "active efforts" to reunify the family (ICWA). When the child is non-Indian, the State must make "reasonable efforts" (CINA). "Active efforts" is a more stringent standard than "reasonable efforts," which embody duties that touch on important rights of parents. HB 10 raises the standard so that all of Alaska's children are treated the same.

REPRESENTATIVE WILSON stated that one standard would make it easier for the department, as all staff would be trained specifically for this standard. She pointed out that there was a difference between active and reasonable. Reasonable was determined as the parents need to follow the guidelines and find the services; whereas, active required the case worker to be more active in the program. Whether in an Alaska Native community or not, most parents found themselves scared and not knowing how the system worked. She declared that a steadier means to find the necessary resources to reunify the family, including counseling and drug rehabilitation, was the purpose.

3:08:54 PM

REPRESENTATIVE WILSON paraphrased the Sectional Analysis, [included in members' packets], which read as follows:

Section 1. AS 47.05.065 This section is amended to ensure that remedial and rehabilitative programs are offered to all families so they have the opportunity to remedy the parental conduct or condition in the home that placed the child at risk of damage or harm and that the more stringent requirement of "active" efforts (as opposed to "reasonable" efforts) are made. That the child is placed in a safe, secure, and stable environment that is in the least restrictive setting that most approximates a family home in which the child's needs may be met and that is within reasonable proximate to the child's home

Sec. 2. AS 47.10.011 This section is amended to ensure that the more stringent standards are used by the court when determining, by a preponderance of the evidence, that a child is in need of aid.

Sec. 3. AS 47.10.011 This section is amended by adding a new subsection so that the same standards used to make a determination of physical damage or harm are

parallel to the more stringent standards of U.S.C. 1901-1963, as set forth in the Indian Child Welfare Act of 1978, (ICWA) regardless of whether the child is an Indian child.

Sec. 4. AS 47.10.013(a) This section is amended to require that the court substantiate the more stringent standards of "serious" risk, as opposed to "substantial" risk. It also adds "emotional or physical damage," in addition to "harm" to parallel ICWA standards.

Sec. 5. AS 47.10.015. This section is amended to ensure that the more stringent standards of ICWA are used by the court when determining, by a preponderance of the evidence, that a child was a victim of harm or neglect from the conduct by, or conditions created by a parent, guardian or custodian.

Sec. 6. AS 47.10.030(c) This section is amended to require the court to make a finding that the conditions or surroundings that prevention of imminent physical damage or harm to the child requires the immediate assumption of custody by the court, the court may order, by endorsement upon the summons, that the officer serving the summons shall take the child into custody and make temporary placement of the child that the court directs.

Sec. 7. AS 47.10.080(c) AS 47.10.80(1) requires the department to place the child in a setting as provided under AS 47.14.100 or 25 U.S.C. 1915(b) and requires active efforts to find a permanent placement for the child.

Sec. 8. AS 47.10.080(f) This section is amended to require an additional finding by the court as to whether the child should be returned to the custody of the parent or guardian.

Sec. 9. AS 47.10.080(l) It requires a more stringent standard that when the department is establishing the permanent plan for the child, the court shall make appropriate written findings, including findings related to whether "returning the child to the child's parent or guardian is likely to result in serious emotional or physical damage to the child".

Sec. 10. AS 47.10.080(p) This section is amended to require the more stringent standards of ICWA in that active efforts must provide opportunities for and to facilitate reasonable visitation if the child is removed from the parental home.

Sec. 11. AS 47.10.080 NEW SUB SECTION AS 47.10.080 is amended by adding a new subsection which would require that an order issued under this section not allow removal of a child from the child's home or continued placement of the child outside the child's home unless there is, at the time the order is issued, clear and convincing evidence, including the testimony of a qualified expert witness who is not employed by the department, that the child is likely to suffer serious emotional or physical damage if left with or returned to the child's parent or guardian.

Sec. 12. AS 47.10.081(b) This section has been revised to require the determination of whether continued custody of the child by the child's parent or guardian is likely to result in serious emotional or physical damage and be included in the disposition report.

Sec. 13. AS 47.10.086(a) This section has been repealed and reenacted to identify family support services; and that remedial services and rehabilitative programs may include services and programs provided by the community, or other organizations. It also requires "active" measures in referring and obtaining support services for a parent or guardian. The department's duty to make active efforts under this subsection includes the duty to assist the child's parent or guardian through the steps of a case plan and with accessing or developing the resources necessary to satisfy the case plan. The department shall tailor its active efforts to the facts and circumstances of the case and list the efforts.

Sec. 14. AS 47.10.086(b) This section is amended to parallel the more stringent standards as in ICWA.

Sec. 15. AS 47.10.086(d) This section is amended to parallel the more stringent standards as in ICWA.

Sec. 16. AS 47.10.086(e) This section is amended to parallel the more stringent standards as in ICWA.

Sec. 17. AS 47.10.086(f) This section is amended to parallel the more stringent standards as in ICWA.

Sec. 18. AS 47.10.088(a) This section is amended to parallel the more stringent standards as in ICWA. It requires that evidence beyond a reasonable doubt, including the testimony of a qualified expert witness, who is not employed by the department, that continued custody of the child by the parent or guardian is likely to result in serious physical or emotional damage to the child.

Sec. 19. AS 47.10.088(b) This section is amended for house-keeping purposes and to parallel the more stringent standards as in ICWA.

Sec. 20. AS 47.10.088(d) The section is amended to read that the department shall petition for termination of a parent's rights to a child, without making further active efforts, when a child is under the jurisdiction of the court under AS 47.10.010 and 47.10.011 and the court has made a finding under AS 47.10.086(b) that the best interests of the child do not require further active efforts by the department unless the department had documented a compelling reason for determining that the petition would not be in the best interest of the child. A compelling reason under this subsection may include care by a relative for the child.

Sec. 21. AS 47.10.088(g) This section is amended so that the department must parallel the ICWA standards. In filing a petition to terminate parental rights, the department must determine that continued custody of the child by the child's parents or guardian would likely result in serious emotional or physical damage.

Sec. 22. AS 47.10.142(a) This section is amended to parallel the more stringent standards as in ICWA.

Sec. 23. AS 47.10.142(b) This section is amended to allow for the department to take emergency custody of a minor from the minor's parent or guardian only if it

is necessary to prevent the imminent physical damage or harm to the child.

Sec. 24. AS 47.10.142(d) This section is amended to parallel the more stringent standards as in ICWA. The court must determine that allowing the department's continuing temporary legal custody of the child is based on the necessity to prevent imminent physical damage or harm to the child.

3:18:51 PM

Sec. 25. AS 47.10.142(e) This section is amended to direct the court to also determine at the temporary custody hearing whether (1) by a preponderance of the evidence, removal of the child is necessary to prevent imminent physical damage or harm to the child, or (2) by clear and convincing evidence, including the testimony of a qualified expert witness who is not employed by the department, the child would likely suffer serious physical or emotional damage if left in the child's home. If the Court finds that probable cause exists for believing that the child is a child in need of aid and that a sufficient showing has been made under either (1) or (2) of this subsection, it shall order the child committed to the department for temporary placement outside the home of the child's parent or guardian. If the court finds that probably cause does not exist for believing the child is a child in need of aid, but that a sufficient showing has not been made under (1) or (2) of their subsection the court shall order the child to be either committed to the custody of the department with temporary placement to be in the child's home or returned to the custody of the child's parent or guardian.

Sec. 26. AS 47.10.142(f) This section is amended for house-keeping purposes to parallel the more stringent standards as in ICWA. The provision, except as provided in (i) of this section, limits the temporary placement under this section to 30 days.

Sec. 27. AS 47.10.142(h) This section is amended to change the timeline for court review of the placement plan and actual placement of the child under AS 47.10.080 (I) to occur within 30 days, as opposed to

12 months, after a child is committed to the department.

Sec. 28. AS 47.10.142 This section is amended by adding a new paragraph to read: The court may only order a child committed to for temporary placement under (e) and (f) of this section for more than 30 days if the court determines by clear and convincing evidence, including the testimony of a qualified expert witness who is not employed by the department, that custody of the child by the child's parent or guardian is likely to result in imminent physical damage or harm to the child or that extraordinary circumstances exist.

Sec. 29. AS 47.10.990 This section is amended by adding a new paragraphs [sic] to define "active effort," "emotional damage," and "remedial services and rehabilitative programs".

Sec. 30. AS 47.14.100(r) is amended to read: This section is amended to parallel the more stringent efforts as in ICWA.

Sec. 31. AS 47.17.290(3) This section is amended to parallel the more stringent definition of "child abuse or neglect".

Sec. 32. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 6(a), Alaska Child in Need of Aid Rules of Procedure; amends the "Emergency Custody Without Court Order" standards to parallel the ICWA standards.

Sec. 33. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 6(b)(2), Alaska Child in Need of Aid Rules of Procedure; amends the "Form, Contents of Motion" standards for removal of a child to parallel the ICWA standards.

Sec. 34. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 6(b)(2), Alaska Child in Need of Aid Rules of Procedure, is amended to read: (3) Order;

amends the standards for emergency orders of removal of a child to parallel ICWA standards.

Sec. 35. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 10(c)(2), Alaska Child in Need of Aid Rules of Procedure; amends the standards for removal of a child to parallel the ICWA standards.

Sec. 36. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 10(c)(3), Alaska Child in Need of Aid Rules of Procedure; amends the standards for removal of a child to parallel the ICWA standards.

Sec. 37. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 10(e)(2), Alaska Child in Need of Aid Rules of Procedure; amends that standards for the return of the child to the child's home to parallel ICWA standards.

Sec. 38. The uncodified law of the State of Alaska is amended by adding a new section to read: DIRECT COURT RULE AMENDMENT. Rule 10.1(a)(1), Alaska Child in Need of Aid Rules of Procedure; amends Findings to parallel ICWA standards.

Sec. 39. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 15(f)(2), Alaska Child in Need of Aid Rules of Procedure; amends the inquiry and findings required by CINA Rule 10.1 to parallel ICWA standards.

Sec. 40. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 17(c), Alaska Child in Need of Aid Rules of Procedure; amends the Requirements for Disposition to parallel ICWA standards.

Sec. 41. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 17(d)(2), Alaska Child in Need of Aid Rules of Procedure; amends the standards the court uses to approve the removal of the child from the child's home to parallel ICWA standards.

Sec. 42. The uncodified law of the State of Alaska is amended by adding a new section to read: DIRECT COURT RULE AMENDMENT. Rule 17.1(b), Alaska Child in Need of Aid Rules of Procedure, amends the standard used by the court in determining if a continuation of active efforts is not in the best interest of the child by paralleling them to the ICWA standard.

Sec. 43. The uncodified law of the State of Alaska is amended by adding a new section to read: DIRECT COURT RULE AMENDMENT. Rule 17.1(d)(3), Alaska Child in Need of Aid Rules of Procedure; amends the standard to determine the Child's Best Interests to parallel the ICWA standard.

Sec. 44. The uncodified law of the State of Alaska is amended by adding a new section to read: DIRECT COURT RULE AMENDMENT. Rule 17.2(a), Alaska Child in Need of Aid Rules of Procedure; amends the standards for Purpose and Timing of the Hearing for a child in need of aid to parallel ICWA standards.

3:28:01 PM

Sec. 45. The uncodified law of the State of Alaska is amended by adding a new section to read: DIRECT COURT RULE AMENDMENT. Rule 17.2(e), Alaska Child in Need of Ai d Rules of Procedure; amends the standards used by the court for making written findings to parallel ICWA standards.

Sec. 46. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 17.2(f), Alaska Child in Need of Aid Rules of Procedure; amends the standards used to apply additional findings to parallel ICWA standards.

Sec. 47. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 17(3), Alaska Child in Need of Aid Rules of Procedure; amends the standard applied to petition or proxy for adoption or legal guardianship of a child under AS 47.10.111

Sec. 48. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 18(c), Alaska Child in Need of Aid

Rules of Procedure; amends the standard applied to Burden of Proof to parallel ICWA standards.

Sec. 49. The uncodified law of the State of Alaska is amended by adding a new section: DIRECT COURT RULE AMENDMENT. Rule 19.1(c), Alaska Child in Need of Aid Rules of Procedure; amends the standard applied for Disposition Order, pursuant to AS 47.10.100(a) to parallel ICWA standards.

Sec. 50. The uncodified law of the State of Alaska is amended by adding a new section: REPEAL OF COURT RULES. Rule 17.1(a), 17.1(c), and 17.1(d)(2), Alaska Child in Need of Aid Rules of Procedure, are repealed.

Sec. 51. AS 47.10.086(c), 47.10.086(g), 47.10.088(e), 47.10.990(11), 47.10.990(21), 47.10.990(27) and 47.10.990(30) are repealed.

Sec. 52. The uncodified law of the State of Alaska is amended by adding a new section: TWO-THIRDS VOTE NOT REQUIRED. Because the provisions of Rules 6(a), 6(b)(2) and (3), 10(c)(2) and (3), 10(e)(2), 10.1, 15(f)(2), 17(c), 17(d)(2), 17.1(a), 17.1(b), 17.1(c), 17.1(d)(2) and (3), 17.2(a), 17.3 and 18(c), Alaska Child in Need of Aid Rules of Procedure, that are affected by the provisions of this Act were adopted under the Alaska Supreme Court's interpretive authority exercised under art. IV, sec. 1, Constitution of the State of Alaska, secs. 32 - 45, 48, and 50 of this Act take effect even if secs. 32 - 45, 47, 48, and 50 of this Act do not receive the two thirds majority vote normally applicable to changing court rules under art. IV, sec. 15, Constitution of the State of Alaska.

Sec. 53. The uncodified law of the State of Alaska is amended by adding a new section: APPLICABILITY. This Act applies to child-in-need-of-aid petitions filed or pending on or after the effective date of this Act.

Sec. 54. The uncodified law of the State of Alaska is amended by adding a new section: CONDITIONAL EFFECT. AS 47.10.080(l), as amended by sec. 9 of this Act, AS 47.10.081(b), as amended by sec. 12 of this Act, and AS 47.10.142(d), as amended by sec. 24 of this Act take effect only if secs. 9, 12, and 24 of this Act

receive the two thirds majority vote of each house required by art. IV, sec. 15, Constitution of the State of Alaska.

3:37:24 PM

REPRESENTATIVE JOHNSTON directed attention to the qualified external witness mentioned in Sections 11, 25, and 28, and asked how Representative Wilson visualized this working.

REPRESENTATIVE WILSON replied that this was currently done in ICWA (Indian Child Welfare Act of 1978) cases, and it depended on the issues with the parents. She explained that, currently in non-ICWA cases, the expert witness could be the case worker, which would change in the proposed legislation.

REPRESENTATIVE JOHNSTON asked if there was a state or federal contract with the expert witness.

REPRESENTATIVE WILSON explained that currently this was determined by the attorneys. She stated that the fiscal note reflected the state expense for an expert witness. She said that parents could fight an OCS determination, hence the need for the expert witness. She said this need for a witness could also be necessary for terminations, as most cases not under ICWA utilized the case worker.

3:39:51 PM

REPRESENTATIVE KITO referenced the aforementioned loss of federal funding mentioned in the fiscal notes [Included in members' packets], and asked about the reason for this loss of federal funding.

REPRESENTATIVE WILSON explained that some grammatical changes in one phrase were necessary, as there needed to be a connection for child placement, but not necessarily for the child. She declared that she had no intention to eliminate federal funding. She shared that she was working with the Department of Health and Social Services to accomplish her goals without losing federal funding. She noted that the phrase indicated for change was "contrary to the welfare."

3:41:54 PM

CHRISTY LAWTON, Director, Central Office, Office of Children's Services (OCS), Department of Health and Social Services,

relayed that the statement was "contrary to the welfare for the child to stay in their own home," and that a judge had to make that finding at the very first order which indicated that OCS had the authority to have custody as there were reasons for OCS to have custody. It had to be associated to removal of the child from the home. She noted that if that first finding was lost, any eligible further funding throughout the life of the case would be lost. She relayed that OCS had spoken with Representative Wilson for ways to change the language in the proposed bill, as it was necessary to indicate that the court had ruled it was unsafe for the child to be in their own home. She added that revenue could be lost if the language from ICWA was imported into the proposed bill, as the standards for removal of a child and to keep them in a foster home would necessitate a judge acknowledging that OCS had made active efforts to prevent removal, and active efforts to promote reunification. She stated that this was a very difficult standard to meet, and, if the standard could not be met, and with the elimination of the reasonable efforts option, the state would have to support the cost of care from the general fund when the threshold for active efforts had not been met.

3:43:35 PM

REPRESENTATIVE KITO referenced the standards necessary for the termination of parental rights, and asked if there was the ability within OCS to perform an investigation to meet these standards identified in the proposed legislation.

MS. LAWTON opined that the language in the proposed bill would not change what they do when it was necessary to terminate parental rights.

3:44:08 PM

REPRESENTATIVE SULLIVAN-LEONARD declared that the proposed bill was "an incredible piece of legislation." She expressed that every child should be treated the same, and that it was concerning that the system did not treat everyone the same. She asked what the catalyst was to make these changes.

REPRESENTATIVE WILSON replied that two standards made it more difficult for the entire system, including the staff, the attorneys, and the courts. She declared that, as the standards outside ICWA were much lower for removing children, most judges had to rule in favor of removal. She said that a change to the

necessity of proof over hearsay would still allow OCS for voluntary counseling without taking legal custody.

3:46:34 PM

REPRESENTATIVE KITO commented that, throughout the proposed bill, there had been a change from mental injury, defined on page 21 as including more than emotional trauma, to emotional damage. He asked if this change would continue to cover as much as was previously covered by mental injury.

REPRESENTATIVE WILSON opined that, although it would not cover everything previously covered, the goal was to mirror for consistency. She explained that throughout the proposed bill, the child had to be in harm's way, in order to be removed.

3:47:49 PM

CHAIR SPOHNHOLZ asked if there were any operational changes with this change in language.

MS. LAWTON explained that emotional damage was not defined under ICWA, although it was specifically and narrowly defined in current statute. She noted that it was necessary for an observable impairment, and that a qualified expert, usually a mental health expert, needed to testify to that impairment. She pointed out that OCS did not often file for custody under this subsection as the threshold was quite high. She shared that, instead, if it was believed there was emotional harm related to domestic violence, OCS would file under neglect. She opined that the proposed bill would potentially broaden the ability by the department, as it would not be as narrow as it was currently.

3:49:00 PM

REPRESENTATIVE TARR offered her belief that, although part of the bill was to align with ICWA standards, she had questions regarding other changes. She directed attention to page 20, line 22, and asked about the difficulty for meeting this standard. Citing her personal experiences, she declared that this would be difficult to substantiate, and asked if children could be left in harmful situations if this standard could not be met.

REPRESENTATIVE WILSON replied that this mirrored what was currently required by ICWA, and she offered her belief that it had not been a problem.

3:50:58 PM

MS. LAWTON, in response to Representative Tarr, opined that, currently under ICWA, OCS only needed the witness if the parent did not agree and was contesting the judicial determination. She said that a witness who was not a case worker could be the supervisor or the regional ICWA specialist. She reported that currently it was very difficult to find expert witnesses for ICWA cases, specifically, cultural experts. She stated that a bigger challenge was the limitations placed on the court to potentially order the child into state custody. She added that it could be time consuming and costly to find expert witnesses and bring them to the court. She opined that it could leave a gap, though she was not able to quantify how often this would occur.

3:52:29 PM

REPRESENTATIVE TARR acknowledged that "these situations can be so sticky" and that it was the desire to give the parents every opportunity. She relayed that some of the individuals, however, were master manipulators. She expressed her concern that having a high standard for imminent danger allowed for manipulation to create difficulty in meeting that standard, while in the meantime, the children would remain in an unsafe situation.

REPRESENTATIVE WILSON countered that the damage for removing a child could be huge, and that nobody wanted a child to be injured. She relayed that numerous studies showed that moving a child could do more damage. She asked, "where is that threshold?" She pointed to the proposed bill, and asked to what level were they willing to go to make sure that children were removed when in harm's way. She suggested that it was better to add the voluntary actions before removing children.

3:55:22 PM

REPRESENTATIVE KITO asked if there were any other impacts as far as transition of cases between the Indian Child Welfare system and the state system when making those programs similar.

MS. LAWTON replied that the proposed bill would not have any impact on the OCS ability for transfer of jurisdiction from state court to tribal court.

CHAIR SPOHNHOLZ spoke about the "natural sticky tension that exists in our child welfare system," and the daily challenges faced by OCS for finding the "sweet spot that protects as many children as possible while maintaining as many families as possible." She noted that it was recognized that removal of a child from their family was an adverse childhood experience, but that leaving them where they were while continuing to experience harm was also an adverse childhood experience. She offered her belief that it was necessary, as feelings could be very intense and run very high, to take the time to step back, let the intensity dissipate, and approach the issue with calm, cool, collected wisdom. She acknowledged that the sponsor had good intention and wanted to do the best for the children of Alaska. She commended the work done by the staff at OCS, sharing that this work did not receive the respect that it deserved, and comparing it to the work performed by firefighters and police officers for everyday intensity.

CHAIR SPOHNHOLZ announced that HB 10 would be held over.

SCR 2-SEXUAL ASSAULT AWARENESS MONTH: APRIL 2017

3:59:13 PM

CHAIR SPOHNHOLZ announced that the next order of business would be SENATE CONCURRENT RESOLUTION NO. 2, Proclaiming April 2017 as Sexual Assault Awareness Month.

4:00:28 PM

CHRISTINE MARASIGAN, Staff, Senator Kevin Meyer, Alaska State Legislature, responded to an earlier question from Representative Sullivan-Leonard during the April 4 House Health and Social Services Standing Committee meeting about progress on lowering the high rate of sexual assault. She said that generally there had been a decline and she relayed information from the Intimate Partner Violence and Sexual Violence Alaska Victimization Survey, which compared the results of 2010 to 2015. She shared that in 2010, 12 in 100 women had experienced intimate partner violence and by 2015, this had dropped to 8 in 100 women. She said that during this same period, intimate partner violence had decreased by 32 percent, a drop of 6,556 women, and sexual violence had decreased by 33 percent, a drop

of 3,072 women. She reported that more than half the adult women in Alaska, more than 130,000 women, had experienced violence in their lifetime, and, although these rates were coming down, Alaska was still number one in the U.S. for sexual assault and violence. She stated that it was hard to attribute the decline to one particular program, but rather a combination of many public awareness campaigns and education.

4:03:11 PM

CHAIR SPOHNHOLZ opened public testimony.

4:03:44 PM

TARA BURNS, Community United for Safety and Protection, explained that her organization was for current and former sex workers in Alaska, sex trafficking victims, and allies working toward safety and protection for everyone in Alaska's sex trade. She reported that a recent survey of Alaska voters did place a high priority on addressing sexual assault in the state, noting that the processing of the backlog of rape kits was the second priority only behind the investigations for missing and murdered sex workers in Anchorage. She added that 93 percent of voters did not realize that it was legal for police officers to have sex with those they were investigating, with 90 percent wanting this to be illegal. She shared that more than 70,000 people had signed a petition to make this illegal. She stated support for HB 112 and SB 73, noting that neither bill had been scheduled for public testimony, and suggesting that even in the Alaska State Legislature raising more awareness was necessary to bring the law in line with the priorities of Alaskan voters to address sexual assault in the communities. She stated support for the proposed resolution.

4:05:26 PM

CHAIR SPOHNHOLZ closed public testimony.

4:05:38 PM

REPRESENTATIVE EDGMON moved to report SCR 2 out of committee with individual recommendations and the accompanying fiscal notes. There being no objection, SCR 2 was moved from the House Health and Social Services Standing Committee.

4:06:07 PM

The committee took an at ease from 4:06 p.m. to 4:08 p.m.

HB 54-TERMINALLY ILL: ENDING LIFE OPTION

4:08:20 PM

CHAIR SPOHNHOLZ announced that the final order of business would be SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 54, "An Act providing an end-of-life option for terminally ill individuals; and providing for an effective date."

4:08:57 PM

REPRESENTATIVE HARRIET DRUMMOND, Alaska State Legislature, stated that proposed HB 54 was "about patient's rights and end of life care. It allows patients to have important end of life discussions with their own doctors, doctors they already know and trust. It allows a patient to ease their pain and suffering and live and die on their own terms according to their own beliefs."

4:09:35 PM

REPRESENTATIVE EASTMAN asked how the proposed bill would ensure that patients will not use coverage for life saving treatments in exchange for the less expensive option. He asked how to guarantee this would not occur.

4:10:21 PM

REPRESENTATIVE DRUMMOND asked where this had happened, and she directed attention to the section of the proposed bill which guarded against coercion. She said that these patients had been dealing with their illness for a long time, and were surrounded by people who cared about them and were not going to coerce them.

4:10:59 PM

KRISTIN KRANENDONK, Staff, Representative Harriet Drummond, Alaska State Legislature, said that there were provisions in the bill prohibiting a person from conditioning the sale of any type of insurance. She asked for further clarification that this was reflecting coercion by insurance companies to push patients into an end of life act. She noted that Section 13.55.240 (page 12, line 25) of the proposed bill had language that an insurance, life, or health policy could not be conditioned.

4:12:00 PM

REPRESENTATIVE EASTMAN suggested that California and Oregon were "going down that road." He said there was a human tendency to prefer a less expensive option to something that could be life-saving but more expensive. He asked about the changes from the original version of the proposed bill, specifically about documentation and paperwork. He asked about the current requirements for written documentation for verification.

4:12:45 PM

MS. KRANENDONK explained that Alaska currently has palliative care and hospice care providers who work with terminally ill individuals. She said there were several options for terminal patients. The section removed from the original bill was a written form required to be on file. She relayed that, as Oregon had found this to redundant, it was removed from the proposed bill. She noted that Alaska had advance health care directives, also known as living wills. She opined that an advance directive was more appropriate for healthy patients, and that the state already provided a complete packet which was available on the Division of Public Health website. She reported that an individual had the right to give instructions about their own health care to the extent as allowed by law. She relayed that Alaska also had Medical Officers for Life Sustaining Treatment, which offered the Comfort One program, also under the Division of Public Health. She clarified that it was a set of medical orders for the very seriously or terminally ill, but was not an advance directive and not a substitute for naming a health care agent. She added that Comfort One patients could wear an identifying bracelet, which included information regarding the diagnosis, treatment, end of life options, hospice, and palliative care. She added that state regulations also included a Do Not Resuscitate protocol, a standardized procedure. She stated that all patients who qualified for this proposed legislation would also qualify for the Comfort One program. She noted that a bill had been passed in 1998 that removed the duty of a peace officer to respond to an expected home death.

REPRESENTATIVE EASTMAN asked about written documentation available to verify that this was supposed to occur, and was not foul play.

4:17:24 PM

REPRESENTATIVE DRUMMOND explained that a terminal patient had to personally request the medication on two separate occasions, more than 15 days apart, from their primary care provider. The patient had to be determined to be terminally ill, and "would most likely be dead within six months." She added that there was appropriate paperwork to be filed at that time, and that the patient needed to be declared capable of making this decision, and being coerced. If the physician determined that the patient was in a psychological state which could lead to a wrong decision, the patient can be referred to counseling. She reiterated that there were a number of these safeguards. She declared, if there was any actual wrongdoing, that would be tantamount to murder. She reminded that the medication was supposed to be self-administered by the patient.

MS. KRANENDONK pointed out that AS 12.65.007 also required that hospice have this form on file, and she added that more than 95 percent of the patients were in hospice. She declared that any suspicion of foul play would result in a call to a police officer. The proposed bill only stated that the information was not available to the public, but a police officer was allowed to review the medical records with the required documentation if there was suspicion of foul play.

4:20:09 PM

REPRESENTATIVE EASTMAN asked what the minimum standard of appropriate paperwork would be and how it could be verified.

MS. KRANENDONK replied that all the patients that qualified for this option were treated by a physician who had their patient files. She noted that the files for terminally ill patients included extensive documentation of everything since diagnosis. She offered her belief that this was not usually the first option. She explained that the written form had been removed from the proposed bill because the physician still had to document that the patient had orally requested it.

4:21:59 PM

CHAIR SPOHNHOLZ asked if other states required a written documentation, and why the sponsor had opted to not include this.

MS. KRANENDONK explained that Oregon had initially included this requirement because of concerns for coercion or wrongful death,

but in the 24 years since its passage, there had not been any cases needing the forms. She reported that, as more states were doing this by ballot initiative, this requirement had been removed as it was determined to be a redundant step. She stated that Washington DC was the only place which required a coroner notification, as most states had a program similar to the aforementioned Medical Officers for Life Sustaining Treatment.

CHAIR SPOHNHOLZ, reflecting that 95 percent of these patients were under the care of hospice, asked how many communities had hospice available.

MS. KRANENDONK clarified that this was the percentage reported from Oregon. She stated that the Juneau hospice facilitated care for other SE Alaska communities.

REPRESENTATIVE DRUMMOND added that they had not researched the availability of hospice care throughout Alaska. She noted that a criticism of the proposed bill was that palliative care was available. She declared that, if the proposed bill improved the availability and effectiveness of palliative care, then there would be progress. She explained that one reason for the proposed bill was that currently people had to move to Oregon to be able to take control of their life. She stated that there were options that may need to be worked into the proposed bill to allow patients to fully take advantage of the legislation, should they feel that need.

CHAIR SPOHNHOLZ asked about those options.

REPRESENTATIVE DRUMMOND noted that, as many communities in Alaska were inaccessible by road and that thousands of patients were not able to travel to see doctors, an option for tele-health had been discussed to be used in lieu of a personal appearance.

4:27:37 PM

REPRESENTATIVE KITO spoke of the challenge for getting medical care and the potential cost in Alaska due to the geographic disparity. He asked if the proposed legislation would be insurance eligible, and, if not, would this create a circumstance where only having enough money would allow participation in the program.

MS. KRANENDONK said that the current proposed bill would allow this as an insurance option, although it was not required as an

option. She expressed concern that the program would only be available to people who could afford to travel for medical care, although this was currently true for a lot of health care. She declared the desire to make more health care available to everyone in the state.

4:29:19 PM

REPRESENTATIVE KITO referenced the first 10 years of this program in Oregon, reporting that there were 541 requests for the medication, with 341 uses. He suggested that in a comparison with the Alaska population over 10 years, one might expect about 100 requests and 60 uses. He pointed out that, as people could have been moving to Oregon from other places to take advantage of this program, Alaska could expect even less request. He asked about the projected level of usage in Alaska.

REPRESENTATIVE DRUMMOND expressed her agreement with the figures, sharing her research from Oregon, which included about 750 requests for the medication, with about 340 usages over 20 years. She stated that she had also extrapolated for small numbers in Alaska. She pointed out there was enormous cost to travel to Oregon for this program, especially in the late stages of a terminal disease. She declared that she wanted to make end of life options easier for Alaskans, not harder.

MS. KRANENDONK said that the fiscal note reflected similar statistics, as it anticipated 10 - 19 cases annually for patients requesting the medication. She pointed out that it was necessary to establish residency in Oregon to take advantage of the program.

4:32:30 PM

REPRESENTATIVE EASTMAN asked about the requirement for insurance to provide the service. He asked if this would be optional or included in every insurance plan.

MS. KRANENDONK replied that polls reflected that about 70 percent of Alaskans would like this as an option. She observed that she would personally be more comfortable with this option in her insurance.

REPRESENTATIVE EASTMAN asked if an insurance provider may or may not offer, and whether the proposed bill distinguished between these options.

4:35:00 PM

MS. KRANENDONK offered to forward more insurance information.

4:35:39 PM

REPRESENTATIVE SULLIVAN-LEONARD stated that she did not support the premise of the bill. She expressed her concern for vulnerable individuals, for those not close to health facilities, and for the lack of a requirement to have written approval for a procedure. She directed attention to the fiscal note from Legislative Legal Services [Included in members' packets] which read:

> The legislation creates a defense to murder in the first degree, murder in the second degree, and manslaughter if the person is performing an act permitted by the legislation. It also establishes a new crime of abuse of life termination process if a person intends to cause another person's death and falsely makes, completes, or alters a request for medication or destroys a rescission of a request for medication. A person may also be guilty of this crime if they exert undue influence on another person to request medication for the purpose of ending that person's life. Abuse of life termination process is a class A felony.

REPRESENTATIVE DRUMMOND replied that these were safeguards to prevent abuse of the process. She declared that the desire for the proposed bill was for the patient to be fully cognizant of the choice, of the options, and to be able to rescind their request at any point during the process. She offered her belief that this was well covered in the proposed bill, which was based on the experience from other states. She reiterated that the proposed bill had been simplified because the required form had been "just collecting dust in a file." She stated that the medical community would figure out what worked for each individual practice. She expressed her certainty that it would be resolved in a way to make the most sense for both patient and doctor records.

MS. KRANENDONK said that all the cases and the medication would be accounted for and tracked.

REPRESENTATIVE SULLIVAN-LEONARD said that an oral argument would not come into play in a legal proceeding.

4:39:53 PM

MS. KRANENDONK replied that the establishment of qualification was documented in the bill.

4:40:23 PM

REPRESENTATIVE KITO referred to a study for the Oregon Death with Dignity Act between 2004 and 2006, which indicated that, although required by law that individuals requesting the medication receive counseling, 16 percent of those individuals suffered from clinical depression and were not referred to counseling. He asked if there were protections in the proposed law that would ensure accountability for not making a referral to counseling.

MS. KRANENDONK replied that, although physicians were required to refer individuals for psychiatric care if depression was diagnosed, there was no punishment written into the bill.

REPRESENTATIVE KITO expressed his concern for a 16 percent error rate, which could allow individuals, with treatment, to continue through their natural end of life.

4:42:15 PM

REPRESENTATIVE EASTMAN, in reference to a move to Oregon to participate in the program, asked what was to stop someone from doctor shopping in order to qualify for the program. He noted that the letter of the law allowed broad qualification of an individual, and asked how to ensure that this would not happen.

4:44:07 PM

REPRESENTATIVE DRUMMOND pointed out that the proposed bill required that two doctors, not in the same practice, agree that an individual was terminal within the prescribed amount of time.

MS. KRANENDONK added that diabetes would not qualify in the early stages.

4:45:38 PM

CHAIR SPOHNHOLZ pointed to the definition of terminal disease on page 11, line 17, in the proposed bill, and read:

means an incurable and irreversible disease that has been medically confirmed and that will, within reasonable medical judgement, produce death within six months;

CHAIR SPOHNHOLZ said that HB 54 would be held over.

4:46:50 PM

KRISTEN HANSON, Chair, Patients' Rights Action Group, read from a prepared statement by her husband, James Hansen. He wrote that he was a marine war veteran, a husband, and a father. He did not want to die, and, as he was currently unable to travel, he could not make his statement in person. He shared that he was suffering from aggressive brain cancer. He shared his background prior to his cancer. He noted that he had the same brain cancer as the young woman who had moved to Oregon from California in order to be able to take her own life. He reported that three different doctors had told him there was nothing he could do about his cancer, as surgery, radiation, and chemo therapy rarely worked. He, instead, chose to do standard and experimental treatment. He expressed his thanks that he had not accepted his initial prognosis, even as the past three years had not been easy, with a lot of physical and emotional pain, countless seizures, and days with the loss of his most basic abilities, unable to talk, walk, read, or write. He shared that he had currently lived two years and eight months longer than his original prognosis. If this legislation had been available at that time, he could have chosen the medication, and he did consider it. He declared that there was no going back on a decision to end life. He stated that he had fought assisted suicide legislation for the last 18 months. He opined that legalized suicide, touted as death with dignity, had the opposite effect. He said that many patients with circumstances similar to his were offered lethal drugs and were denied or delayed coverage for the necessary care. He acknowledged that he had experienced depression and had felt that he was a burden to his family. He said it was a very real danger when people could choose death over care, and that suicide became a social norm for people who were terminally ill. He said there had been an increase of general suicide rates, along with medically assisted rates, in states which had legalized suicide. He added that, as he had also suffered post traumatic stress disorder, legalization of doctor prescribed suicide sent the wrong message to struggling veterans. He declared that mistakes would be made and lives would be tragically lost if assisted suicide were legalized. He asked if one person's perception of choice,

influenced by hopelessness and fear of being a burden, put the lives of those who want to survive at risk.

4:53:52 PM

WILLIAM HARRINGTON stated that medication was not defined as something to kill, but something to heal. He stated that a different word was necessary in the proposed bill, although he did support the legislation. He pointed out that it was a sacrilege to kill yourself. He suggested that this should be defined as self-termination, and not as suicide.

4:55:45 PM

KARMELLE DEILLE stated that she was against the proposed bill, and opined that the law should always be on the side of life. She expressed her agreement with earlier testimony, and that termination of the hindrances would open the floodgates, and would keep people from respecting boundaries. She shared a personal experience with a friend. She suggested that it was necessary to look at history instead of emotion when deciding whether to change laws. She declared that it was not possible to legalize suicide if we "felt accountable to the creator of life."

5:00:07 PM

PAMELA SAMASH, President, Right to Life, stated that the proposed bill was "a dangerous bill." She acknowledged that this was a sensitive subject. She declared that the proposed bill was wrong because "we don't know why some circumstances prolong death but sometimes people miraculously recover." She suggested to review the history of euthanasia in other countries and communities, which began as a personal choice but then slid into death as an answer. She asked what message the suicide laws would send. She stated her opposition to the proposed bill.

5:02:24 PM

JEANNE ANDERSON, MD, Katmai College, paraphrased from a prepared statement [Included in members' packets], which read in part:

> My name is Jeanne E Anderson, MD. I am medical oncologist in private practice in Anchorage at Katmai Oncology Group, LLC. Specialists in Medical Oncology diagnosis patients with cancer; counsel them regarding

prognosis and treatment options; prescribe medical (i.e., drug) treatment; and provide supportive, palliative and end of life care. I received my medical degree from Stanford University in 1988. I completed internal medicine specialty training in 1991, and medical oncology fellowship training in 1994, both at the University of Washington.

I am strongly against HB54 for many reasons, including 1) the uncertainty in determining an individual patient's prognosis, 2) improvements in palliative care, and 3) hastening death is not the role of the physician or the medical system.

A critical feature of SSHB54 is that the patient has a "terminal" disease. There is no definitive way to determine that a patient has less than 6 months to live. Estimates of survival are based on published data and a physician's clinical judgment. Survival data come from studies performed years earlier, often using treatment that is not the most up to date, and is based on narrowly defined patient populations.

Even well informed and well-meaning oncologists make drastic mistakes in their estimates of prognosis.

DR. ANDERSON expressed her agreement with the earlier testimony in opposition of the proposed bill. She acknowledged that professionals often made drastic mistakes in prognosis, and she shared three relative stories.

5:06:03 PM

MARILYN GOLDEN, Senior Policy Analyst, Disability Rights Education and Defense Fund, stated her opposition to the proposed bill. She said that, with legalized assisted suicide, some people's lives would be ended without their consent through mistakes and abuse, as no safeguards could prevent this outcome. She offered her belief that the health care system was broken and would, instead, offer legalized suicide as "the cheapest treatment" when insurers denied or delayed approval of expensive, life sustaining treatment. She stated that "assisted suicide was a recipe for elder abuse." She said that mis-diagnosis and incorrect prognosis could analyze prematurely. She reported that negligent personnel were not liable for their negligent actions. She said that abuse was not investigated, and she suggested that the Oregon data failed to show abuse

because the system was set up not to find it. She declared that suicide contagion was also an issue, with an increase in Oregon after the passage of its assisted suicide legislation.

5:10:27 PM

FRANK MCGILVARY said that both he and his wife were opposed to the proposed legislation, as life was really precious.

5:11:49 PM

CHAIR SPOHNHOLZ closed public testimony.

[HB 54 was held over.]

5:12:24 PM

ADJOURNMENT

The House Health and Social Services Standing Committee meeting was recessed until Saturday, April 8, at 3 p.m.