

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

February 19, 2018

1:30 p.m.

MEMBERS PRESENT

Senator David Wilson, Chair
Senator Natasha von Imhof, Vice Chair
Senator Cathy Giessel
Senator Peter Micciche
Senator Tom Begich

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

SENATE BILL NO. 124

"An Act relating to the duties of physicians and health care practitioners when performing or inducing abortions; providing that a child removed from a pregnant woman's womb alive after an abortion may be surrendered and found to be a child in need of aid; and providing for an effective date."

- MOVED SB 124 OUT OF COMMITTEE

PREVIOUS COMMITTEE ACTION

BILL: SB 124

SHORT TITLE: ABORTION PROCEDURES; CHILD SURRENDER

SPONSOR(S): SENATOR(S) GIESSEL

01/16/18	(S)	PREFILE RELEASED 1/8/18
01/16/18	(S)	READ THE FIRST TIME - REFERRALS
01/16/18	(S)	HSS, JUD
02/19/18	(S)	HSS AT 1:30 PM BUTROVICH 205

WITNESS REGISTER

KARI NORE, Staff
Senator Cathy Giessel
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented the sectional on SB 124 on behalf of the sponsor.

RACHEL GEARHART, representing self
Juneau, Alaska

POSITION STATEMENT: Opposed SB 124.

ALYSON CURREY, Legislative Liaison
Planned Parenthood Votes Northwest and Hawaii
Juneau, Alaska

POSITION STATEMENT: Opposed SB 124.

SONJA BARNARD-GRAVEL, representing self
Anchorage, Alaska

POSITION STATEMENT: Opposed SB 124.

LIZ RANGEL, representing self
Anchorage, Alaska

POSITION STATEMENT: Opposed SB 124.

BRENAE BAKER, representing self
Fairbanks, Alaska

POSITION STATEMENT: Opposed SB 124.

ALYSSA QUINTYNE, representing self
Fairbanks, Alaska

POSITION STATEMENT: Opposed SB 124.

KASEY CASORF, representing self
Fairbanks, Alaska

POSITION STATEMENT: Opposed SB 124.

ROSE O'HARA-JOLLEY, representing self
Fairbanks, Alaska

POSITION STATEMENT: Opposed SB 124.

HANNAH HILL, representing self
Fairbanks, Alaska

POSITION STATEMENT: Opposed SB 124.

CINDY ROEDIGER, representing self
Palmer, Alaska

POSITION STATEMENT: Opposed SB 124.

PATRICK MARTIN, Alaska Right to Life
Wasilla, Alaska

POSITION STATEMENT: Opposed SB 124.

RICK SMALL, representing self
Palmer, Alaska
POSITION STATEMENT: Opposed SB 124.

CHARITY CARMODY, Founder/President
Beacon Hill
Anchorage, Alaska
POSITION STATEMENT: Supported SB 124.

MELISSA GOLDSTEIN, Legal Fellow
ACLU of Alaska
Anchorage, Alaska
POSITION STATEMENT: Opposed SB 124.

TOM LAKOSH, representing self
Anchorage, Alaska
POSITION STATEMENT: Opposed SB 124.

WILLIAM DEATON, representing self
Cordova, Alaska
POSITION STATEMENT: Supported SB 124.

ZHENIA PETERSON, representing self
Anchorage, Alaska
POSITION STATEMENT: Opposed SB 124.

BESSI ODOM, representing self
Anchorage, Alaska
POSITION STATEMENT: Opposed SB 124.

ROBIN SMITH, representing self
Anchorage, Alaska
POSITION STATEMENT: Opposed SB 124.

KAREN PERRY, representing self
Chugiak, Alaska
POSITION STATEMENT: Opposed SB 124.

ACTION NARRATIVE

[1:30:40 PM](#)

CHAIR DAVID WILSON called the Senate Health and Social Services Standing Committee meeting to order at 1:30 p.m. Present at the

call to order were Senators Giessel, Micciche, Senator von Imhof Begich, and Chair Wilson.

SB 124-ABORTION PROCEDURES; CHILD SURRENDER

[1:31:06 PM](#)

CHAIR WILSON announced the consideration of SB 124.

SENATOR CATHY GIESSEL, Alaska State Legislature, sponsor of SB 124, said the bill offers mothers who are faced with a crisis pregnancy another option. If a baby has reached viability or has the opportunity for viability, the bill calls for the physician performing the abortion to give the baby the best opportunity to survive. A child born alive as a result of an abortion shall receive the same degree of professional skill, care, and diligence. This is the opposite of a Do Not Resuscitate order. A child born alive as a result of an abortion may be surrendered to a physician or an employee of the hospital or facility where the abortion is performed and will be regarded as a Child in Need of Aid. This assumes that the parent is unwilling or unable to care for the child, although that may not be the case. The bill has an immediate effective date.

She noted that in Roe v. Wade, 410 U.S. 113 (1973), the Supreme Court maintained that the state has an interest in protecting the life of a fetus after viability--that is, after the point at which the fetus is capable of living outside the womb.

SENATOR GIESSEL said that is the foundation of bill, the point of viability. She quoted from the Roe v. Wade decision:

"With respect to the State's important and legitimate interest in potential life, the "compelling" point is at viability. This is so because the fetus then presumably has the capability of meaningful life outside the mother's womb."

"State regulation protective of fetal life after viability thus has both logical and biological justifications. If the State is interested in protecting fetal life after viability, it may go so far as to proscribe (forbid, especially by law) abortion during that period, except when it is necessary to preserve the life or health of the mother."

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SENATOR GIESSEL said SB 124 is all about the definition of viability. She quoted from the following case in which the court upholds the viability definition.

Planned Parenthood of Central Missouri v. Danforth, 428 U.S. 52, 63 (1976), 410 U. S., at 160, 163
In Roe, we used the term "viable," properly we thought, to signify the point at which the fetus is "potentially able to live outside the mother's womb, albeit with artificial aid," and presumably capable of "meaningful life outside the mother's womb,".

SENATOR GIESSEL quoted from the following case:

Whitner v. State of South Carolina, 328 S.C. 1, 7-8 (S.C.1997) Facing the issue of when a fetus is entitled to protection, the court held that a viable fetus was a "person" for the purposes of the Children's Code.

She said most people are not that informed about what happens as a child develops in utero. She referenced a graphic that describes development at different weeks of fetal age.

She pointed out that the graphs in her presentation are from the Mayo foundation. She described how the graph shows the formation of fingerprints and footprints at 14 weeks, right after the first trimester. Before 14 weeks, abortions are usually a vacuum-type procedure. At 14 weeks the baby is often too large for that procedure and a procedure called dismemberment is done.

[1:37:48 PM](#)

SENATOR GIESSEL described a graph of a baby at 23 weeks, close to six months. She said the eyes have begun blinking, the heart and blood vessels have formed, and fingerprints are fully developed. When she applied for a concealed carry permit and her nursing license, she had to submit to a criminal background check, which required her fingerprints. Fingerprints are viewed as a unique identifier for each human being. By four months and certainly by six months, these babies have fingerprints.

She said by five months, a baby is sucking its thumb, stretching, yawning, and making faces. The mother certainly feels this little person moving, she said. By 20 weeks documentation indicates that they can feel pain.

SENATOR GIESSEL said at 27 weeks of age, closing in on eight months of age, the central nervous system is functioning. They weigh about four pounds. At eight months--eyes wide open, toenails, fingernails, beginning to form a fat layer, the brain is completely developed and the lungs are nearly developed. At this point in Alaska this child is still eligible for an abortion procedure because Alaska has no limit on gestational age for abortion, she said. At four pounds, only a dismemberment procedure can be used.

She said she would not describe the procedure in detail, but it can be imagined. The bill, very simply, gives the best opportunity for the unborn child who reaches viability to survive birth, requiring professional skill and care to be given to the child. She said some will make the claim that these children really cannot survive. In fact, medical science improves daily. She referred to a chart that shows more than 50 percent opportunity of viability after 25 weeks, about six months gestational age.

[1:41:31 PM](#)

SENATOR GIESSEL referred to a graph that shows states that have viability defined by weeks of gestation. She noted that the graph does not have the latest information, and 23 states have time-specific dates of viability and 20 states use the term protection at viability. The graph shows foreign countries that have limits on abortion procedures tied to points of potential viability. She shared that the source of the information on the graph, the Guttmacher Institute, is actually a proabortion organization, not a Right to Life group, to make the point that this is factual information.

She said this bill gives mothers, who for one reason or another, are faced with that difficult choice, another option, to deliver a preterm child that has that opportunity of viability to be delivered in such a way that they could survive. That mom could elect to surrender the child, who will become a Child in Need of Aid (CINA). The bill has an immediate effective date. There are real people, real children, today who have been delivered early and are leading healthy, productive lives.

She described the bill as interesting because of the groups opposing it. On the one hand, Planned Parenthood is opposed to it. Alaska Right to Life is against it too because it does not ban abortion and they opine it only saves one or two lives. She referred to the movie, *Schindler's List*, that told the story of Oskar Schindler, a German businessman who employed Jews to work

in his factories because they were cheap labor during WW II. When he saw Nazis slaughtering Jews, he realized he had the opportunity to save lives. He used his fortune to bribe Nazi guards and assign more Jewish workers to his factory, so he could save lives. After the war, the Jewish survivors gave him a ring inscribed with a saying from the Talmud,". . . whoever saves a life, it is considered as if he saved an entire world."

[1:45:26 PM](#)

SENATOR GIESSEL showed a picture of Margot Schlesinger, one of the survivors, and her many descendants as an example of every life mattering.

KARI NORE, Staff, Senator Cathy Giessel, Alaska State Legislature, Juneau, Alaska, presented the sectional on SB 124 on behalf of the sponsor.

Section 1: Amends AS 18.16.010 by adding new subsections to provide for a physician to use the method of terminating the pregnancy that best provides for the unborn child to survive outside the mother's womb. It requires health practitioners present at the procedure to exercise the same degree of professional practice and diligence to preserve the life of the viable child born as would be provided to a child born through the course of natural birth. Provides definitions for "alive," "clinical judgment," "fertilization," and "fetal age."

Section 2: Amends AS 18.16 by adding a new section that would allow a parent of a child born alive during the process of an abortion to surrender the child to a physician or employee of the hospital. The person to whom the child had been surrendered will notify the Department of Health and Social Services as required under AS 47.10.013(d).

Section 3: Amends AS 47.10.011 and adds a provision in the Child in Need of Aid (CINA) statute to include a child born alive during the termination of a pregnancy whose parent is unwilling or unable to care for the infant.

Section 4: Adds an applicability provision that states that AS 18.16.010(k)-(m), added by Sec. 1, AS 18.16.012, added by Sec. 2, and AS 47.10.011, as amended by Sec. 3 apply to abortions performed or

induced on or after the effective dates of those sections.

Section 5: Provides for an immediate effective date for this Act.

[1:48:22 PM](#)

SENATOR MICCICHE commented that he and Senator Giessel are both unabashedly prolife. He asked how many states have legally upheld bans on elective abortions in the third trimester.

SENATOR GIESSEL said three states have identified the third trimester as the stopping point for abortions. Recently a Congressional bill just like this bill, with a few exceptions, that banned most abortions after 20 weeks of pregnancy did not pass the Senate, 51-46. In the meantime, the U.S. Supreme Court verified the ban on abortion after viability not too long ago. Eight states passed laws banning abortion after viability. Only two of those states have bills that are enforced right now. The laws in other states are under court challenge.

SENATOR MICCICHE asked if viability applies before the third trimester in most cases.

SENATOR GIESSEL referred to him to the graph showing the survival rate of premature babies on slide 17. By 26 weeks the survival rate is over 60 percent and for 24 weeks over 50 percent. She reiterated that Alaska has no limit in place.

SENATOR VON IMHOF asked who defines viability and if physicians have any protections for deciding a fetus is not viable.

SENATOR GIESSEL said this bill places that decision in the hands of the physician. It differs from the proposed federal law because it does not define a particular week. The proposed federal law had a penalty for physicians; this bill does not. She is trusting the ethics of physicians in Alaska and the sworn duty to do no harm.

[1:53:07 PM](#)

SENATOR VON IMHOF asked if she sees a scenario where a physician can be liable if he or she makes a decision about viability that someone disagrees with.

SENATOR GIESSEL said she is not an attorney and she is certain attorneys will find some way, but that is not the intent of the

bill. Nothing in the bill creates a liability because it does not specify a gestational age.

SENATOR VON IMHOF asked if it will help alleviate potential misunderstanding about the intent of bill if it did include a gestational age.

SENATOR GIESSEL said she would welcome an amendment to put a time in. She chose not to include a penalty but would be amenable to that amendment if someone offered it.

SENATOR BEGICH asked whether she had considered the impact on medical malpractice insurance because of the ambiguity around when a doctor has to determine viability.

SENATOR GIESSEL said obstetrics is a high-liability profession to begin with. It is left to the judgment of the physician. She doesn't see that the bill increases their liability in any way.

[1:56:02 PM](#)

SENATOR BEGICH mentioned the phrase "unable" or "unwilling" and asked if a parent were willing but unable, if the state would be obligated to place that child in a Child in Need of Aid situation.

SENATOR GIESSEL said many parents who feel unable to take care of a child somehow manage and are able to raise some wonderful kids. A former neurosurgeon was raised by a mother unable to read. That mom probably would have said it was more than she could do, but she did it. It is the parent who decides whether they are unwilling or unable to raise the child.

SENATOR BEGICH said he had a conflict with the statement "best to survive." He asked if this will restrict choices for a doctor to choose a procedure that might be less risky for the mother but makes it less likely that the fetus will survive.

SENATOR GIESSEL said she was struggling to understand the question. The best method of delivery for the child to survive is placing a child in the head down position, inducing labor, and delivering the child. If there are placental abnormalities, it might involve a C-section. That is all up to the experienced and knowledgeable clinician.

[1:59:14 PM](#)

SENATOR BEGICH asked if this means that the fetus takes preference over the patient, if a doctor has to make a call about which is more important.

SENATOR GIESSEL said let them review the scenario. This is a woman facing a brutal decision of delivering a baby early or abortion, which in these age-weeks involve dismemberment of the child's body to remove it from the uterus. This is a mother's choice. The physician will care for both patients to the best of his ability. She cannot predict what those decisions will be. She expects most likely it will be in favor of the mother.

[2:00:20 PM](#)

SENATOR BEGICH said the wording in the bill specifically states for the fetus to best survive. He said he wanted to be clear about that.

MS. NORE said the bill states on page 1, starting on line 10, "the method of terminating the pregnancy does not present a serious risk to the life or health of the pregnant woman."

SENATOR BEGICH asked if there was an estimate from the Department of Law about what litigation might entail for this legislation. He asked if that was something normally done.

SENATOR GIESSEL said there is no expectation that this will be litigated. The Department of Law doesn't usually opine on what litigation might cost. She said she just saw the fiscal note from DHSS and found it interesting that they assume that preterm infants would be disabled. She maintained that was not necessarily the case.

CHAIR WILSON said that assumption raised his eyebrows also. He asked how many children would be disabled. He wondered whether it was a worst-case scenario to not underestimate the cost. He suggested it might be taken up in another committee.

SENATOR MICCICHE said there is a low probability of this situation. Page 6 of the 2016 State of Alaska Induced Termination of Pregnancy Statistics states that nearly all, 99.5 percent of induced terminations, were performed at 13 weeks or less gestational age. In 2013, 91.6 percent of induced terminations performed in the U.S. involved pregnancies of 13 weeks or less. He said he appreciates the approach of viability. He said he has to think about whether that term is clear enough or whether gestational weeks is needed.

SENATOR GIESSEL suggested he look at page 11 of the 2016 document, the last row on Table 8a is "Not Stated." Those are most likely falling in those later weeks of gestation. The clinician chose not to state the gestational age, but it is decreasing and after about 17-20 weeks, they are looking at 6 in 2016. It is not volumes and volumes. About 5.7 percent fell in that category in 2016. She reiterated what the Talmud said, "One who saves a life, it's as if he saved an entire world."

[2:05:50 PM](#)

CHAIR WILSON opened public testimony on SB 124.

[2:06:56 PM](#)

RACHEL GEARHART, representing self, opposed SB 124. She said she is a social worker. She noticed slide 17, premature survival rate, has Australian statistics. She suggested looking at U.S. survival rates statistics. She expressed confusion with the bill. If termination is needed as determined by a woman and her highly educated medical provider, she questioned why would her abortion procedure turn into a delivery for a child she has determined she is unable to care for. The woman does not need to justify it to anyone. She posited that a baby born alive in this scenario is likely to require significant medical care. She said the medical care in the attached supporting documentation, the New York Times article [Premature Babies May Survive at 22 Weeks if Treated, Study Finds] is probably not available in Alaska. The closest level IV NICU [Neonatal Intensive Care Unit] is in Seattle. The article states that many babies, if they do make it, will survive with severe handicaps. She pointed out that the foster care system is already overburdened with perfectly healthy children. Foster families who can work with children with complex medical needs are not in high supply. If any fetus were born alive and turned over to the Office of Children's Services, this fiscal note would be grossly underestimated, she said. She cautioned against getting between a woman and her provider and suggested focusing instead on a workable state budget that supports state residents who are already in need of safety and security.

[2:10:06 PM](#)

ALYSON CURREY, Legislative Liaison, Planned Parenthood Votes Northwest and Hawaii, opposed SB 124. She said SB 124 would limit abortions later in pregnancy and restrict doctors' ability to exercise their professional expertise about what is best for their patients. Nearly 99 percent of abortions take place before 21 weeks, well before fetal viability. When later abortions do occur, this bill would force physicians to alter how they

practice medicine to prioritize the fetus over the health of the woman. It forces health care providers to substitute the will of the legislature for their ability to use their medical expertise to treat each of their patients on a case-by-case basis. It is a dangerous, unsafe, unfounded precedent, motivated by politics, not medicine. She said this bill attacks women and families already facing the heart wrenching decision of ending a pregnancy. Abortions later in pregnancy are performed almost exclusively in cases of serious and catastrophic fetal abnormalities. This bill is a cruel restriction for families already facing tragic circumstances.

[2:12:21 PM](#)

SONJA BARNARD-GRAVEL, representing self, opposed SB 124. She said medical procedures should be left to doctors and the desires of their patients. As a young Alaskan woman, she has a close relationship with her doctor and trusts her medical expertise. It frightens her that if this bill is passed, it would limit the care she and other doctors can provide for their patients. Late-term abortions are almost always performed in cases where the woman or fetus is in danger. This bill tells a woman she is incapable of making her own decisions. It also places another child in an already overcrowded foster care system.

[2:13:42 PM](#)

LIZ RANGEL, representing self, opposed SB 124. She said it is inappropriate to make decisions about a woman's body in a political setting. The sole purpose of the bill is to place obstacles between a woman and access to a safe abortion. The bill is purposefully vague and encourages physicians to place a woman's life and well-being second to the fetus. It is a dangerous bill. She wants to see the Senate value Alaskan women and their lives when it votes.

[2:14:46 PM](#)

BRENAE BAKER, representing self, opposed SB 124. She said the bill is offensive, condescending, and medically inaccurate. It is a waste of time and resources for constituents and taxpayers. Focus on actual work to better communities and the state.

[2:15:21 PM](#)}

ALYSSA QUINTYNE, representing self, opposed SB 124. She said the terminology in the bill is medically ambiguous and conflicts with the medical profession's ability to provide adequate care for their patients. The language confuses the procedure of removal vs. live birth and does not define what live birth means

for the fetus. It burdens state and legal agencies to care for premature and medically sensitive infants. This is not a family-oriented bill. It is an attack on reproductive rights and access. It is an attack on medical staff and providers to undermine their expertise. It is an attack on state agencies. The state needs to focus efforts to providers, agencies, and organizations that support access to safe, sound, and consensual care so families can make the best decisions for their families.

[2:17:15 PM](#)

KASEY CASORF, representing self, opposed SB 124. She said she is a freshman at the University of Alaska Fairbanks (UAF). When she was 16, her best friend was raped on the UAF campus. This made her aware of her vulnerability as a woman. She lives in a world where attacks on her body come from all sides. Having her government attempt to limit the power of doctors to treat her body with the respect it deserves is unacceptable. SB 124 is an unreasonable, medically unsound, and politically motivated attack on her body's autonomy. It sets a dangerous precedent by substituting the agenda of politicians in a situation where only her doctor's expertise should be present. It is insensible to hold hearings on fundamentally unnecessary legislation while Alaska is in the midst of budget crisis. Focus attention on Alaska's real problems instead of a medically unsafe bill. Women count on them to defend their bodies, minds, and futures.

[2:19:10 PM](#)

ROSE O'HARA-JOLLEY, representing self, opposed SB 124. She said her family survived the Holocaust and many more did not. She finds it personally offensive to create a false comparison between the Holocaust and those who survived and her right to her body's autonomy and the state's decisions in it.

[2:20:07 PM](#)

HANNAH HILL, representing self, opposed SB 124. She said SB 124 serves to substitute the knowledge of medical practitioners for personal ideology using medically inaccurate and legally vague language. The vast preponderance of so-called late-term abortions is because of imminent maternal death or fetal abnormalities that are incompatible with life. Per the Guttmacher Institute., nine percent of abortions are performed after the first trimester, and of those, one percent happens after 21 weeks. They say the personal is political, but in this case the political is personal. Leave personal health care decisions to people and to the medical care of their doctors.

[2:21:20 PM](#)

At ease.

[2:21:31 PM](#)

CHAIR WILSON reconvened the meeting.

CINDY ROEDIGER, representing self, opposed SB 124. She said she is an abolitionist and follower of Jesus Christ. This bill does not recognize the child in the womb to be in need of aid at the time the abortionist is in the act of murdering them. If the child survives attempted murder, then the child may be a Child in Need of Aid. What sick, twisted thinking this is. In Romans 13, Paul viewed governing authorities as being established by God to restrain evil and promote a just and peaceful social order. God is the authority and has placed Senator Giessel in authority. She read from Isaiah 10:1, 10:2, Proverbs 24, Psalms 94:16, and Proverbs 22:8. God is sovereign and all-knowing, and he sees through this wicked and evil bill. She pleaded with Senator Giessel to create a version of HB 250 for the Senate to abolish abortion in Alaska.

[2:25:54 PM](#)

PATRICK MARTIN, Alaska Right to Life, opposed SB 124. He said Schindler did not create or perpetuate laws that slaughtered innocent Jews, but by creating two classes of unborn babies, SB 124 takes the role of the Nazi government and not the role of the courageous Mr. Schindler. Right to Life would like to submit that the best way of surviving an abortion is not be aborted. Protections must be applied to all babies. Life begins at conception. This is the same faulty logic as in Roe vs Wade, that the preborn fetus has no rights and can be killed at any point up to birth. Right to Life opposes SB 124 because it creates two classes of babies, those that mothers can kill and those they cannot.

At ease.

[2:29:29 PM](#)

CHAIR WILSON reconvened the meeting.

RICK SMALL, representing self, opposed SB 124. He said he is representing himself as a representative of Lord Jesus Christ. God Almighty clearly stated you shall not murder and did not place any size or age limits on his direct command. HB 250 should be discussed. He has been asking Senator Hughes to introduce the same bill in the Senate. He is asking Senator Wilson to introduce an exact duplicate of HB 250 and HB 251 into the Senate. Five Alaskan babies are being murdered today. The

Alaska Legislature has the primary responsibility of protecting innocent humans in this state. Human abortion is a hate crime and silence is consent. The right to murder children is not in the U.S. Constitution or the Alaska Constitution. SB 124 does not abolish abortion. May God have mercy for allowing this holocaust ten times worse than the Nazi Holocaust to continue in this state.

[2:32:32 PM](#)

CHARITY CARMODY, Founder/President, Beacon Hill, supported SB 124. She said Beacon Hill is a licensed child placement agency and nonprofit that deals in all things child welfare and recruits for adoptive families. She supports SB 124 as a person who has fought her entire career for the rights of children to be protected because the bill does this. It deals with the issue of viability and in all cases, the state tries to protect children most at risk. She is the mother of three children, a foster mother, an adoptive mother. She has a son with cerebral palsy. This helps protect all children, and even female children. When she hears women say this is against the female gender, she disagrees. It keeps them from being aborted or not protected if born alive.

[2:34:20 PM](#)

MELISSA GOLDSTEIN, Legal Fellow, ACLU of Alaska, opposed SB 124. She said abortion is a safe and legal medical procedure, a fundamental right grounded in the rights of privacy. It may force women seeking to terminate a pregnancy to undergo a dangerous, invasive medical procedure instead of one of the many safe alternatives that are available. It interferes with physicians' medical judgements and the doctor/patient relationship because it compels physicians to perform procedures that are not necessarily in accordance with medical judgment. Many hospitals in Alaska already have restrictive abortion policies. These policies mean induction would not be possible in those facilities. SB 124 is unenforceable. The gestation period is not defined, and it does not suggest how physicians and patients would comply with the law. The U.S. Supreme Court has stated that the state has a legitimate interest in seeing that abortion, like any other medical procedure, must be performed in conditions that ensure maximum safety for the patient. They are concerned that SB 124 is unconstitutional. They have successfully litigated unconstitutional laws that target women's reproductive rights. Recently the State of Alaska paid \$1 million in attorney fees for a similar type of litigation. On a personal note, her grandfather was on Schindler's list. She

finds the comparison between a woman's right to terminate a pregnancy to what her grandfather went through offensive.

[2:37:13 PM](#)

TOM LAKOSH, representing self, opposed SB 124. He said that while he appreciates the senator's efforts to see that support is offered by the state to prematurely born children, the attempt is unconstitutionally restrictive of a woman's right to privacy. The bill should be amended so that a woman who wants to surrender a premature child can. This essentially gives the state the right to show up in a doctor's office with a speculum. He asked who becomes liable if a woman dies in the attempt to deliver a viable child. Many issues exist for liability. Although he believes in the sanctity of life, this is not a viable piece of legislation. The budget cannot sustain repeated constitutional challenges to lousy legislation.

[2:39:09 PM](#)

WILLIAM DEATON, representing self, Cordova, Alaska, supported SB 124. He said he wants the bill amended so that a physician besides the abortionist be there on hand to save the child if the child survives the abortion. He said he does not trust an abortionist who is attempting to murder the child to save the child outside of the womb. He is completely prolife. If this bill saves even one life he supports it. The U.S. is one of seven countries that allows abortions past 20 weeks, including North Korea and China. He noted a child in the womb has separate DNA from the mother and should not be removed like a tumor.

[2:41:09 PM](#)}

ZHENIA PETERSON, representing self, opposed SB 124. She said the decision for an abortion should be left between a doctor and patient. In Alaska it is already hard to get access to reproductive health care, comprehensive sexual education, and, of course, abortion. The decision to get an abortion is not an easy one, but it should be made with the care of a trusted physician. Focus on finding programs that teach more medically accurate sexual education and healthy relationships to avoid unintended pregnancies.

[2:42:35 PM](#)

BESSI ODOM, representing self, opposed SB 124. She said with proposed legislation like SB 124, legislators are truly not listening to all Alaskan women, including rural and urban. Women need the assurance that they will not be prevented or deterred from seeking care because of policies that are in place. They should be concerned about the risks they will put women of

various communities in. SB 124 would force women to carry pregnancies to term regardless of their wishes and jeopardizes the health of the women. Sometimes a woman has had to choose between an abortion and her own life. This bill fails to consider a mother and her health.

[2:43:52 PM](#)

ROBIN SMITH, representing self, opposed SB 124. She said Alaska is struggling to finance its government yet Senator Giessel is wasting Alaska's time and money and is not focusing on Alaska's first priority. Senator Giessel is part of the Republican coalition that reduced children's PFDS to fund the government, potentially literally taking food, health care, and educational options away from kids. There are cuts in school funding and less money for health and human services. Why focus energies on restricting women's right to abortion. Those seeking late-term abortions are often adolescents or women with life-threatening circumstances or the fetus has severe abnormalities or impairments. In society only pregnant women are viewed as morally incompetent. Society does not force parents to donate kidneys, eyes, or part of a liver to children, but demands women put their lives at risk. Women's health must be considered first, she said.

[2:46:48 PM](#)

KAREN PERRY, representing self, opposed SB 124. She said she opposes the bill because it is a murder bill. It is a ridiculous bill that purports to be prolife but actually condones murder. Abortion is child sacrifice. Instead of working to stop it, the bill deceives people. It is deceitful and evil of Cathy Giessel and Cathy Tilton in the House to sponsor prodeath bills. That is not what their party platform supports. Support a companion bill to HB 250, which protects life at conception. She quoted from Psalm 94, verses 20 and 21. The bill continues to condemn innocents to death.

[2:49:33 PM](#)

CHAIR WILSON closed public testimony on SB 124.

[2:49:56 PM](#)

At ease.

[2:51:02 PM](#)

CHAIR WILSON reconvened the meeting and asked if there were any amendments. Finding none, he asked for a motion to move the bill out of committee.

[2:51:41 PM](#)

SENATOR MICCICHE said this is a bill that Judiciary needs to review. He moved SB 124, version 30-LS0429\U, from committee with individual recommendations and attached fiscal notes.

[2:52:05 PM](#)

SENATOR BEGICH objected. He said since no one supported the bill, neither those who opposed the bill for reasons of privacy nor those who opposed abortion, the committee was not ready to move the bill out.

[2:53:00 PM](#)

CHAIR WILSON said some of the questions about liability and constitutionality will be handled best in Judiciary, the next committee of referral.

[2:53:20 PM](#)

SENATOR MICCICHE said he was not sure that the HSS committee was the appropriate first stop, but since that is where the bill is, he thinks Judiciary is the appropriate body to review the legalities. He noted the testimony heard was an example of the true definition of strange bedfellows.

[2:53:52 PM](#)

CHAIR WILSON asked for a roll call vote.

A roll call vote was taken. Senators Giessel, von Imhof, Micciche, and Wilson voted in favor of moving SB 124 from committee and Senator Begich voted against it. Therefore, the motion to move SB 124 from committee passed by a 4:1 vote.

[2:55:09 PM](#)

CHAIR WILSON announced that SB 124 moves from the Senate Health and Social Services Standing Committee with a vote of 4:1.

At ease.

[2:55:23 PM](#)

CHAIR WILSON reconvened the meeting and asked if there were any closing comments from committee members.

SENATOR BEGICH reminded the members that last year the committee discussed reopening public testimony for SB 72 and he hoped that would occur.

CHAIR WILSON responded that the bill sponsor needed to contact his office to request a hearing.

[2:57:59 PM](#)

SENATOR MICCICHE asked for a description of the general purpose of the bill for the public.

[2:58:08 PM](#)

SENATOR BEGICH explained that SB 72 was Senator Gardner's bill regarding transgender rights. He reminded members that public testimony was prematurely closed in a Friday evening meeting.

CHAIR WILSON reiterated that it would require another sponsor request for the bill hearing.

SENATOR BEGICH thanked the chair.

[2:58:22 PM](#)

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee at 2:58 pm.