

**ALASKA STATE LEGISLATURE**  
**SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE**

February 26, 2020

1:31 p.m.

**MEMBERS PRESENT**

Senator David Wilson, Chair  
Senator Natasha von Imhof, Vice Chair  
Senator Cathy Giessel  
Senator Mike Shower  
Senator Tom Begich

**MEMBERS ABSENT**

All members present

**COMMITTEE CALENDAR**

SENATE BILL NO. 173

"An Act relating to mobile intensive care paramedics; relating to duties of the State Medical Board and the Department of Health and Social Services; and providing for an effective date."

- MOVED SB 173 OUT OF COMMITTEE

SENATE BILL NO. 134

"An Act relating to medical assistance reimbursement for the services of licensed professional counselors; and providing for an effective date."

- MOVED SB 134 OUT OF COMMITTEE

SENATE JOINT RESOLUTION NO. 13

"Proposing an amendment to the Constitution of the State of Alaska relating to abortion."

- HEARD & HELD

**PREVIOUS COMMITTEE ACTION**

BILL: SB 173

SHORT TITLE: LICENSE MOBILE INTENSIVE CARE PARAMEDICS

SPONSOR(s): SENATOR(s) REVAK

02/03/20 (S) READ THE FIRST TIME - REFERRALS  
02/03/20 (S) HSS, L&C  
02/17/20 (S) HSS AT 1:30 PM BUTROVICH 205  
02/17/20 (S) Heard & Held  
02/17/20 (S) MINUTE(HSS)  
02/26/20 (S) HSS AT 1:30 PM BUTROVICH 205

BILL: SB 134

SHORT TITLE: MEDICAID COVERAGE OF LIC. COUNSELORS  
SPONSOR(S): SENATOR(S) WILSON

01/21/20 (S) PREFILE RELEASED 1/10/20  
01/21/20 (S) READ THE FIRST TIME - REFERRALS  
01/21/20 (S) HSS, FIN  
02/21/20 (S) HSS AT 1:30 PM BUTROVICH 205  
02/21/20 (S) Heard & Held  
02/21/20 (S) MINUTE(HSS)  
02/26/20 (S) HSS AT 1:30 PM BUTROVICH 205

BILL: SJR 13

SHORT TITLE: CONST. AM: PROHIBIT ABORTION/FUNDING  
SPONSOR(S): SENATOR(S) HUGHES

01/21/20 (S) READ THE FIRST TIME - REFERRALS  
01/21/20 (S) HSS, JUD, FIN  
02/26/20 (S) HSS AT 1:30 PM BUTROVICH 205

**WITNESS REGISTER**

DAVE WALLACE, Chief Executive Officer  
Mat-Su Regional Medical Center  
Palmer, Alaska

**POSITION STATEMENT:** Testified in support of SB 134.

ELIZABETH RIPLEY, Chief Executive Officer  
Mat-Su Health Foundation  
Wasilla, Alaska

**POSITION STATEMENT:** Testified in support of SB 134.

JARED KOSIN, President and Chief Executive Officer  
Alaska State Hospital and Nursing Home Association  
Anchorage, Alaska

**POSITION STATEMENT:** Testified in support of SB 134.

SENATOR SHELLY HUGHES  
Alaska State Legislature

Juneau, Alaska

**POSITION STATEMENT:** Testified as sponsor of SJR 13.

LISA HART, Staff

Senator Hughes

Alaska State Legislature

Juneau, Alaska

**POSITION STATEMENT:** Presented an overview and sectional of SJR 13 on behalf of the sponsor.

SENATOR KATRINA JACKSON, representing self

Louisiana State Legislature

Baton Rouge, Louisiana

**POSITION STATEMENT:** Testified in support of SJR 13.

DONNA HARRISON, M.D., Executive Director

American Association of Pro-Life Obstetricians and Gynecologists

Eau Claire, Michigan

**POSITION STATEMENT:** Testified in support of SJR 13.

TERRISA BUKOVINAC, representing self

San Francisco, California

**POSITION STATEMENT:** Testified in support of SJR 13.

LISA GENTEMANN, representing self

Eagle River, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

LOREN LEMAN, representing self

Anchorage, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

ROBIN SMITH, representing self

Anchorage, Alaska

**POSITION STATEMENT:** Testified in opposition to SJR 13.

CAROLINE MALSEED, Reverend

Church of the Holy Trinity

Juneau, Alaska

**POSITION STATEMENT:** Testified in opposition to SJR 13.

ROBB ARNOLD, representing self

Juneau, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

SARAH HENNEMANN, M.D., representing self

Palmer, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

WINDY PERKINS, representing self  
Anchorage, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

MOIRA PYHALA, representing self  
Soldotna, Alaska

**POSITION STATEMENT:** Testified in opposition to SJR 13.

JONATHAN FISHER, representing self  
Juneau, Alaska

**POSITION STATEMENT:** Testified in support of SJR 13.

LUANN MCVEY, representing self  
Juneau, Alaska

**POSITION STATEMENT:** Testified in opposition to SJR 13.

#### **ACTION NARRATIVE**

[1:31:47 PM](#)

**CHAIR DAVID WILSON** called the Senate Health and Social Services Standing Committee meeting to order at 1:31 p.m. Present at the call to order were Senators Giessel, von Imhof, Begich, Shower, and Chair Wilson.

#### **SB 173-LICENSE MOBILE INTENSIVE CARE PARAMEDICS**

[1:32:12 PM](#)

**CHAIR WILSON** announced the consideration of SENATE BILL NO. 173, "An Act relating to mobile intensive care paramedics; relating to duties of the State Medical Board and the Department of Health and Social Services; and providing for an effective date."

He noted the committee heard an overview on February 17, took public testimony, and received an updated fiscal note from the Department of Health and Social Services (DHSS). He solicited a motion.

[1:32:47 PM](#)

**SENATOR VON IMHOF** moved to report SB 173, version 31-LS1365\M, from committee with individual recommendations and updated fiscal notes. There being no objection, SB 173 was reported from the Senate Health and Social Services Standing Committee.

[1:33:11 PM](#)

At ease

**SB 134-MEDICAID COVERAGE OF LIC. COUNSELORS**

[1:34:36 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 134, "An Act relating to medical assistance reimbursement for the services of licensed professional counselors; and providing for an effective date."

He noted that he is the prime sponsor of SB 134. The bill was presented on February 21, 2020 and public testimony was taken. This is the second hearing on the bill.

[1:35:16 PM](#)

DAVE WALLACE, Chief Executive Officer, Mat-Su Regional Medical Center, Palmer, Alaska, said Mat-Su Regional is a 125-bed acute care hospital in the fastest growing service area in Alaska. The Medicaid coverage for licensed professional counselors is important because it is part of the continuum of care for behavioral health. He expressed concern on the lack of behavioral health services in Mat-Su and throughout the state. Mat-Su Regional seeks to have care provided at the most appropriate level. If more counselors are paid to see Medicaid patients with behavioral health needs, it will keep the patients from going to a higher, more expensive level of care, such as the emergency department.

MR. WALLACE said Mat-Su Regional works with the Mat-Su Health Foundation to reduce the overuse of the emergency department through the High Utilizer Mat-Su project [HUMS]. HUMS targets patients who have used the emergency department at least five or more times in a year. He reported that 68 percent of over utilizers are Medicaid recipients. The majority of these patients suffer from a primary or secondary diagnosis related to behavioral health. His counterparts at Mat-Su Health Foundation have testified that this program has reduced costs.

MR. WALLACE said the number of patients served is relatively small but Mat-Su Regional estimates it has saved over \$1 million dollars by reducing the number of emergency room (ER) visits by overutilizers. Sixty percent of ER patients have a behavioral health diagnosis and would benefit from counseling. Allowing counselors to serve behavioral health patients will result in additional savings to the state for Medicaid services. With passage of SB 134, Mat-Su Regional's primary care clinic can use

its licensed professional counselor to serve Medicaid patients. SB 134 will enhance the continuum of care.

[1:39:12 PM](#)

ELIZABETH RIPLEY, Chief Executive Officer, Mat-Su Health Foundation, Wasilla, Alaska, said SB 134 is crucial because it will help address Mat-Su residents' mental health and substance use disorders. Licensed professional counselors are key behavioral health providers for these issues. Mat-Su residents identified prominent issues in the Mat-Su Health Foundation's last three community needs assessments. In 2013, residents and professionals indicated the top five health challenges were alcohol and substance abuse, children experiencing trauma and violence, depression and suicide, domestic violence and sexual assault, and lack of access to behavioral health care. Counseling services can address these issues. SB 134 would expand the health care professions by including professional counseling services to residents on Medicaid.

MS. RIPLEY said the prevalence of mental health and substance use disorders and crises is increasing in the Mat-Su region and statewide. The average annual growth rate for Mat-Su Regional emergency department visits for patients with behavioral health diagnoses was 20 percent from 2015 to 2017. This increase is largely due to the opioid epidemic and lack of access to treatment. She said Mr. Wallace reported that Mat-Su Regional has an inpatient unit, but up until last year the hospital did not provide behavioral health care treatment. Passage of SB 134 will help address behavioral health issues by providing patients with the appropriate level of care at the onset of the problem, before their behavior health issues escalate. Mat-Su Regional is inundated with behavioral health patients in crisis. In 2016, 3,443 residents seen by the ER had a primary behavioral health diagnosis. Of the 3,443 patients using the ER 8,400 times, 46 percent were on Medicaid. The top diagnoses for these patients were suicidal ideation and self-harm, alcohol-related disorders, delirium, dementia, and cognitive disorders. These ER visits cost \$43.8 million dollars solely for facility charges. The average charge per visit was \$5,216 and the average per patient cost totaled \$12,725. Clearly, the emergency department is the least cost effective method to treat behavioral health problems. Early intervention with more immediate patient access to a behavioral health providers can reduce costs for the hospital and the state and reduce patient pain and suffering.

[1:44:22 PM](#)

MS. RIPLEY said access remains a problem. Very few primary care practices employ behavioral health providers. She indicated that two of the many primary care practices in Mat-Su, outside of federally qualified health centers, employ a behavioral health clinician. One reason there is so little integration of behavioral health in these practices is that providers cannot bill Medicaid for professional counseling services. Another reason is due to a shortage of psychiatrists to supervise behavioral health providers. She noted that Senator Giessel sponsored Senate Bill 169, which passed the legislature in 2018, allows behavioral health care providers to be supervised by any physician.

MS. RIPLEY said Senate Bill 105 authorized Medicaid reimbursement for marriage and family counselors. The next step is to add Medicaid reimbursement to behavioral health providers, which will meet patient needs and make behavioral health services sustainable in physician offices.

MS. RIPLEY noted that Mr. Wallace referenced HUMS. The Mat-Su Foundation started HUMS as a way to provide care coordination and access to community supports for high utilizers, defined as residents who had five or more visits in the emergency system in a year and who were unable to independently access consistent and appropriate care and support in the community. Mr. Wallace mentioned the dramatic cost savings of more than one million dollars a year. The Mat-Su Foundation is entering the third year of the project. It also has alleviated significant trauma for not just the patients, but for the health care providers and family who often suffer trauma along with the patients.

MS. RIPLEY said there would be far less need for programs like HUMS if people had access to care and support before their needs become a crisis. The project has had more than \$2.168 million in cost savings. The project has a third party evaluator who tracks its progress and any need for course correction. In 2018, \$347,288 in emergency room charges was saved by the top three utilizers alone. That same year seven patients who enrolled in HUMS did not use the emergency department at all.

She said the age of the super utilizers ranges from 16 to 82. Seventy-two percent have Medicaid coverage. She related a story of a young adult who had 17 visits to the emergency department before enrolling in HUMS. Most of his emergency visits led to inpatient admission and he seemed to have little to no interest in improving his situation. The HUMS team built a rapport with the client and he did want to change. He is now sober, his

diabetes is managed, he is working full time, and has a great relationship with his primary care provider. He has years to live to make a positive difference.

[1:50:47 PM](#)

JARED KOSIN, President and Chief Executive Officer, Alaska State Hospital and Nursing Home Association, Anchorage, Alaska, said SB 134 is good policy. People talk about cutting costs and investing in the continuum of care at the community level, where it is a lot cheaper, and reserving those higher level, more expensive settings for people who actually need it is the way to do so. This is a very practical step forward.

[1:51:46 PM](#)

CHAIR WILSON solicited a motion.

[1:52:01 PM](#)

SENATOR VON IMHOF moved to report SB 134, version 31-LS1261\A, from committee with individual recommendations and attached fiscal notes.

There being no objection, SB 134 was reported from the Senate Health and Social Services Standing Committee.

[1:52:19 PM](#)

At ease

**SJR 13-CONST. AM: PROHIBIT ABORTION/FUNDING**

[1:54:45 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE JOINT RESOLUTION NO. 13, "Proposing an amendment to the Constitution of the State of Alaska relating to abortion."

He advised that the committee would hear an overview from the sponsor and take invited and public testimony. He urged people to email their testimony to shss@akleg.gov. He called Senator Hughes and her staff to the table.

[1:55:40 PM](#)

SENATOR SHELLY HUGHES, Alaska State Legislature, Juneau, Alaska, sponsor of SJR 13, thanked the committee for hearing the resolution. She pointed out that SJR 13 does not specifically prohibit abortion. Instead, it proposes an amendment to the Constitution of the State of Alaska by adding a new section to provide clarity regarding Article 1, which pertains to the right

to privacy and the right to equal protection and Alaska's ability to set public policy related to abortion.

SENATOR HUGHES noted that in 1973, the U.S. Supreme Court declared with *Roe v. Wade* and reaffirmed in 1992 with *Planned Parenthood v. Casey* that there is an alleged federal constitutional right to abortion. However, the federal courts have held that states can still legislate related issues. For example, states can ban the use of public funds for abortions, require a parent to consent for an abortion for a minor, and even could disallow certain procedures, such as partial birth abortion or late-term abortion. In Minnesota, both parents must be informed before a minor can have an abortion. In Illinois, one parent must be informed. She reported that 21 of the 37 states have laws requiring parental consent and prohibit partial birth abortion. Three states have laws that apply to post viability, which is the ability to survive outside of the womb.

SENATOR HUGHES said blue states such as California, Washington, Minnesota, Illinois, Michigan, Pennsylvania, and Massachusetts prohibit abortion after 24-weeks. Gray states are competitively split between left and right or Democrat and Republican, according to Gallup. She said three gray states: Texas, Nebraska, and North Carolina, prohibit abortion when a fetus is more than 18 to 22 weeks old. Another three gray states recently passed heartbeat bills, prohibiting the abortion of fetuses at six to eight weeks.

SENATOR HUGHES said Alaska is unable to have any provisions in law related to abortion. She asked members to help to fix the Constitution of the State of Alaska so some parameters that even blue and gray states have could be allowed to stand if it is the will of the people through their elected legislators or the voter initiative process. Ballot initiatives and laws similar to ones she just discussed have been struck down by the Alaska Supreme Court.

SENATOR HUGHES said these laws have been subject to a series of decisions asserting the existence of a state constitutional right to abortion that protects abortion even more broadly than the U.S. Constitution. As a result, numerous laws that would be completely permissible under the federal constitution and that exist in other states have been struck down by Alaska's courts.

SENATOR HUGHES said SJR 13 would allow Alaska to be on par with other states. It would permit the decisions that Alaskans make on issues regarding the parents of minors, unborn babies, and

public funding of abortion to stand. She expressed concern that the state has seen a pattern of obstruction by the Alaska Supreme Court. This resolution is not designed to answer the question of what a woman may legally do, or if the state should fund abortion, but to keep the courts from adding something to the Constitution of the State of Alaska that its framers never envisioned. She offered her view that the Court has used right to privacy as a default to overrule abortion-related laws in Alaska.

[2:01:19 PM](#)

SENATOR HUGHES referred to Alaska's Constitution: A Citizen Guide by Legislative Affairs, which said "The right to privacy was prompted by fear of the potential for misuse of computerized information systems, which were then in their infancies." In the 1970s, the Department of Public Safety was developing the Alaska Justice Information System (AJIS), a computerized database of the criminal history of individuals. Fearful that such a system was the precursor of a Big Brother government information bureaucracy, legislators responded with a constitutional amendment on the right to privacy.

SENATOR HUGHES said SJR 13 relates to protecting the separation of powers.

[2:04:39 PM](#)

LISA HART, Staff, Senator Hughes, Alaska State Legislature, Juneau, Alaska, said that in 2019, conservative state legislators raced to enact an unprecedented wave of bans for some, most, or all abortions. At the end of the year, 25 new abortion bans had been signed into law, primarily in the South and Midwest. Legislators also continued their efforts to adopt other types of abortion restrictions. State-level policy to ban or restrict abortion are an important backdrop as the U.S. Supreme Court considers a Louisiana law to require abortion providers have admitting privileges at a local hospital.

MS. HART said her point is that action is being taken by states to take this matter to the legislative, the law-making body of government, as opposed to it being decided by judicial review.

[2:07:14 PM](#)

SENATOR BEGICH said Ms. Hart is couching this legislation in terms of politics. Her map shows Alaska listed as a solid Republican state. He asked if that is the best way to frame this issue. In Alaska, the difference between the top two candidates in the last gubernatorial race was less than five percent. The

prior governor was nonpartisan and supported by the Democratic Party. The U.S. senator from 2008 to 2014 was also a Democrat. He asked if that is the right way to present this argument

SENATOR HUGHES said she is not trying to introduce partisan politics, but the point is to make it clear that a spectrum of states have decided to put parameters around abortion. Alaska is unable to do that. Alaska is likely to be a gray state for 2020. It does not matter where anyone falls along the political spectrum, but there have been parameters set in various states. It is not to pit anyone against another. Senator Katrina Jackson is an African-American and a Democrat from Louisiana. She led this in her state. This is not partisan; it is about the babies, she said.

[2:09:34 PM](#)

MS. HART provided a sectional analysis of SJR 13:

Section 1 - Article I, Constitution of the State of Alaska, Page 1, Lines 3-7

Amends the Constitution of the State of Alaska by adding a new section, Section 26. Abortion. The amendment states that in order to protect human life, nothing in this constitution may be construed to secure or protect a right to an abortion or require the State to fund an abortion.

Section 2 - Article I, Constitution of the State of Alaska, Page 1, Lines 8-10

Adds that the amendment proposed by this resolution shall be placed before the voters of the state at the next general election in conformity with art. XIII, sec. 1, Constitution of the State of Alaska, and the election laws of the state.

SENATOR BEGICH asked Senator Hughes if there is anything in law to prohibit anyone from choosing not to have an abortion.

SENATOR HUGHES replied she did not believe so, but the Department of Law was available to answer any questions regarding legality.

SENATOR BEGICH asked if there is any law in the state that compels a person to have an abortion or does a person have the ability to choose to take a child to term.

SENATOR HUGHES responded that a person has that ability, but the baby does not have a choice. The legislation allows this body and the voter initiative process to decide abortion policy. The state will still be subject to federal law. She offered her belief that just as a woman wants a choice, the unborn babies deserve a choice to live. However, SJR 13 relates to the state's ability to maximize what can be done under federal law, which it cannot do at this time.

SENATOR BEGICH said it removes the coverage of Alaska's right to privacy in issues regarding abortion.

SENATOR HUGHES answered that is correct.

SENATOR BEGICH asked if there is some level of unfairness in removing one gender from the coverage of right to privacy when it comes to this issue. He said he recognizes her concern for those who have not yet been born, but he speaks to those specifically affected by removal of this coverage of their right to privacy.

SENATOR HUGHES replied she would like to discuss the resolution, not have a philosophical debate during the committee.

CHAIR WILSON said many people want to testify and written testimony can be submitted to [shss@akleg.gov](mailto:shss@akleg.gov). He turned to invited testimony.

[2:14:56 PM](#)

SENATOR KATRINA JACKSON, representing self, Louisiana State Legislature, Baton Rouge, Louisiana, said that when the U.S. Supreme Court passed Roe v. Wade, each state legislature has an interest in regulating abortions and protecting the health and safety of their constituents. Louisiana has parental consent laws but some of Alaska's laws regarding parental consent have been struck down by the Alaska Supreme Court.

SENATOR JACKSON said Louisiana's law will go to a vote of the people this year. She expressed concern that courts can strike down legislation. She said she plans to file legislation related to human trafficking and reporting requirements for abortion facilities. She reported that human traffickers brought women to Shreveport, from Texas for abortions. This was discovered because parental consent was required and some alleged parents were not. Although the records are private, the Louisiana Department of Health investigated the clinic. She expressed concern that without parental consent laws, states cannot

protect vulnerable young girls who are unwillingly taken to an abortion clinic.

She said she is prolife, but she is also a practicing attorney. She offered her belief that abortion should be regulated. However, without proposed constitutional amendments, some states will never be able to regulate abortion clinics and their practices. She expressed concern that the courts are ruling against legislation even when there is a compelling state interest. She said that without passing a constitutional amendment, some states cannot regulate health standards, which goes far beyond whether a woman has the right to abortion.

[2:21:33 PM](#)

DONNA HARRISON, M.D., Executive Director, American Association of Pro-Life Obstetricians and Gynecologists, Eau Claire, Michigan, said her organization represents over 4,000 reproductive health professionals throughout the United States. These physicians practice in accordance with the Hippocratic Oath. Hippocratic medical professionals have vowed to do no harm to their patients and certainly not to intentionally kill them. These physicians recognize both the pregnant mother and the human being in her womb as their patients. Although some people will testify that elective abortion is necessary to a woman's reproductive health, it is not true. Eighty-five percent of ob-gyns do not perform abortions as part of their professional practice, even though these physicians are all trained to do so. The purpose of an elective abortion is to produce a dead baby for social, not medical reasons, which was made explicitly clear by the testimony of the abortion providers at the partial birth abortion hearings before the U.S. Supreme Court. If an ob-gyn needs to separate the mother and her unborn human being in order to save her life and the baby can survive outside of the womb, then the ob-gyn will do a delivery procedure designed to maximize the chances of survival of both the mother and her unborn child. She described the various partial birth abortion procedures. Occasionally, babies survive the feticide procedure which is called a "failed abortion."

DR. HARRISON said it is true that rarely, the separation of the mother and the unborn human being in her womb must be performed before a baby is capable of surviving outside in order to save the mother's life. This is not the same as an elective abortion. Some short-term risks of abortion are major hemorrhage, infection, anesthesia complications, damage to the mother's womb, and death. Long-term health risks include increased risk of preterm birth in subsequent pregnancies, increased risk of

breast cancer, an increased risk of suicide, drug abuse, and major depression. These are certainly public health considerations. She urged members to pass SJR 13 for the sake of the mother's health and the unborn child.

[2:27:20 PM](#)

TERRISA BUKOVINAC, representing self, San Francisco, California, said she is an atheist, liberal, feminist, vegan, LGBTQIA ally, registered Democrat, and founder and executive director of Pro-Life San Francisco, a millennial-lead organization dedicated to resisting the influence of abortion in their community. As a full-time activist, she has seen similar bills across the nation. She has asked legislators across the nation why it is so controversial to declare that there is no right to abortion since the legislation does not criminalize abortion. Some people want to ban all abortions. There are those want to ban all birth control or sex outside of marriage. She said thousands of research projects rely on fetal tissue that require a monthly supply of multiple, late-term pristine fetuses between the ages of 18 and 24 weeks from elective abortions. Fetuses born after 24 weeks have a high likelihood of survival if given medical care. She described the medical procedures.

MS. BUKOVINAC said the vast majority of people do not want to ban all abortions; they want to ensure that it is regulated and the numbers are reduced She said this majority must stand up to the pressure of the powerful abortion lobby. She urged members to protect viable, unborn babies from an industry that seeks to profit from their demise by supporting SJR 13.

[2:32:07 PM](#)

CHAIR WILSON noted that over 100 people had signed up to testify and urged people to email written testimony. He opened public testimony.

[2:32:31 PM](#)

LISA GENTEMANN, representing self, Eagle River, Alaska, said the state must defend and protect and speak up for the safety and rights of the unborn until they are able to defend themselves. She urged members to protect all Alaskans by passing SJR 13.

[2:34:48 PM](#)

LOREN LEMAN, representing self, Anchorage, Alaska, noted that he served in the legislature for 14 years and as lieutenant governor for four years. SJR 13 is a necessary step to restore to elected officials and the people of Alaska the ability to set policy on abortion. He offered his belief that a series of

unfortunate court decisions has usurped this authority for more than two decades. In 1979, he sponsored Senate Bill 24 to allow Alaskans to enforce the parental consent law related to abortions for minors. When Alaska legalized abortion in 1970, the law included a provision requiring parental consent before an abortion, but an attorney general's opinion said that was unenforceable. His bill included a judicial bypass to allow a young girl to go to court to obtain permission instead of from parents. Planned Parenthood sued and the Alaska Supreme Court ruled against the statute. Justice Dana Fabe wrote that only a parental notification law would be acceptable. He subsequently gathered the signatures for a citizen initiative and that became law and was in effect for several years. [Mr. Lemman was unable to finish his testimony in the allotted time.]

[2:38:17 PM](#)

ROBIN SMITH, representing self, Anchorage, Alaska, said that in 1973 Alaska was the third state to establish the right of a woman to have an abortion, prior to the U.S. Supreme Court ruling on Roe v. Wade. Women worked to get the law passed because women died during illegal abortions. According to the Guttmacher Institute, 25 percent of women will have an abortion before the age of 45. Fifty-nine percent of women who have abortions are already mothers. Making abortion illegal forces it underground and makes it unsafe. The best way to prevent abortion is to offer comprehensive sex education to all teens, free access to contraceptives, and a 12-month supply. None of this is available in Alaska, yet Alaska has one of the highest rates of rape and sexual assault in the country.

[2:40:47 PM](#)

CAROLINE MALSEED, Reverend, Church of the Holy Trinity, Juneau, Alaska, said the Episcopal Church opposes abortion as a means of birth control or family planning. However, since 1967 the church has maintained its "unequivocal opposition to any legislation on the part of the national or state government, which would abridge or deny the right of individuals to reach informed decisions about the termination of pregnancy and to enact upon them." In 2018, the Episcopal Church called for women's reproductive health and women's reproductive health procedures to be treated like all other medical procedures. Any proposed legislation must take special care to see that the individual conscience is respected. She said there are no Biblical prescriptions against abortion. Enforced pregnancy is a violation of international law and is considered a war crime. Laws against abortion do not prevent them, but result in unregulated and

illegal abortions and death by hemorrhage or sepsis and the risk of suicide by desperate, isolated women.

[2:44:08 PM](#)

ROBB ARNOLD, representing self, Juneau, Alaska, said that according to the U.S. Constitution, people have been endowed by their creator with certain inalienable rights, life, liberty, and the pursuit of happiness. He offered his view that personhood starts at conception and the state should uphold the U.S. Constitution.

[2:45:52 PM](#)

SARAH HENNEMANN, M.D., representing self, Palmer, Alaska, said that as a family medicine physician, she has a unique window into patients' lives. Her patients are burdened with the weight of many difficult situations. She comes home every day carrying a little bit of their pain, sadness, and anxiety. As a physician, she understands that teens have adult bodies, but the frontal lobes of their brains are not completely formed until the mid20s, so parents have a vital role in directing the paths that teenagers take. The American Academy of Pediatrics has said that parents understand the unique needs of their children and should be the decision makers for their children's health care. Parents should be at the very least aware that an abortion was performed on a family member. She had a teen patient who almost died due to delayed medical care because her parents were not aware that their daughter had an abortion.

[2:48:48 PM](#)

WINDY PERKINS, representing self, Anchorage, Alaska, said the topic is not necessarily debating abortion but is an attempt to take some of the out-of-control power away from courts.

[2:51:45 PM](#)

MOIRA PYHALA, representing self, Soldotna, Alaska, said she is a lifelong Alaskan who was born and raised on the Kenai Peninsula. She knows the challenges many individuals face with their own health care decisions. Alaska has many unsolved community health concerns, including that Alaska has the highest rate of sexual assault in the nation. She is one of many survivors of sexual assault in Alaska. She is grateful that the assault did not result in pregnancy. Others in her area have not been as fortunate and have had forced births or unwanted pregnancies. She cannot physically and emotionally imagine how her life would have been altered if she had become pregnant without access to abortion at 15. She would not have continued her education and graduated from the University of Alaska Anchorage and become a

community organizer. SJR 13 does not end abortion. It just supports ending safe and legal abortion. The last thing her community and state need is young individuals like herself dying because they are victims of assault and they cannot access their constitutional right to abortion.

JONATHAN FISHER, representing self, Juneau, Alaska, said he and his wife had three babies. When he came into the room during his wife's pregnancies, each time the baby would get excited to hear his voice. Not only is there life in the womb, but there is cognitive life, he said. He objected to funding abortions with his taxes.

[2:56:05 PM](#)

LUANN MCVEY, representing self, Juneau, Alaska, said she is a retired teacher and she values human life. However, it is important to bring a child into an environment where it is wanted, cherished, and cared for. It is also important for a mother to be cherished and cared for and have the choice of conception. Controlling one's body and health is a human right that should be protected in statute. She cannot imagine that this kind of legislation would be considered if men conceived. It is wrong for the state to force women to bring children into world.

[2:57:37 PM](#)

CHAIR WILSON observed that over 100 people were waiting to testify and that testimony would continue at a later date. He urged people to send testimony to [shss@akleg.gov](mailto:shss@akleg.gov).

CHAIR WILSON held SJR 13 in committee.

[2:58:41 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 p.m.