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While the material outcome of changing the criteria for "post-viability" abortions to be "only when it is medically necessary to preserve the life or health of the mother or, in the professional judgment of a physician ... the fetus is diagnosed with a lethal fetal anomaly ... [that] will, with reasonable certainty, result in the death of the child not more than 3 months after birth" may (might) in actual fact be insignificant, the language of this bill forces healthcare providers and physicians to abdicate their moral and ethical obligations. It takes away their capacity to make decisions in partnership with their patients. It forces physicians to look to the law to arbitrarily tell them when they may or may not provide healthcare, rather than their judgment, their experience, and the judgment and experience of their peers. It prevents them from delivering what is potentially the best course of action for their patients and permits them only to provide healthcare in the narrow scope of circumstances for which the law allows. This is not health care: it is partisanship with a stethoscope.

We go to doctors, and seek their advice and counsel, because we trust their discretion (in the sense of judgment, not of secrecy, though, frankly, both). A healthcare provider who cannot provide me the full range of options that would be best for my health, and who cannot speak candidly with me about them, is not a healthcare provider: they are an agent of a political agenda. And if I cannot trust them in one area of my health and welfare, why should I trust them in any? A physician is not a political entity.

Legislating medical definitions is a slippery slope. What if my child is reasonably likely to die within 6 months of birth? Within one year? Why do legislators get to make that choice for me, and who drew that line in the sand, and why? What defines "reasonable likelihood"? There is no universally correct answer to these questions, just like there is no universally correct course of health care. For this reason among others, we don't legislate healthcare. We don't mandate that cancer patients must or must not receive chemotherapy, or mandate that individuals with bad knees must or must not undergo surgery; physicians will recommend the best course of action for particular patients, based on various factors, and the treatment is taken as a mutual decision between patient and physician. At no point in this conversation are the legislators of the state of Maine consulted for their opinion. I see no defensible reason why reproductive healthcare should be any different.