

Senator _____, Representative Javner, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of the proposal to repeal Title 22, section 3196. To be quite honest, of all the bills I have come here to speak about today, this is one of the most ridiculous. Access to safe abortions saves the state money and keeps the population happy and healthy. Realistically, that is all I have to say. But given the other proposals on the docket for today, it is necessary for me to expound on this statement for a higher word count than the bill itself. Including the title page.

The people who seek an abortion under current laws are not doing so without thought or consideration to their other options. Whenever I speak with one of my female friends or family members about the desire to have a child, the first thing out of their mouth is usually something akin to "I'd love to, but I can't afford it right now". Economic stability is always part of the conversation when it comes to getting pregnant and raising a child, and if NOT having a surprise pregnancy is one of the things keeping someone living paycheck to paycheck from becoming homeless, it is the smarter financial decision to terminate that pregnancy. How does this come back to MaineCare? I'm glad you asked. [COAT HANGER]

Abortions are GOING to happen, proposed laws or not. And those who are on MaineCare are likely the ones who can not afford to leave the state for the procedure, so they will turn to other means of doing so. The people who are going to terminate their pregnancy in an unsafe and unregulated manner are going to end up in the hospital and thus put more stress on the State's pocketbook. So, the state can either eat the minimal cost of an abortion or the much MUCH higher cost of surgical repair to damaged organs, perforated intestinal linings, dissolved stomach lining due to chemical agents. The list goes on.

Repealing this law will stress our already overworked healthcare system, it will harm the most vulnerable members of our society, and it will lead to a heavier burden on the taxpayer. And with the current volatility of the market as well as federal funding being increasingly uncertain, Maine may require as much money as possible. Repealing this law costs money, leaving it alone saves money. There is no upside to be found here. When the time comes, I urge you all to vote to keep Title 22, section 3196 on the books. Thank you.

LD 682 - HP 297

Senator _____, Representative Haggan, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of this proposed act. As you may be able to tell, I am not personally affected by this proposal. However, I have plenty of women in my life that will be. As they are unable to be here today, I am here to speak on their behalf. But even if I wasn't here for specific people, even if I wasn't here to put their sentiments in my own words, I took one look at LD 682 and knew I had to say something. The changes that this would bring have no benefit to residents of Maine whatsoever and pave the way to governmental overreach. To those of you that believe I am being alarmist or hyperbolic with that statement, allow me to paint a picture for you.

As we stand right now, Abortion is a perfectly legal medical procedure within a certain timeframe. This law does not change that, but lays the groundwork to punish our citizens if that does change. If this law goes into effect, we start a running catalog of everyone who gets this procedure done. If you have an abortion, the doctor must submit a report to a government agency with your age, race, marital status, a nebulous "other information as required", and for some reason your level of education. The name isn't attached yet, but as there are provisions in this law that could charge the doctor with a crime, any litigation by the state against the doctor would likely render that information no longer protected by HIPPA, so onto the list it goes.

So, now the state has built a list of ordinary citizens that it doesn't like. Setting aside any privacy concerns in the event of a data breach, a concern that has become more and more frequent in recent years, A list of people like this is fertile ground for an abuse of power by a government without the best interests of its citizens in mind. Clearly YOU all do have the best of intentions for the people you govern. Clearly YOU would never use a list of people who had a legal medical procedure with ill intent. Clearly YOU would not intentionally be setting the stage for a push to imprison and abuse citizens who were complying with the law before it changed. But can you say the same for the person that comes after you? Or after them? Or your political opponent sitting next to you right now? This is Big Government wanting more control over its citizens. It is ammunition for a bad actor to abuse. I am obviously for safe and legal abortion or else I would not be here today, which overall this does not affect. However, this paves the way for an abuse of power down the line. Maybe not tomorrow, but somewhere down the line, it could happen. This is you making the bed, and I do not want my children to be forced to lie in it.

Please vote no when the time comes. This is unsafe and unjust. It puts the lives of my loved ones at risk, and has no benefit to anyone but those who would seek to abuse their power. Please use yours and throw this one into the garbage. Thank you.

LD 886 - HP 572

Senator _____, Representative Griffin, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of this act. At this point, if the schedule of discussion is to be believed at the time of writing this testimony, this will be the third time I have spoken to this committee today. And I believe I have conducted myself with dignity and respect towards you all. Have I engaged in hyperbole? Yes. Have I belabored the point? Probably. I am after all a pompous windbag in my daily life. But have I been rude? No. So, When reading LD 886, once I got to line 22, there was one question that came to mind. It was not asking how banning emergency contraceptives would help Mainers, it was not asking why a prescription needs a higher level of informed consent than a major surgery, it wasn't even questioning how this law will interact with the other proposals being discussed today. The question I have about line 22 of page one is for you, Representative Griffin. And it is "How dare you?"

The state of Maine is not a theocracy. There is no reason why informed consent of the SPIRITUAL damage of an abortion is necessary. The United States has no mandated state religion, and thus the exercising of one's religious freedom is still allowed. As written, the section requires a doctor to inform the patient of any physical, emotional OR SPIRITUAL risk of taking the perfectly legal medication provided to you by a doctor. While informed consent of side effects and risks is necessary and good, this provision serves absolutely no purpose but to push a faith that the patient may not even share.

I grew up in Sanford where there is a Unitarian Universalist church, and in 1978 church leadership passed a resolution stating "the right to choice on contraception and abortion are important aspects of the right of privacy, respect for human life, and freedom of conscience of women and their families" Yet, I do not believe this overwhelmingly pro-choice opinion of their church will make it into the proposed spiritual conversation a doctor will have with their patient. Despite traditional Buddhism being overall negative on the subject, the Dali Lama said "I think abortion should be approved or disapproved according to each circumstance." But this law has no such grey area. It is simply about the spiritual damage that WILL occur. And to those who have no such faith, who believe there is no spirit to damage? How can you damage something that isn't there? As far as the state is concerned, their faith or lack thereof is explicitly wrong. Your provision for telling the patient their soul will be irreparably damaged does nothing other than push a religion on a person who is in a very vulnerable position. It is manipulative and it is wrong.

This whole act is wrong, but it is this one point I find absolutely abhorrent. Again, the state of Maine has no officially mandated religion, but you have written this law as if it does. So, before you continue to push your faith onto a populace that may not share it, I urge you to remember Matthew 6, Verses 5-6. Please forgive me if I have quoted this in error or out of context.

"Beware of practicing your righteousness before other people in order to be seen by them, for then you will have no reward from your Father who is in heaven. "And when you pray, you must

not be like the hypocrites. For they love to stand and pray in the synagogues and at the street corners, that they may be seen by others. Truly, I say to you, they have received their reward. But when you pray, go into your room and shut the door and pray to your Father who is in secret. And your Father who sees in secret will reward you.”

To my reading, it is a reminder that those who yell the loudest about their faith seem to be doing so for earthly gain and not spiritual. Having faith is a personal relationship between you and whatever lies beyond. Forcing that upon others in such an unwilling manner is so much more of a poison to your spirit than what this bill is hoping to prevent. So please remember that not everyone shares your worldview, and if they never see the kingdom of heaven, it is not because you didn't preach enough. It is their problem and not yours. I urge all members of this committee to use their vote to relegate LD 886 to the dustbin of history. A bad idea in concept and execution. Thank you.

LD 975 - HP 635

Senator _____, Representative Griffin, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of the proposal to repeal the laws regarding abortion and reclassify a person's life as starting from the moment of conception. I feel these proposals are backward-thinking and regressive. As you may be able to infer by the general presentation of the clump of cells and poor decisions standing in front of you, these laws do not affect me as I do not possess a uterus or the ability to become pregnant. However, this proposal will absolutely impact the lives and livelihoods of practically everyone else in my life. As they couldn't be here today due to obligations such as employment and child rearing, I stand before you instead.

This law, if passed today as proposed, will lead to more death and harm to children than it would prevent. Setting aside the redefinition of life beginning at conception which is akin to calling a pinecone a pine tree, the vast majority of people who seek an abortion are not doing so for selfish reasons. Some do not have the money to raise a child, others are not in a stable environment for a child, some have medical reasons to not want to get pregnant without planning ahead, still others are aware of mental issues in themselves that would lead to heavy trauma for the prospective child. Others never planned to get pregnant at all. This bill has ZERO exclusions for a child conceived in a rape, ZERO exclusions for cases of incest. To use a deliberately provocative example, A twelve year old child who was forcibly violated by their father and finds themselves pregnant? As far as the state is concerned, she is required to bring that child to term despite all the hardship and heartache that this would cause on both the mother and the clump of cells the law defines as a human being. And as that child cries in the night, denied any sort of agency in their own life, The Maine House of Representatives pat themselves on the back for a job well done.

But, to circle back to economic factors, The projected impact of this bill is even more bleak. Not only will this proposal force people in economic hardship into even more dire circumstances as they must now care for and raise a human being, but by mandating that any and all miscarriages must be attended to or reported to a physician, we are putting even more economic strain on the state than we need to. First, as far as the reporting goes, we are taxing our already stressed and overworked healthcare professionals with admin paperwork. But beyond that, we are now going to force the attorney general's office to engage in costly litigation on the state's dime. Based on the figures I found, around 30% of pregnancies end in a miscarriage in the United States. In 2023, Maine had 11,621 successful births. Assuming that 30% is accurate, we now have approximately 3,486 potential legal cases that the taxpayer is on the hook for. And given the instability in Washington, and our Commander In Chief threatening to withhold federal funding due to our Governor choosing to follow the law as it exists now, Maine may need every last dollar it can get.

The right of each Mainer to make decisions about their own body is a fundamental pillar of personal freedom. When I was a boy, I often heard my parents say the phrase "I hate what you are saying but will defend to my death your right to say it. I extend that notion to the right for

everyone to make medical decisions about their own body, and despite what this bill has defined as a person, a clump of cells is not a human being yet, and so the Mother's voice should still be heard. Thank you.

LD 1007 - HP 654

Senator _____, Representative Paul, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of this act to update Maine's laws on informed consent. As a general rule, I am always suspicious of lawmakers writing laws regarding medical procedures rather than doctors doing the same. Sadly, I have not gone to medical school, nor have I vetted each and every one of you to see if I am instead talking to a panel of board certified medical practitioners. However, I did consult an article written by the American College of Obstetricians and Gynecologists, or ACOG for short. And in their estimation, Medication Abortion Reversal is not supported by science. And that is not my opinion, that is the literal title of the article. So, when I read in this proposed bill that "Initial studies suggest that there is no increased risk of maternal mortality after reversing the effects of a drug-induced abortion and that children born after reversing the effects of a drug-induced abortion have no greater risk of birth defects than the general population" I felt it was worth my time to dive into who was right and who was wrong. And as I said before, I trust a doctor more than I trust a lawmaker.

It appears that most of the "initial studies" that are cited lead back to a 2012 case series of six women, four of whom continued their pregnancies. Six is not a statistically significant number of people, and even so this was not a study, this was people looking at case files and advocating to do an actual study One overseen by an ethics board, which this was not. There was also no control group and no review process, nothing to make this anything other than observation. In 2020 An official study to evaluate abortion reversal WAS attempted, but it was ended early due to safety concerns for the participants. In 2016, a randomized trial was conducted to study administration of a progestin-only contraceptive, DMPA at the time of mifepristone administration for medication abortion. They found that rates of continuing pregnancy were higher compared to administration of mifepristone by itself. This has been cited by lawmakers as proof that DMPA can reverse the effects of mifepristone and therefore, abortion. However, the ACOG came to the conclusion that all this proves is that the concurrent administration of DMPA and Mifepristone leads to the latter being less effective. This is akin to drinking something containing activated charcoal for color and it neutralizing or absorbing any other medications you may have taken recently and claiming that it reversed your ibuprofen. The results of the 2016 study do not demonstrate that Abortion Reversal is possible, and yet, we are considering putting it into law.

If Chemical Abortion was unsafe, I would not be standing here right now. If Chemical Abortion was able to be reversed, I would absolutely want that fact known. A well informed decision I disagree with is always better than a misinformed one that I do. But there is no actual scientific evidence to say either of those two points. This proposal is flawed. At best, it relies on evidence that a larger and more thorough study is needed. At worst, this is intentionally misleading the citizens of Maine to believe a lie. It is not just a matter of opinion, it is false. One case review, One pilot study with findings that have been misinterpreted by lawmakers, and one proper study that ended early for safety reasons are not enough to base policy around. Please throw this bill out when it comes time to vote. Thank you.

LD 1154 - HP 759

Senator _____, Representative Paul, and members of the committee, my name is James Hare and I am from Berwick, Maine. I have come here today to speak in opposition of this proposal. I speak on behalf of women in my life with the ability to conceive children but who are unable to be here today, as well as myself who could one day father a child and care for my partner while they endure the pregnancy. While on paper, LD 1154 feels entirely reasonable and would be simple enough to enact, it comes with a couple very significant downsides

On paper, offering perinatal hospice is a fine idea and I am in favor of it as a concept, logistically there are several problems. First off, we have insurance companies. We live in an age where insurance companies are deciding to stop covering anesthesia if the surgery takes longer than 30 minutes. We have insurance companies denying life saving medications because the patient is allergic to the one they want to pay for. United Healthcare prides themselves on denying 25% or more of all claims, and you think they are going to pay for long term hospice when they could just pay for the abortion and save themselves some money? So now that burden will fall on the patient.

Speaking of the patient, many women have employment to think about. Not every job offers maternity leave or even healthcare to begin with. An extended hospital stay such as this may cause the mother to lose her job. That means a lack of insurance to help with the cost, that means no more financial security, that may even result in the mother becoming homeless in order to care for a child she will never meet. When faced with this prospect, it's likely very few will choose to move forward with perinatal hospice and instead opt for the safer financial decision over the tougher moral one.

Next, this is hospice, not healing. We have a mother who knows the child is going to die. And yet, if she agrees to perinatal hospice, she will be treated like an incubator for her dying child. The baby can not be saved, so instead of doing the kindest thing and ending their life in order to cut the suffering short, the mother must lay in a bed, emotionally devastated that she can do nothing but wait to say goodbye. That is cruelty no matter how you look at it.

However, this bill doesn't mandate this. It only requires that the service is offered. And if the mother can not afford to be away from work for a significant portion of the year, if her insurance company refuses to cover it, or if she just can't handle the emotional burden this level of care would entail, she must officially declare that she refused the offer. Currently, abortion is legal. But if that changes in the future, in the eyes of the law she is on record for committing murder. Even though it was legal at the time, this could lead to heavy consequences that the mother was not considering. In a time of shifting state and federal standards of what is and is not legal, having your medical record show that you committed a knowing act that the government suddenly declares abhorrent is very dangerous. While unlikely, the potential is there.

So, members of this committee, I urge you to consider the unintended consequences of LD 1154 once voting time comes. Though on paper very beneficial, it would require the patient

undergo an emotionally harrowing experience. They would need to weigh their emotional and financial health over the life of a child who would not even see sunlight. I ask that you vote no, but even if you don't, please consider all the factors before you do. Thank you.