Lindsay Gardner Bethel, ME LD 682

I'm writing in strong opposition to LD 682 – An Act to Amend Certain Laws Regarding Abortions.

As someone who lives in rural Maine, I already face challenges accessing timely, high-quality healthcare. We don't always have nearby OB/GYNs. We may have to drive hours for appointments, take time off work, and coordinate child care—just to receive basic medical care. LD 682 would make that already difficult situation even worse, especially for those of us seeking reproductive healthcare, including abortion.

This bill adds unnecessary and harmful restrictions that put up more roadblocks between patients and their doctors, especially in cases where time-sensitive, compassionate care is needed most. By restricting abortions after fetal viability—even in deeply tragic and medically complex situations—it disregards the lived reality of people who are often making heartbreaking decisions in consultation with trusted healthcare professionals.

Let's be clear: Abortions later in pregnancy are rare, and they are almost always because something has gone terribly wrong. These are often wanted pregnancies, and the people facing them are navigating devastating news—severe fetal anomalies, life-threatening complications, or risks to the pregnant person's health. The idea that politicians, not doctors or patients, should determine what qualifies as "medically necessary" is offensive and dangerous.

LD 682 also compromises patient confidentiality by requiring providers to report sensitive demographic information to the state. That's an erosion of privacy and a potential violation of HIPAA protections, especially in small communities where it's already hard to stay anonymous. It creates a chilling effect, where people may be afraid to seek care for fear their private decisions will be scrutinized or exposed.

Worse still, this bill would criminalize healthcare providers for doing their jobs—providing compassionate, evidence-based, life-saving care. Threatening doctors with criminal penalties only pushes providers away and increases the chance that people in rural communities like mine won't have anyone left to turn to when we need them most.

Healthcare decisions belong between patients and their doctors—not the government. This bill is an attempt to insert politics into deeply personal medical decisions, and it will harm the very people our healthcare system is supposed to serve.

I urge you to reject LD 682. Let us keep our rights, our privacy, and our ability to get the care we need—no matter where we live.

Lindsay Gardner, Bethel, ME