

MINUTES  
**SENATE STATE AFFAIRS COMMITTEE**

**DATE:** Friday, March 11, 2016

**TIME:** 8:00 A.M.

**PLACE:** Lincoln Auditorium

**MEMBERS PRESENT:** Chairman McKenzie, Vice Chairman Lodge, Senators Hill, Winder, Siddoway, Lakey, Stennett and Buckner-Webb

**ABSENT/ EXCUSED:** Senator Davis

**NOTE:** The sign-in sheet, testimonies and other related materials will be retained with the minutes in the committee's office until the end of the session and will then be located on file with the minutes in the Legislative Services Library.

**CONVENED:** **Chairman McKenzie** called the Senate State Affairs Committee (Committee) to order at 8:00 a.m. with a quorum present.

**VOTE ON GUBERNATORIAL APPOINTMENTS:** Vote on the reappointment of Shelly Jo Enderud and Bud Tracy to the State Building Authority.

**MOTION:** **Vice Chairman Lodge** moved to send the Gubernatorial reappointments of Shelly Jo Enderud and Bud Tracy to the State Building Authority to the floor with the recommendation that they be confirmed by the Senate. **Senator Hill** seconded the motion. The motion carried by **voice vote**.

**HCR 41** STATING LEGISLATIVE FINDINGS and celebrating the 125th anniversary of the adoption of the seal of the State of Idaho.

**Representative Troy**, District 5, presented this resolution. Idaho was admitted into the United States on July 3, 1890. Emma Edwards Green submitted a design for the State seal that was accepted. On March 14, 1891, the design was adopted by the Legislature as the official State seal. Ms. Green is the only woman to have designed a state seal. This resolution honors her work.

**Senator Buckner-Webb** commented that it was wonderful that this resolution is brought forward during Women's History Month.

**Senator Hill** remarked that it is always a highlight of the tours he gives around the Capitol to mention that the man and the woman on the seal are the same height, indicating the equally important roles they both play in the State. He expressed his appreciation for the resolution.

**MOTION:** **Senator Buckner-Webb** moved to send **HCR 41** to the floor with a **do pass** recommendation. **Vice Chairman Lodge** seconded the motion. The motion carried by **voice vote**.

**RS 24713** RELATING TO THE IDAHO UNBORN INFANTS DIGNITY ACT that seeks to protect the dignity of pre-born children terminated by abortion.

**David Ripley**, Executive Director, Idaho Chooses Life, presented this bill. This is a refined version of previous legislation. The language is more precise. He highlighted the changes in language. He addressed some questions that arose at the last print hearing. A mother may donate the remains of a baby in cases of miscarriage or stillbirth for research and

experimentation, but this consent has to be informed and freely given. Once consent is given, the disposition of those organs and tissue is beyond the mother's control.

**Senator Lakey** commented that he appreciated Mr. Ripley's work with the interested parties to improve the bill.

**Senator Stennett** asked why this bill has been brought so late in the session. **Chairman McKenzie** explained that the Committee had already heard this bill and had expressed concerns about the language. He noted that the sponsors were told that there would be a print hearing if the language could be revised.

**Senator Hill** asked about subsections (2) and (3) in page 4, lines 1-4, of the bill regarding the restrictions about the recipients of the transplantations of any bodily remains. He stated that the language makes it appear that everyone can know who the recipients are except the mother. He asked how could there be no restrictions in one section of the bill, but have a restriction on the mother in a different section of the bill. **Mr. Ripley** answered that this is "boiler plate language" from other statutes. The mother is not able to impose restrictions on who the recipients of the donated tissue are. **Senator Hill** asked for clarification to subsection (2), because it does not seem to protect the anonymity of the recipient. **Mr. Ripley** stated that subsection (3) protects the anonymity of the recipient. **Senator Hill** remarked that subsection (3) only protects the anonymity from the mother and no one else.

**Senator Buckner-Webb** asked for clarification regarding the surrogate. **Mr. Ripley** responded that the mother is a surrogate in the sense that she is making decisions for the baby because the baby cannot make a decision for itself. **Senator Buckner-Webb** stated that the term surrogate does not make sense because the mother of the child is part of the process from the beginning.

**Vice Chairman Lodge** asked if this version has been checked by the AG for constitutionality. **Mr. Ripley** answered that the language changes in this bill are the result of an AG's opinion. The memo received from the AG's office was a substantial document that addressed potential questions. The legislation was reviewed line by line in order to adhere to the AG's opinion. **Vice Chairman Lodge** indicated that she preferred that this version of the legislation be checked out by the AG's office to preempt any potential lawsuits based on constitutionality. She stated that she was in favor of the legislation if it is constitutionally correct.

**Senator Buckner-Webb** remarked that after the last version of the legislation was presented, she went to the Bureau of Vital Statistics for information on burial records in which stillbirth was defined as one where the fetus was 20 weeks along or 350 grams in weight. She asked if any language in the bill distinguished stillbirth from other types of death for infants. **Mr. Ripley** answered that the new language in the bill comes directly from the Idaho Department of Health and Welfare. This creates a new certificate. Current code calls for a certificate of stillbirth and sets forth specific requirements for gestational age. This bill creates a certificate of miscarriage. Miscarriage would be defined as death of a fetus after the first trimester through the 20-week period of time. **Senator Buckner-Webb** asked if stillbirth was referenced in the bill, but not specifically stated. She asked if she would have to go to another section of Idaho Code to access the stillbirth portion of the law. **Mr. Ripley** responded that Idaho Code § 39-9305 addresses her concern.

## MOTION

**Senator Lakey** moved to send **RS 24713** to print. **Senator Winder** seconded the motion with the caveat that the issue regarding the Attorney General's letter would be addressed before the bill was heard. **Chairman McKenzie** said a follow-up would be made. The motion carried by **voice vote**. **Senators Stennett** and **Buckner-Webb** were recorded as voting nay.

## H 516

RELATING TO ABORTION to provide the use of ultrasound.

**Senator Nuxoll**, District 7, spoke about the United States Supreme Court decision in *Gonzales v. Carhart* and read statements from the justices. In part, the statement indicated that because of the grave nature of abortion, the "State has an interest in ensuring so grave a choice is well informed." This bill seeks to provide women with additional information before an abortion in order to prevent the additional grief and sorrow mentioned in the previous statement. In order to make the most informed decision regarding abortion, a woman should have access to all relevant facts about the unborn child and its condition. This legislation requires that 24 hours prior to an abortion being performed, a woman is to be informed that free ultrasound imaging and heart tone monitoring are available. This bill requires the Idaho Department of Health and Welfare (IDHW) to provide a list of free ultrasound-providing clinics. The fee for an abortion will be withheld until this information is given.

**Senator Nuxoll** pointed out that 24 states already have similar laws. She noted that a 2008 Focus on the Family study found that women are more likely to keep their baby if they have an ultrasound.

**Senator Stennett** asked if the IDHW was consulted about this bill. **Senator Nuxoll** answered that she was not aware whether or not IDHW was consulted. **Senator Stennett** noted that the bill fails to identify any medical qualifications for the facilities and personnel that will be providing the free ultrasound. She asked how the IDHW will ensure safe medical practices at these facilities if it is not in the bill. She asked if there has to be a physician in residence at these facilities. **Senator Nuxoll** replied that there are three national pregnancy groups that manage the pregnancy centers. Licensed physicians and licensed medical personnel are required at these facilities. Idaho does not specifically require licensing.

**Senator Stennett** noted that the requirement to have a physician in residence and having a physician at the actual procedure are two different things. She asked if there will be licensed medical staff or a licensed physician on hand to perform the ultrasound. **Senator Nuxoll** replied that the staff present to do the ultrasounds are trained. **Senator Stennett** asked if the licensed physicians are actually doing the procedure. **Senator Nuxoll** answered that the licensed physicians are doing the procedures.

**Senator Buckner-Webb** asked what type of ultrasounds are performed at these clinics. **Senator Nuxoll** asked for clarification. **Senator Buckner-Webb** noted that there are different techniques for ultrasounds and she asked what kind of ultrasound is mandated by this legislation. **Senator Nuxoll** responded that this bill does not mandate any type of ultrasound. The ultrasound that would be administered would be the one that is appropriate based on the baby's development. She stated that she understood that from six weeks gestation and older, an abdominal ultrasound can be used. If it is less time than six weeks, a transvaginal ultrasound would be used.

## TESTIMONY:

**Kerry Uhlenkott**, Legislative Coordinator, Right to Life of Idaho, spoke in favor of this bill. She stated that if a woman is to have any real choice in regards to abortion, then she needs to have all the facts about the unborn child, as well as the medical facts about her own condition. She noted that there are seven pregnancy centers across the State of Idaho. She remarked

that a large majority of mothers who see their unborn child in an ultrasound ultimately choose life for the child. She reiterated that the pregnancy care centers in Idaho are affiliated with at least one of the national pregnancy centers. Each center must function under the care of a licensed physician and trained personnel. She explained that of the 24 states that have ultrasound laws, 11 of them require a woman to be given information about free ultrasounds.

**Senator Stennett** cited a *2014 Obstetrics and Gynecology Journal* article that showed that 98.4 percent of women who viewed an ultrasound still chose termination of the unborn child. She asked who in the facilities is interpreting the ultrasound exam. **Ms. Uhlenkott** answered that the ultrasound has to be read by a licensed physician. **Senator Stennett** asked what qualifications or training is required for a sonographer. **Ms. Uhlenkott** replied that there were sonographers in the audience who will be testifying and that they will be able to answer that question.

**Senator Buckner-Webb** indicated her concern about the professional dialogue that occurs after an ultrasound is performed and if a woman might be pressured one way or another; is there a standard of care regarding this dialogue? **Ms. Ulenkott** responded that every woman is given printed material outlining every option after the ultrasound is performed. **Senator Buckner-Webb** indicated that she would like to see that material.

**Senator Lakey** asked if there were other care centers that may not utilize trained personnel. **Ms. Ulenkott** replied that there are other pregnancy care centers but they refer to the centers that have ultrasound services.

**Jacqueline Emathingier** spoke in opposition to the bill. She gave her story about an unwanted pregnancy. She indicated that she went to Planned Parenthood and that the clinician helped her. She remarked that three items were suggested as amendments to the bill when it was in committee in the House. Those suggestions were rejected. She stated that the government should trust a woman's ability to protect herself. **Senator Stennett** thanked Ms. Emathingier for sharing her story.

**Melissa Hemphill**, from the "Silent No More Awareness Campaign," testified in support of the bill. She reported on the statistics for this group in regards to their advocacy efforts. This bill allows a woman to make an informed decision. **Ms. Hemphill** related her story about her abortion at Planned Parenthood. She stated that knowledge is power. **Senator Stennett** and **Chairman McKenzie** thanked Ms. Hemphill for sharing her story.

**Hanna Brass-Greer**, Legislative Director, Planned Parenthood in Idaho, testified in opposition to the bill. She remarked that all women deserve access to accurate information, but this bill does not provide that. This bill will place an additional barrier to a woman in her efforts to obtain an abortion. Rather, this bill seeks to push women to clinics that would dissuade them from having an abortion. Nothing in this bill requires accurate information. **Ms. Brass-Greer** explained that this bill does not require the providers of the free ultrasound to have any licensed or trained personnel. Referring women to these types of facilities will delay their access to adequate medical care.

**Senator Stennett** asked which type of ultrasound is typically used. **Ms. Brass-Greer** responded that she is an attorney and not a physician. She indicated that her understanding is that the type of ultrasound depends on the individual woman and her pregnancy. **Senator Stennett** asked if the IDHW has been part of the conversation with this legislation. **Chairman McKenzie** asked if the IDHW would defer to the question.

**Dieuwke Dizney-Spencer**, Deputy Administrator, Division of Public Health at IDHW, explained that the IDHW was not involved in the writing of this legislation. The function of the IDHW in this legislation is not exactly clear.

**Senator Stennett** noted her concern that the IDHW is not clear on their role related to this legislation. She asked Deputy Administrator Dizney-Spencer if he understood what the IDHW would be responsible for.

**Ms. Dizney-Spencer** replied that it appears that the IDHW is required to compile a list of clinics that provide free ultrasounds. She noted that this legislation ties into Idaho Code § 39-77 regarding clinics. The IDHW would need to develop a means of verifying the medical certification of these clinics.

**Senator Stennett** remarked that the bill does not specify certification of facility or personnel. She asked how IDHW would be able to ensure that safe medical practices are occurring in these facilities.

**Ms. Dizney-Spencer** answered that the IDHW would need to come up with a means to verify and certify these clinics annually in order to add the care centers to the list of free clinics. **Senator Stennett** asked if this would require the IDHW to add personnel and resources to check the care center facilities. **Ms. Dizney-Spencer** responded that she was not sure if the IDHW would have to physically inspect the clinics or if there would be another means to certify the personnel.

**Vice Chairman Lodge** asked what the cost would be to print the booklets mentioned in the fiscal note. **Ms. Dizney-Spencer** answered that the requirement in the bill would probably not be printed in the books. Instead, the IDHW may send out an annual addendum and also provide that information on the IDHW's website.

**Senator Buckner-Webb** asked if the IDHW would receive a list of the clinics performing the free ultrasounds. **Ms. Dizney-Spencer** replied that the IDHW does not currently get a list of clinics providing free ultrasounds, but the IDHW does have a list of free primary care clinics within the State; one or two of the clinics currently on the list provides free ultrasounds. **Senator Buckner-Webb** asked if the IDHW would need specific information from the clinics in regards to the protocol they would follow in speaking with a woman after an ultrasound is performed. **Ms. Dizney-Spencer** answered that the IDHW would need specific information from the clinics on the medical procedures performed, the certifications of those performing the ultrasounds and also the specific medical oversights in the clinics. **Senator Buckner-Webb** asked if the IDHW would have to know whether or not it was an actual physician reading ultrasound results. **Ms. Dizney-Spencer** replied that the IDHW would try to be thorough and as accurate when listing the free clinics.

**Senator Lakey** asked Ms. Brass-Greer if she was familiar with the seven care centers in Idaho that provide free ultrasounds. **Ms. Brass-Greer** answered that she does not have that list. **Senator Lakey** asked if she was personally aware of the clinics which provide free ultrasounds. **Ms. Brass-Greer** replied that she was not aware of those clinics. **Senator Lakey** asked if she was aware of any care centers in Idaho that provide free ultrasounds but do not utilize trained personnel. **Ms. Brass-Greer** responded that she was only aware of the qualifications of her health center.

**Dory Sandstrom**, Executive Director, Stanton Healthcare in Magic Valley, testified in favor of the bill. She spoke about the standard of care for her facility and the services they provide. Dr. Mark Aston is the medical director of the clinic. Dr. Robert Anderson, a radiologist, reviews each ultrasound scan. All of the sonographers are registered nurses that have received

additional sonography training. She indicated that the clinic performed over 180 pregnancy tests in 2015; all but 20 of those tests came back positive. The clinic provides free ultrasound confirmation exams to any client, regardless of income or pregnancy intentions. She noted that the clinic provides different support groups and education classes to women regardless of any decision made concerning the pregnancy.

**Senator Stennett** asked what the limits are on the ultrasounds offered by Stanton Healthcare. **Ms. Sandstrom** answered that an ultrasound serves three purposes: 1.) it addresses whether there is a fetus in the uterus; 2.) it confirms there is a heartbeat; and, 3.) it verifies how far along the pregnancy is. The radiologist confirms the results of the ultrasound. **Senator Stennett** asked what test displays the heartbeat. **Ms. Sandstrom** replied that this happens when the ultrasound is flipped into the "E mode." She was not sure of the more technical aspects, but she noted that her clinic provides both transvaginal and abdominal ultrasounds. **Senator Stennett** asked if the nurses and Ms. Sandstrom's facility are trained for sonography and, if so, is that training equivalent to a national standard. **Ms. Sandstrom** replied that in the State of Idaho there is no certification for sonography; a person is determined to be competent by the medical director. **Senator Stennett** asked if the medical director is held to different standards than the nurse. She asked if the medical director would be qualified under the national standards. **Ms. Sandstrom** answered that she would assume he is.

**Senator Hill** asked how Stanton Healthcare is funded. **Ms. Sandstrom** replied that all services are free to the clients. The clinic does not receive any government funds, State funds, or insurance funds. It is completely funded through contributions or private grants.

**Senator Buckner-Webb** asked if Director Standstrom would be opposed to an amendment of this bill that required clinics to provide "medically accurate information and to let patients know that a physician is available to interpret an ultrasound." **Ms. Sandstrom** responded that it might not be necessary to add this language, because Stanton Healthcare and other clinics already operate under this standard. **Senator Buckner-Webb** asked for clarification about Ms. Sandstrom's potential opposition. **Ms. Sandstrom** indicated that she would not be opposed.

**Lauren Gusinow** testified in opposition to the bill. She noted that she is a diagnostic medical sonographer. While this bill appears to simply provide a list of clinics that will offer ultrasounds at no cost, there are medical implications for the requirement to hear a fetus' heartbeat. The American Institute of Ultrasound in Medicine (AIUM) guidelines state "fetal ultrasounds should be performed only when there is a valid medical reason and the lowest possible ultrasonic exposure settings should be used to gain necessary diagnostic information under the As Low As Reasonably Achievable (ALARA) principle." The AIUM further suggests that the fetal heart rate should be detected by "M mode" imaging. She noted that the key distinction is that a heartbeat can be viewed but not heard. She noted that listening to the heartbeat requires a method called "spectral doppler." This is not standard practice in the first trimester due to safety concerns. **Ms. Gusinow** indicated that 90 percent of abortions occur within the first trimester. Listening to the heartbeat of a fetus could be dangerous.

**Senator Stennett** asked for clarification regarding the danger of trying to hear the heartbeat of a fetus. **Ms. Gusinow** replied that there are two methods for evaluating the heart. First, a two-dimensional image allows the patient to see the flicker of the heart valves moving. Second, spectral

doppler allows the patient to hear the heartbeat, but could potentially damage the tissues of the fetus. **Senator Stennett** ask if Ms. Gusinow interprets this bill as saying that there is nothing to prevent someone from using the level of a spectral doppler for an ultrasound, which would result in damage to fetal tissue. **Ms. Gusinow** answered that there are no prohibitions in the bill.

**Senator Hill** asked if there are currently prohibitions to protect the fetus that would prohibit the use of the spectral doppler in the early stages of pregnancy. **Ms. Gusinow** replied that there are no prohibitions. The AIUM guidelines were developed by a wide spectrum of physicians and medical associations. There are no sanctions if this tool is used. The rationale for the guidelines is to discourage the use in the first trimester based on the potential damage it may cause.

**Nicki Kroese**, Public Relations Director, Stanton Healthcare in Magic Valley, spoke in favor of the bill. She indicated that it seems reasonable that medical providers are required to provide a booklet to a woman seeking an abortion in order to give her more information about the procedure. She noted that the optional and free nature of the ultrasound means that no additional burden is placed on the woman. **Senator Stennett** asked about the qualifications required to be a sonographer and who at Stanton Healthcare interprets the ultrasound exam. **Ms. Kroese** responded that Dr. Aston is the final reviewer of ultrasounds performed at Stanton Healthcare. She does not know the requirements for being a sonographer other than what has already been stated.

**Senator Hill** asked if the required booklet concerning abortions that is already distributed mentions anything regarding the risk to a fetus using the spectral doppler. **Ms. Kroese** answered that it does not mention any harm to the fetus from an ultrasound, but it is very graphic in regards to the procedure of abortion. **Senator Hill** ask if the booklet mentioned any risks related to the abortion. **Ms. Kroese** replied that the booklet strictly pertains to abortion and not to any procedures that would lead up to the abortion.

**Kathy Griesmyer**, Public Policy Strategist, American Civil Liberties Union (ACLU) of Idaho, spoke in opposition to the bill. She remarked that it should be the same for physicians speaking to a woman regarding an abortion as it is when they tell her about the potential risks and complications of childbirth. This bill is an attempt to shame women for a decision they have already made. She stated that there is nothing in the bill that gives women the assurance that they will receive medically accurate information.

**Vice Chairman Lodge** asked Ms. Griesmyer if she knows anything about the spectral doppler and its ability to potentially cause damage to fetal tissue. **Ms. Griesmyer** answered that she was not aware of that.

**Senator Lakey** asked if Ms. Griesmyer is familiar with any of the seven clinics that provide free ultrasounds. **Ms. Griesmyer** replied that she is not familiar with them.

**Candy Cardillo**, represented herself as an employee at Rachel's Vineyard and spoke in favor of the bill. She explained that her organization helps men and women who have been devastated by abortion. She commented that the people who come to her organization for help are grief stricken, depressed, angry, bitter, and present other physical and emotional problems after an abortion. She stated that these individuals state most often "if only someone had told me."

**Annica Graf** testified in opposition to the bill. She related her story about being 17 years old and pregnant. She went to a free clinic for help and was

encouraged not to get an abortion. She stated that she left more confused than when she went into the clinic. She stated that having an abortion was a life-changing event, but so is becoming a mother.

**Angie Dwyer**, Clinic Manager, Stanton Healthcare in Boise, spoke in support of the bill. She highlighted the services provided by the Boise clinic and provided some statistics about those services. She reiterated some of the talking points already mentioned in previous testimony. **Senator Buckner-Webb** asked about the process that occurs after the ultrasound. **Ms. Dwyer** explained that the staff at her clinic talk to the patients about a wide range of issues including adoption and abortion options. **Senator Buckner-Webb** said she understands that the procedure is free of charge, but what about the cost to the fetus. **Ms. Dwyer** responded that the ultrasound is done in M mode or motion mode. Doing an ultrasound in spectral doppler mode is very rare. This is not done in her clinic. You see the heart beating, you do not hear the heart beating.

**Senator Stennett** remarked that the bill states nothing about the requirements or the thresholds for an ultrasound.

**Teresa Hammer** spoke in opposition to the bill. She noted that some of the language is detrimental to the mother and the unborn child. She stated that she believes if the bill passes as is, the State would be open to litigation.

**Nancy Teune**, a diagnostic medical sonographer at Stanton Healthcare, spoke in favor of this bill. She talked about the fact that any certification for an ultrasound technician or a registered nurse with a sonographer certification means that it is a given fact that these ultrasounds for the first trimester are being done in M mode. She told the story of one of her patients. **Senator Stennett** remarked that this bill says something different than what Ms. Teune indicated was standard practice. She asked what the process is for a woman who enters her clinic; process is not clear in this bill. **Ms. Teune** spoke about the process for a limited ultrasound. **Senator Stennett** reiterated her concern for fetal tissue damage due to spectral doppler usage when the bill does not specifically prohibit the use of spectral doppler.

**Senator Buckner-Webb** asked if the guidelines for best practices and the bill are consistent with one another. **Ms. Teune** noted that the guidelines and the certification for sonographers are clear. **Senator Buckner-Webb** asked Ms. Teune about some specific amendment language. **Ms. Teune** replied that it is up to the Committee to decide how much of the language is appropriate for the bill.

**Brenda Saltzer**, Chief Executive Officer, Palouse Medical Clinic, spoke in support of the bill. She noted that only three states, Oregon, New Mexico and North Dakota, require licensing for sonographers. She said that pregnancy centers in Idaho affiliate with one of three national organizations that have very stringent requirements for medical care, ultrasound care and sonography.

**Julie Lynde**, Executive Director, Cornerstone Family Council, testified in support of this bill. She explained the process for a woman who comes into a pregnancy care center and that these centers are completely funded by private donations. She reviewed the statistics for a program that the Cornerstone Family Council has been a part of: the Operation Ultrasound Program founded in 2004 by Focus on the Family. She reviewed how clinics receive ultrasound machines and grants or training from this program. Focus on the Family is dedicated to health, help and hope. **Ms. Lynde** indicated that this bill is about what is best for the pregnant mother.



**Senator Buckner-Webb** asked if Director Lynde indicated that Planned Parenthood provides free health care. **Ms. Lynde** replied that she did not say that.

**Senator Buckner-Webb** asked if Planned Parenthood provides free health care. **Ms. Brass-Greer** indicated that Planned Parenthood does not turn anyone away. She indicated that Planned Parenthood is a nonprofit organization by definition.

**David Ripley**, Executive Director, Idaho Chooses Life, spoke in support of the bill.

**Senator Nuxoll** closed the testimony. She reiterated that this bill does not require an ultrasound, but requires a woman be given information regarding the availability of free ultrasounds. This bill entrusts women to make their own choice after receiving all the information.

**MOTION:**

**Senator Hill** moved to send **H 516** to the floor with a **do pass** recommendation. **Senator Lakey** seconded the motion.

**Chairman McKenzie** asked if there was any further discussion.

**SUBSTITUTE MOTION:**

**Senator Buckner-Webb** made a substitute motion to send **H 516** to the 14th Order for possible amendment to add language about medically accurate information and licensed provider availability to interpret the ultrasound, and to remove the five references to hearing the heartbeat. **Senator Stennett** seconded the motion.

**Chairman McKenzie** asked for discussion on the substitute motion.

**Senator Stennett** understood the intended direction of this discussion and that information is good. She also understood that the testimony of those in support of the bill thought that the personnel qualifications were intact. But that is not what this bill says. The Legislature has to put things in statute using words that matter; that is important because the language is the guide. The substitute motion is important because if the bill says "hear a heart monitor" and that monitor can do fetal damage, that is a problem. If the bill doesn't require medical staff or qualified personnel in the building, that's a problem. It is also a problem to place the IDHW in a position where they have no guidance. The substitute motion is appropriate.

**VOTE ON SUBSTITUTE MOTION:**

**Chairman McKenzie** requested a roll call vote on the substitute motion: **Senators Stennett** and **Buckner-Webb** voted aye. **Senators McKenzie, Lodge, Hill, Siddoway** and **Lakey** voted nay. The substitute motion failed.

**Vice Chairman Lodge** requested that the sponsors revise the fiscal note to reflect the costs to the IDHW.

**Senator Lakey** agreed that the language could use some "tightening" but would prefer to approach that next year. There were some broad generalizations made about the clinics by those in opposition to this legislation. However, there was a lack of familiarity with the seven clinics in Idaho that provide these services. There were no examples of unqualified clinics or individuals operating in Idaho or the potential for that to happen. What the Committee heard from the IDHW was that they have a list and are familiar with compiling lists of clinics that offer free care; this is a more focused list of those clinics that offer free ultrasounds. They could establish a process and some criteria to assemble the ultrasound list. There is no mandate or referral requirement in this bill; it is simply about information.

**VOTE ON ORIGINAL MOTION:**

The original motion carried by a **roll call vote**: **Senators McKenzie, Lodge, Hill, Siddoway** and **Lakey** voted aye. **Senators Stennett** and **Buckner-Webb** voted nay.

**RS 24714**

SENATE CONCURRENT RESOLUTION to reject certain Department of Administration rules.

**Chairman McKenzie** addressed **RS 24714**, a concurrent resolution resulting from the Committee's action to reject certain parts of the rules for the parking garage.

**MOTION:**

**Senator Siddoway** moved to send **RS 24714** to print. **Senator Buckner-Webb** seconded the motion. The motion carried by **voice vote**.

**ADJOURNED:**

There being no further business, **Chairman McKenzie** adjourned the meeting at 10:13 a.m.

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Senator McKenzie  
Chair

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Twyla Melton, Secretary

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Assisted by Michael Jeppson