Dear Chair Kennedy, Vice-Chair Lewis, and Members of the Committee:

My name is Katie Glenn, and I serve as Government Affairs Counsel of Americans United for Life (AUL). Established in 1971, AUL is a national law and policy organization with a specialization in abortion, end-of-life issues, and bioethics law. Our vision at AUL is a nation where everyone is welcomed in life and protected in law. In my practice, I specialize in life-related legislation and constitutional law. I appreciate the opportunity to submit testimony in support of HB 1068, which would establish a physician-patient relationship between the born-alive child and the physician who performed the abortion, and would require specific actions be taken to preserve the life of a born-alive infant.

In 2002, the federal Born-Alive Infant Protection Act (BAIPA) became law, clarifying that infants born alive at any stage of development are recognized as persons under federal law. While the federal BAIPA ensures that all infants born alive have equal legal standing regardless of how they are born, it does not ensure life-saving protection. Therefore, it is still necessary to require an affirmative action by a physician to ensure that an infant born alive after an abortion receives the same level of medical care as any other infant would, as well as remedies for violation of the law.

HB 1068 fills in the gaps from the federal BAIPA by expanding protections for born-alive infants. Specifically, the Act establishes a physician-patient relationship between the child who survives an abortion attempt and the physician who attempted the abortion. Not only does this ensure the infant receives the medical attention he or she requires, but it also acknowledges the humanity of the child by identifying him or her as a patient worthy of protection. The Act specifies the abortion provider "must exercise the same degree of professional skill, care, and diligence to preserve the life and health of child as a reasonably diligent and conscientious physician would render to any other child born alive at the same gestational age." The Act makes explicit that this means the physician ensures the infant is "immediately transferred to a hospital" thus guaranteeing he or she is given potentially life-saving medical attention and care. HB 1068 safeguards these commonsense steps will be taken by creating civil and criminal penalties for physicians who fail to follow this requirement, and mandates reporting of any failures to the Attorney General.

HB 1068 is also necessary because the federal BAIPA has limited application. It only extends to hospitals operated by the federal government or which receive federal funding and the hospital's employees. It would not require private or state-operated clinics and hospitals to provide care or medical attention to born-alive infants. This reality must be remedied, because the "right" to an abortion does not include the right to kill a live born child, or justify the denial of basic protections for born, living human infants. Recognizing this, at least 34 states have passed some form of BAIPA.[1] HB 1068 would bring Colorado in

line with the majority of states that have seen the need for and created a higher level of protection for infants born alive.

In conclusion, Colorado should support HB 1068, thereby continuing to uphold its duty to protect the lives of all its citizens, no matter the circumstances in which they were born. Thank you.

Sincerely,

Katie Glenn, *J.D.*
Government Affairs Counsel
Americans United for Life

[1] These states include Alabama, Arizona, Arkansas, California, Delaware, Florida, Georgia, Indiana, Iowa, Kansas, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Virginia, Washington, Wisconsin, and Wyoming.