

OPPOSITION for HB2279

Chair Prozanski, Vice-Chair Thatcher, and committee members: My name is Ed Diehl, State Representative for House District 17, East Salem through the majestic Santiam Canyon. Thank you for the opportunity to speak in opposition to House Bill 2279.

Plain and simple I do not believe that medical providers who are in the business of saving lives should be the ones that are intentionally ending a life. It is concerning to me that of the 383 prescriptions for assisted suicide in 2022, half of them were written by a physician who had known the patient for less than 5 weeks. I fully expect this time frame to drop even lower once we open this up to people from outside Oregon. We should be caring about the sanctity of life. All life from the beginning of life and also to the end.

Predicting a person's remaining days is often inaccurate. And with out-of-state residents it seems that there is a much higher likelihood of an inaccurate prediction due to the much higher likelihood of incomplete medical information. In certain scenarios, physicians in Oregon are not likely to have personal knowledge of an out-of-state patient and could miss some history, such as mental illness, depression or diagnostic details of a terminal condition.

Also, it concerns me that the current law states the pharmacist "will dispense the medications to either the patient, the attending physician or an expressly identified agent of the patient". **I understand that to mean that the patient can take the medication and leave the state with it. Then what? We have lost control of a deadly medication.** What verification is there that the person took the medicine when he got back home? How do we know the medication wasn't given to someone else? It will be virtually impossible to track after they leave the state.

I believe that HB 2279 is dangerous and wrong, and I ask that you vote "no".

Thank you for your time.

EXTRA

This bill removes one of the safeguards that supporters of assisted suicide promised would be in place in order to earn the support of Oregon voters for the original assisted suicide bill. That you had to be a resident of this state. Because it meant that you were going through the healthcare system of this state at the time you sought to avail yourself of the Death with Dignity Act.

This lawsuit was not concluded with a judicial ruling, it was concluded with a settlement by the state. The settlement said that the state would ask the legislature to modify Oregon's Death with Dignity Act. We do not have to approve that settlement. Our DOJ can go back to court and defend our laws.

Ed's Notes

Why oppose this Bill? ● Oregon will become a haven for nonresidents seeking assisted-suicide. ● It removes one of the safeguards that supporters of assisted suicide promised would be in place in order to earn the support of Oregon voters. ● Physicians in Oregon are not likely to have personal knowledge of an out-of-state patient and could miss some history, such as mental illness, depression or diagnostic details of a terminal condition. Although protections for mentally ill patients are weak under current law, the law prevents assisted suicide from being prescribed to patients who suffer from psychiatric disorders or depression that impair judgment. ● More vulnerable persons will be at risk for and victims of physician assisted suicide, including persons subjected to economic and psychological pressures from family, medical-care providers and society