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HOUSE HUMAN SERVICES COMMITTEE FEBRUARY 5, 2025

TESTIMONY OF NORTH DAKOTA BOARD OF MEDICINE HOUSE BILL NO. 1511

Chair Ruby, members of the Committee, I'm Sandra DePountis, Executive Director of the North Dakota Board of Medicine, appearing on behalf of the Board to provide opposition testimony on House Bill 1511 as written.

The Board of Medicine is neutral on the topic of abortion and does not express an opinion regarding our state's laws or policies on this topic. The Board's concerns are in the logistics and implementation of the Bill.

The Board of Medicine understands and respects the intent behind this bill. These laws vary widely from state to state. It would therefore be helpful to provide education so that practitioners know the laws they are subject to while practicing in North Dakota.

The question then becomes – what is the best way to provide this education and who is in the best position to provide it?

Upon thoughtful reflection - the Board wishes to share the following perspectives.

The bill requires the Board to develop an instructional course on an unsettled area of the law. One of the chapters requiring instruction - N.D.C.C. chap. 12.1-19.1 - has been declared unconstitutional and is under appeal before the North Dakota Supreme Court. It is unclear when the appeal will be resolved. Even upon the issuance of the Court's opinion, additional appeals or challenges may be made to this or other laws. In addition, new bills have been submitted this session on another identified chapter – 14-02.1 – with unknown passage, effect, and interpretation. The bill's emergency clause makes the potential changes to chapters 12.1-

19.1 and 14-02.1 extra concerning.

Mission Statement

The Board's mission is to protect the public's health, safety and welfare by regulating the practice of medicine, thereby ensuring quality health care for the citizens of this state.

Until these laws become settled, the Board would caution the use of resources to create an instructional course interpreting laws that may be rendered outdated or challenged at any time. Having the Board issue a legal interpretation on unsettled law opens the Board up to liability and lawsuits. Finally, the bill does not account for the effect such changes would have on the instructional course. If the course is rendered outdated by new law or legal interpretation, what happens? Will continued funding be provided to update or redevelop the course? What happens in the interim? The bill requires obstetric practitioners to take the course as part of licensure and renewal – if the course is not available because it is being updated, would such physicians be prevented from being licensed or renewing their license?

There is also concern with the Board being the enforcer of verifying practitioner's completion of the instruction course through licensure or renewal. Legislators consistently mandate licensing boards in North Dakota to remove barriers and implement efficient licensure and renewal processes – this bill would add an additional requirement before licensure or renewal can be approved. In fulfilling this Legislative mandate, the Board supports having education and resources available but not as a requirement for licensure and renewal.

The final concern is whether the Board of Medicine is the appropriate entity to create an instructional course on North Dakota law. Licensing and regulatory boards in North Dakota do not have the authority to provide legal advice, opinions, or guidance. Requiring the Board to provide legal advice again exposes the Board to potential liability and lawsuits.

The Board therefore requests the following amendments to the bill:

- A different, more appropriate entity to develop the instructional course, in consultation with the Attorney General Office.
- Remove the Board of Medicine from the requirements for verification/enforcement of the training and instead have the instructional course available to all practitioners on the Board's website.

Thank you for your time and attention and I would be happy to answer any questions.