

2025 HOUSE HUMAN SERVICES

HB 1595

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

HB 1595
2/5/2025

Relating to pregnancy resource centers that receive state funding.
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11:20 a.m. Chairman M. Ruby opened the hearing.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Kiefert, Rios, Rohr

Members Absent: Representative Holle

Discussion Topics:

- Pregnancy assistance
- Pregnancy funding

11:21 a.m. Representative Conmy, District 11, introduced the bill and submitted testimony.

11:27 a.m. Dr. Ana Tobiasz, ND Section Chair of the American College of Obstetricians and Gynecologists, testified in favor and submitted testimony, #34985.

11:36 a.m. Angela Reinhart, Maternal Health Specialist of the Health and Human Services Department, testified and answered questions.

Additional written testimony:

Kara Geiger, private citizen, submitted testimony in favor, #33285.

Erica Hofland, private citizen, submitted testimony in favor, #33352.

Erin Naylor, private citizen, submitted testimony in favor, #34581.

Hanna Magnuson, private citizen, submitted testimony in favor, #34688.

Bridget Turbide, Executive Director of North Dakota Right to Life, submitted testimony in opposition, #34897.

Mark Jorritsma, Executive Director of the North Dakota Family Alliance Legislative Action, submitted testimony in opposition, #34935.

Terri Hedman, private citizen, submitted testimony in favor, #34936.

Olivia Data, private citizen, submitted testimony in favor, #35008.

Connie Hoffman, private citizen, submitted testimony in favor, #35102.

Brittany Rodin, private citizen, submitted testimony in opposition, #35258.

11:40 a.m. Chairman M. Ruby closed the hearing.

Jackson Toman, Committee Clerk

Testimony in Support of House Bill 1595**1/31/2025**

Dear Chairperson and Members of the House Human Services Committee,

I am writing to express my strong support of House Bill 1595, because every woman facing an unplanned pregnancy deserves truth, dignity, and real medical care—not deception and misinformation.

Pregnancy is one of the most vulnerable moments in a person's life. Imagine a young woman—perhaps a teenager, perhaps a mother already struggling to provide for the children she has—walking into a pregnancy resource center, trusting that the people there will give her honest, professional guidance. Instead, she is met with false medical claims, pressure, and deliberate withholding of information. She may be led to believe she has more time to make a decision than she actually does. She may be told outright falsehoods about abortion, adoption, or even the risks of childbirth. She may be shamed for even asking about her full range of options.

This is not health care. This is not help. And yet, these centers—many of which receive our taxpayer dollars—continue to operate in the shadows, unchecked, unregulated, and unaccountable.

House Bill 1595 ensures that pregnancy resource centers receiving public funding are held to the same basic standards we expect from any legitimate medical provider. It does not shut down these centers. It does not force them to provide services they disagree with. It simply asks them to be honest, professional, and medically responsible.

- If a center claims to offer medical services, a licensed medical professional should be present.
- If ultrasounds are performed, they should be conducted and explained by trained professionals, not unlicensed volunteers.
- If counseling is offered, it should be based on medical facts—not ideology.

This bill is not about politics. It is about protecting women from harm.

I urge this committee to put patients before politics. Women in North Dakota deserve to walk into a pregnancy resource center knowing that they will be met with truth, respect, and real medical care. We owe them transparency, honesty, and safety.

House Bill 1595 ensures just that. I respectfully urge a Do Pass recommendation.

Thank you.

Kara L. Geiger
Mandan, ND

HB 1595
Human Services Committee
69th Legislative Assembly

Honorable Members of the Human Services Committee, my name is Dr. Erica Hofland. I am a practicing Obstetrician Gynecologist in Dickinson and I am writing asking for your support for HB 1595.

House Bill 1595 helps ensure the state of North Dakota supports health care delivery in a way that is medically accurate and comprehensive. When a pregnant individual seeks out medical care they may not be aware that they could be given different or less information depending upon where they present for care. This unfortunately is the case in many pregnancy resource clinics. Websites, reception areas, and providers themselves associated with pregnancy resource clinics will not advertise what information they withhold. Patients have a right to full, comprehensive medical information about their health and options to manage their health conditions including pregnancy. Patients should feel confident and trust they have access to this full spectrum of care on their first encounter. Financially supporting institutions that do not provide comprehensive care is unethical and also a poor utilization of limited health care dollars. Patients will need to seek out additional appointments and evaluations to manage their concerns, wasting not only their time but the funds that have been appropriated to these clinics. HB 1595 will hold clinics to the medical standard of care and also ensures the state is financially responsible with its resources.

I strongly urge this committee and the Legislature to support HB 1595.

Dr. Erica Hofland, FACOG
erica_hofland@hotmail.com
701-290-8240

04Feb2025


To whom it may concern

I am opposed to HB 1373. This Bill will risk the lives of pregnant woman, women who are miscarrying, and woman who experience illness or other medical events during pregnancy. This Bill will also lead to murder charges and imprisonment of woman who experience the above. Doctors providing pregnancy and miscarriage care will be similarly affected, causing an exodus of OB/GYN providers as has been seen in states enacting similar bills, like Idaho.

Giving and receiving appropriate healthcare should not be determined by the state legislature.

I am in support of HB 1595. Currently crisis pregnancy centers are unregulated and provide purposefully misleading and medically inaccurate information. They pose as medical centers and medical providers, defrauding women seeking care into believing they are speaking with medical providers and into believing that they are receiving sound medical advice. There are no regulations requiring them to provide medically sound information and this is a step in the right direction.

Kind regards
Erin Leigh Naylor
1813 25 ½ Ave S
Fargo, ND 58103

Signed by:
Erin Naylor
 Signer Name: Erin Naylor
Signing Reason: I approve this document as author
Signing Time: 04-Feb-2025 | 17:59:34 GMT
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House Human Services Committee
HB 1595
February 5, 2025

Chair Ruby and members of the Committee,

My name is Hanna Magnuson, and I am a social work student, taxpayer, and future member of the workforce. I am here today to express my strong support for HB 1595, which establishes necessary guidelines for state funding allocated to "alternatives to abortion" programs.

Throughout my four years of rigorous study in social work, I have learned the importance of professional ethics, evidence-based practice, and the critical role of licensed professionals in providing support services. It is deeply concerning that our state allows public funds to go toward organizations that provide counseling and other services without requiring proper licensure, education, or oversight. Counseling is a profession that requires extensive training in mental health, trauma-informed care, and ethical decision-making—skills that cannot be replaced by well-intentioned but unqualified individuals.

Pregnant people deserve compassionate, ethical, and medically accurate care from trained professionals who are held to established standards of practice. Without these safeguards, individuals seeking support may receive misleading, harmful, or biased information, which can have life-altering consequences. State funding must be directed toward services that meet professional and ethical standards, ensuring that all individuals receive high-quality, evidence-based care.

As a future social worker, I fully support HB 1595 and urge this committee to ensure that taxpayer dollars are used responsibly—to support services provided by licensed professionals who are qualified to offer real, ethical, and effective care. Thank you for your time and consideration.

Hanna Magnuson

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704 3rd Ave NE, Hillsboro, ND 58045

Bridget Turbide
Executive Director
North Dakota Right to Life
director@ndrl.org
701-955-8239



Good day, House Human Services Committee Members,

I am here today to testify in opposition to HB 1595, a bill that seeks to impose unnecessary and burdensome regulations on pregnancy resource centers in our state.

The work that these centers do is invaluable to our local communities. Many women facing unexpected pregnancies rely on these resources for critical support, helping them care for their children from conception through the early years of life. These centers offer free pregnancy tests, parenting classes, material assistance, and counseling. In some cases, they have even raised funds to provide new mothers with transportation, such as a working vehicle, so they can care for their child and their family.

A crucial distinction to recognize is that pregnancy resource centers do not claim to be healthcare facilities. They do not provide medical treatment, nor do they advertise themselves as medical centers. Rather, they exist to offer emotional, practical, and material support to women in need. The argument that these centers should be required to provide information about abortion is both misguided and irrelevant, given that North Dakota's law—though currently in litigation—prohibits abortion. Why should we force organizations to promote a procedure that is illegal under state law?

Furthermore, pregnancy centers are a vital asset to North Dakota families. In Burleigh County alone, **one in every six children** starts their life with support from the local pregnancy center. These organizations step in where government assistance often falls short, ensuring that women have access to the care and resources they need. Placing additional regulations on them would only hinder their ability to serve those in crisis.

Instead of overburdening these centers with unnecessary red tape, we should be supporting their efforts to uplift women and families in our communities. I urge this committee to recognize the essential role pregnancy resource centers play and to vote **Do Not Pass** on HB 1595.

Thank you for your time and consideration.

Bridget Turbide



Testimony Opposing House Bill 1595

Mark Jorritsma, Executive Director
North Dakota Family Alliance Legislative Action
February 5, 2025

Dear Chairman Ruby and honorable members of the House Human Services Committee,

My name is Mark Jorritsma and I am the Executive Director of North Dakota Family Alliance Legislative Action. I am testifying on behalf of our organization in opposition to House Bill 1595 and respectfully request that you render a "DO NOT PASS" on this bill.

Pregnant mothers and families often need help for a variety of reasons, from low incomes and lack of childcare training, to the emotional trauma inflicted by those around them who don't support their pregnancy. We as a state must stand ready to help with these needs. In this state, we try to provide that help – with a significant share of it coming through the funding of pregnancy resource centers (PRCs).

PRCs that accept funding from the state must be responsible and accountable in their use of the money, as any agency or entity receiving government funding must be. However, a balance must always be struck between accountability and unreasonable scrutiny. The state must also ensure that unduly burdensome funding requirements do not undermine the very ability of an entity to provide the services requested by the state.

Looking at HB 1595, it contains requests for duplicative information, requires information that is not relevant to any funding it might receive from the state, asks the PRC to violate its core purpose, and more. For example, it wants the PRC to use its resources to provide information that is already publicly available on its Form 990 tax exemption filings. Further, a PRC is not a health care facility and does not need staff with the qualifications on-site as outlined in Subdivision 1(1)(f), even though they often have the individuals offsite and available. Third, if the definition of "Comprehensive Counseling" in Subdivision 1(1)(b) is combined with the requirements in Subdivision 1(3)(e), the bill would require PRCs to give client referrals to abortion clinics, something which violates the very mission and integrity of a PRC.

Aside from these specific issues with the bill, PRC services are free, and therefore they cannot be part of the HIPAA program, as they do not deal with insurance. Regardless, PRCs do typically

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follow the guidelines. Finally, there is a great need for state funding in rural communities who desperately need access to state funds, but don't have the staffing/bandwidth to comply with everything in HB 1595.

These are but a few of the many problems with HB 1595. It is nothing more than an attempt to silence and restrict North Dakota citizens from helping pregnant mothers, their pre-born children, and fathers via the services provided by PRCs. For all these reasons, North Dakota Family Alliance Legislative Action requests that you render a "DO NOT PASS" on Senate Bill 1595.

Thank you for the opportunity to provide this testimony, and feel free to contact us if you have any questions.

Sincerely,

Mark Jorritsma
Executive Director
North Dakota Family Alliance Legislative Action

Terri Hedman, 5524 16 Street South, Fargo, ND 58104

Support HB 1595

Dear Committee and Chairperson:

Thank you for considering legislation to require clinics funded by the state to have proper licensure. Pregnancy "Care Clinics" offer health screenings such as ultrasounds and pregnancy testing by personnel that are not licensed. Proper infection control standards are not assured. Ultrasounds are performed and evaluated by people without expected expertise and can lead to misdiagnosis. Additionally, this can lead to delays in proper care and confuse women in crisis situations. Counseling is offered by people without proper credentials. As a registered nurse, I have concerns about people posing as medical professionals.

Please support HB1595.

Terri Hedman

5524 16 Street South

Fargo, ND 58104

HB 1595
House Human Services Committee
February 5, 2025

Chair Ruby and members of the House Human Services Committee

My name is Dr Ana Tobiasz. I am an obstetrician/gynecologist and maternal fetal medicine physician practicing in the state since 2017. My specialty is in caring for high risk pregnancies. I strongly urge a DO PASS on HB 1595.

I have personally cared for many pregnant women who were given incorrect medical information from pregnancy resource centers in this state. This commonly includes incorrect ultrasound information. These centers offer free ultrasounds and provide the patient with a due date and gestational age. Unfortunately, the individuals performing these ultrasound exams are oftentimes volunteers with no formal training in performing obstetric ultrasound or are individuals who are inadequately trained and have no supervision. It is also well known that they oftentimes falsely inflate an individual's gestational age in order to dissuade them from having an abortion. There is no way for anyone outside of the facility to review their imaging for accuracy.

Patients who receive an incorrect gestational age and due date for their pregnancy are now subject to a multitude of concerns. Many of the decisions that are later made in the management of the pregnancy, center around having a correct gestational age and due date. This can result in poor outcomes if the due date is incorrect, such as incorrectly delaying delivery too long, which puts patients at risk for outcomes such as stillbirth and maternal complications such as preeclampsia. This can also lead to unnecessary interventions if the due date is incorrect, such as a diagnosis of fetal growth restriction. This diagnosis then commits a patient to increased ultrasound surveillance to reduce the risk of stillbirth. Oftentimes this degree of testing is unnecessarily done because of incorrect pregnancy dating that was established at one of our local pregnancy resource centers. This testing is costly and time consuming for patients.

I have also seen our local pregnancy resource centers miss serious diagnoses such as an ectopic pregnancy. This is an emergent diagnosis that requires appropriate evaluation and treatment to prevent maternal blood loss and death. Delaying establishing prenatal care can result in other adverse effects, such as delaying adjusting medications that may be teratogenic (can cause birth defects).

When individuals seek care at a pregnancy resource center, they are unaware of the lack of training the individuals have who volunteer or work there. They trust that the information being provided to them is factual and accurate. This oftentimes will result in patients delaying seeking appropriate obstetric care from an accredited medical facility or practice.

If the state insists on utilizing taxpayer dollars to fund these centers, there should be minimum standards and oversight from appropriately trained individuals as there is for every other medical practice and facility that is providing medical care or diagnostic testing. Pregnant individuals in this state deserve to receive evidenced based, high quality information from health care professionals who are appropriately trained and practicing within their scope.

I urge a DO PASS on HB 1595.
Dr Ana Tobiasz, MD
American College of Obstetricians and Gynecologists, ND Section Chair
NDMA member
Maternal Fetal Medicine Physician

Olivia Data
Testimony in Support of HB 1595
February 5 2025

Greetings, Chairman Ruby and members of the committee.

I am a resident of North Dakota writing to you in strong support of HB 1595.

This bill ensures that centers which offer resources and medical services to pregnant people are safe, honest, and fit to provide that which they advertise. Seeking healthcare relating to reproduction and pregnancy can be a vulnerable experience, and patients deserve to know the care they are getting comes from a reliable source. Disinformation and dangerous practices must not be tolerated¹.

Please help protect the health and safety of women and pregnant people in North Dakota by supporting HB 1595.

Thank you for your time in reviewing my testimony.

Sincerely,
Olivia Data

¹The American College of Obstetricians and Gynecologists. 2022. "Issue Brief: Crisis Pregnancy Centers." [Www.acog.org](https://www.acog.org). October 2022.
<https://www.acog.org/advocacy/abortion-is-essential/trending-issues/issue-brief-crisis-pregnancy-centers>.

DO PASS - HB 1595

Dear Chairman Ruby and members of the Human Services Committee,

I write in support of HB 1595 relating to pregnancy resource centers.

To ensure the safety pregnant women seeking services of pregnancy resource centers, and ensure fiscal responsibility, it is important to require proper licensure and oversight of the individuals providing care, establish clear guidelines and have oversight of public funds provided to these centers.

Pregnant women deserve safe and high quality care from properly licensed and trained healthcare professionals who are held to established standards of practice. Without these safeguards, individuals seeking support may receive unsafe, misleading, harmful, or biased information. State funding must be directed toward services that meet professional and ethical standards.

I urge a DO PASS for HB 1595.

Connie Hoffman
3336 Jackson St S
Fargo, ND. 58104
District 10
2/4/2025

Chairman Ruby and members of the House Human Services Committee, I am writing in opposition of HB 1373, specifically the language written: “unborn child” means an individual living human child before birth from the beginning of biological development at the moment of fertilization upon the fusion of a human spermatozoon with a human ovum.

As a woman diagnosed with cancer at 22, I was told that having children in my future may not be a possibility unless medical intervention was an option. My husband and I began trying to have a child when I turned 30, and quickly discovered without the help of any type of reproductive medicine, it wouldn't be possible.

After 9 rounds of Intra Uterine Insemination (IUI), two rounds of In Vitro Fertilization (IVF), about 40 eggs and a tremendous amount of money and tears, we were able to have our son.

None of this was taken lightly. The children we lost while attempting to have one was detrimental to our mental health, our physical health and extremely straining on our marriage. We would do it again in a heartbeat for our son.

This bill is not about families getting the chance to have a child. This bill is about religion, something that reproductive medicine is not. If HB1373 is approved with the current language, IVF treatment will be unavailable to families and women that already carry the burden of infertility. As someone who firsthand lost over 40 eggs because they did not grow after being fertilized, should I be condemned as the language is currently written? If a woman has a miscarriage due to circumstances outside of her control, should she? This is how HB1373 will treat women. How can our state consider itself “Legendary” if we don't protect the people that will carry on the legacy? How can our state continue to turn down women's healthcare when they are the ones who bring new life to our state?

I urge you to vote in opposition of HB1373. Protect our providers, protect our women, protect the families and couples that have the hope that one day they will be able to be parents.

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

HB 1595
2/17/2025

Relating to pregnancy resource centers that receive state funding.
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4:18 p.m. Chairman M. Ruby opened the meeting.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios, Rohr

Discussion Topics:

- Committee action

4:18 p.m. Representative Dobervich moved a Do Pass.

4:18 p.m. Representative Davis seconded the motion.

Representatives	Vote
Representative Matthew Ruby	N
Representative Kathy Frelich	N
Representative Karen Anderson	N
Representative Mike Beltz	N
Representative Macy Bolinske	N
Representative Jayme Davis	Y
Representative Gretchen Dobervich	Y
Representative Cleyton Fegley	N
Representative Jared Hendrix	N
Representative Dawson Holle	N
Representative Dwight Kiefert	N
Representative Nico Rios	N
Representative Karen Rohr	N

4:21 p.m. Motion failed 2-11-0.

4:21 p.m. Representative Rohr moved a Do Not Pass.

4:21 p.m. Representative K. Anderson seconded the motion.

Representatives	Vote
Representative Matthew Ruby	Y
Representative Kathy Frelich	Y
Representative Karen Anderson	Y
Representative Mike Beltz	Y
Representative Macy Bolinske	Y
Representative Jayme Davis	N
Representative Gretchen Dobervich	N

Representative Cleyton Fegley	y
Representative Jared Hendrix	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Nico Rios	Y
Representative Karen Rohr	Y

4:23 p.m. Motion passed 11-2-0.

Representative K. Anderson will carry the bill.

4:24 p.m. Chairman M. Ruby closed the meeting.

Jackson Toman, Committee Clerk

REPORT OF STANDING COMMITTEE
HB 1595 ([25.0349.02000](#))

Human Services Committee (Rep. M. Ruby, Chairman) recommends **DO NOT PASS** (11 YEAS, 2 NAYS, 0 ABSENT OR EXCUSED AND NOT VOTING). HB 1595 was placed on the Eleventh order on the calendar.