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TESTIMONY OF THE MAINE MEDICAL ASSOCIATION
NEITHER FOR NOR AGAINST L.D 1811,
AN ACT TO ENHANCE PERSONAL AND PUBLIC SAFETY BY REQUIRING
EVALUATIONS OF AND JUDICIAL HEARINGS FOR PERSONS IN PROTECTIVE CUSTODY
REGARDING RISK OF HARM AND RESTRICTING ACCESS TO DANGEROUS WEAPONS

Joint Standing Committee on Judiciary
State House Room 209
Wednesday, June 5, 2019

Good morning Senator Carpenter, Representative Bailey, and Members of the Joint Standing Committee on Judiciary. I am Peter Michaud, General Counsel for the Maine Medical Association (MMA) and a registered nurse. I live in Readfield, and I am speaking in support of LD 1811, An Act to Enhance Personal and Public Safety by Requiring Evaluations of and Judicial Hearings for Persons in Protective Custody Regarding Risk of Harm and Restricting Access to Dangerous Weapons.

The MMA is a professional association representing more than 4,300 physicians, residents, and medical students in Maine whose mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens. We represent physicians from all medical specialties, as well as psychiatry, emergency medicine, public health, and primary care.

Mainers are united in our desire never to see a mass shooting, or any illegal homicide, in our state. That's the easy part. The hard part is figuring out how to achieve that goal, or, more likely to approach that goal. At the same time, it is important to remember that the number of one-on-one homicides, and suicides, far surpasses the number of mass shooting victims. The idea of LD 1811 is to create a separation between firearms and people who would use them to cause harm to themselves or others during the time that a real risk is present. The American Medical Association supports the establishment of laws allowing petition to a court for the removal of a firearm when there is a high or imminent risk for violence. (See attached AMA Policies H-145.972 and 145.996.)

Finally, there is the question of what we do after a person is separated from his firearms. Is such a person safe enough to be unrestricted in public? If a person is so ill that he presents a likelihood of serious harm, should that person not be hospitalized until the risk is no longer present? Where are the treatment resources to help such a person?

As printed, the bill has significant problems. Among the issues concerning to physicians are the setting where the evaluation would take place, and the risk that presents to evaluating personnel who are focused on health care and not on protecting themselves from threat; whether there should be a panel of evaluators established, perhaps through the state psychiatric hospital system,

to be trained and available through telemedicine techniques for this purpose. Also, far more people are injured by firearms used in one-on-one situations or suicides than in mass shootings; what are we doing to prevent or reduce those injuries and deaths? The printed version of the bill is currently being modified substantially by a number of people representing a number of different viewpoints. We will continue working to craft a bill that addresses these and other concerns. Let's not rush to pass a bill that doesn't address these concerns and others adequately.

We respectfully ask you to consider carefully the amended version of LD 1811, whatever it turns out to be. In doing so, please ask yourselves, "Will this bill really make Maine people safer?" Let's pass a bill that does that. I would be happy to respond to any questions you may have.

Firearms

Firearms and High-Risk Individuals H-145.972

Topic: Firearms **Policy Subtopic:** Safety and Regulation

Meeting Type: Interim **Year Last Modified:** 2018

Action: Reaffirmed **Type:** Health Policies

Council & Committees: Board of Trustees



Our AMA supports: (1) the establishment of laws allowing family members, intimate partners, household members, and law enforcement personnel to petition a court for the removal of a firearm when there is a high or imminent risk for **violence**; (2) prohibiting persons who are under domestic **violence restraining** orders, convicted of misdemeanor domestic **violence** crimes or stalking, from possessing or purchasing firearms; (3) expanding domestic **violence restraining** orders to include dating partners; (4) requiring states to have protocols or processes in place for requiring the removal of firearms by prohibited persons; (5) requiring domestic **violence restraining** orders and **gun violence restraining** orders to be entered into the National Instant Criminal Background Check System; and (6) efforts to ensure the public is aware of the existence of laws that allow for the removal of firearms from high-risk individuals.

Policy Timeline

CSAPH Rep. 04, A-18 Reaffirmed: BOT Rep. 11, I-18

Firearms

Firearm Availability H-145.996

Topic: Firearms **Policy Subtopic:** Safety and Regulation

Meeting Type: Interim **Year Last Modified:** 2018

Action: Modified **Type:** Health Policies

Council & Committees: Board of Trustees



1. Our AMA: (a) advocates a waiting period and background check for all firearm purchasers; (b) encourages legislation that enforces a waiting period and background check for all firearm purchasers; and (c) urges legislation to prohibit the manufacture, sale or import of lethal and non-lethal guns made of plastic, ceramics, or other non-metallic materials that cannot be detected by airport and weapon detection devices.
2. Our AMA supports requiring the licensing/permitting of firearms-owners and purchasers, including the completion of a required safety course, and registration of all firearms.
3. Our AMA supports “**gun violence restraining orders**” for individuals arrested or convicted of domestic **violence** or stalking, and supports extreme risk protection orders, commonly known as “red-flag” laws, for individuals who have demonstrated significant signs of potential **violence**. In supporting **restraining** orders and “red-flag” laws, we also support the importance of due process so that individuals can petition for their rights to be restored.

Policy Timeline

Res. 140, I-87 Reaffirmed: BOT Rep. 8, I-93 Reaffirmed: BOT Rep. 50, I-93 Reaffirmed: CSA Rep. 8, A-05 Reaffirmed: CSAPH Rep. 1, A-15 Modified: BOT Rep. 12, A-16 Appended: Res. 433, A-18 Reaffirmation: I-18 Modified: BOT Rep. 11, I-18