



## HB 47 Elizabeth Whitefield End-of-Life Options Act

**Summary:** Sponsored by Reps. Deborah Armstrong and Day Hochman-Vigil, and Senators Liz Stefanics and Bill O’Neill, HB 47 would make medical aid in dying available to the terminally ill in New Mexico. Medical aid in dying allows a terminally ill, mentally capable adult with a prognosis of six month or less to live the option to request, obtain, and take medication to die peacefully, if and when they choose.

**History:** Senator Stefanics introduced the first medical aid in dying bill (SB 446) in 1995. She also sponsored SB 252 in 2017, which failed on the Senate Floor, and SB 153 in 2019, which died in committee. Rep. Armstrong sponsored HB 171 in 2017 and HB 90 in 2019, both of which died committee.

### Why We Support HB 47

1. **Strict Qualifications:** To qualify, a person must be an adult, terminally ill, mentally capable of making an informed decision, and a New Mexico resident. That person must be able to self-administer the medication for a peaceful death.
2. **Robust Protections:** A patient initiates the process by asking a health care provider, who must then determine that the person is terminally ill and is mentally capable of making an informed decision. If there is any doubt, the provider must refer the patient for an evaluation to a licensed mental health professional who determines if the patient has capacity and is mentally capable of making an informed decision.
3. **Informed Decision-Making:** The health care provider must ensure that the person is making the request voluntarily and explain all anticipated outcomes, risks, and alternatives, including hospice and palliative care.
4. **Peace of Mind:** Oregon data shows that 1/3 of people who obtain the prescription for medical aid in dying never choose to self-administer it. Some die before they feel a need to use it. For others, just knowing that they have the means to end their suffering, if it becomes unbearable, provides peace of mind and improves their quality of life.
5. **Ensuring Access:** The bill has a 48-hour waiting period from the writing of the prescription to filling of the prescription to ensure timely access for critically ill and suffering patients. A health care provider is defined as an MD, DO, Advanced Practice Nurse, or Physician Assistant.
6. **Protects Doctors, Nurses, and Loved Ones:** HB 47 is explicit that medical aid in dying is not “suicide.” Physicians, nurses, and loved ones are protected against prosecution for “assisting suicide.” Further, good faith compliance with the law may not be construed as unprofessional conduct or considered neglect. The law mandates that the death certificate list the underlying illness as the cause of death. It also prohibits any insurance policy from being conditioned upon or affected by a patient taking advantage of the law. Medical aid in dying is entirely voluntary for patients, healthcare providers, and pharmacists.
7. **Compassion for the Suffering:** As in other states, the law is expected to be used by only a small percentage of dying patients (<1/2 of 1%) – but for those who are suffering unbearably at the end of life, it provides a measure of control and immeasurable peace—a matter of basic human rights. Health care providers who participate are acting ethically and are fulfilling the highest obligations of their calling—to relieve suffering.
8. **Safely Practiced for a Combined 40 Years:** In Oregon, Washington, Montana, Vermont, California, Colorado, Hawaii, New Jersey, Maine, and Washington, D.C., there has not been a single case of abuse or coercion, nor any criminal or disciplinary charges filed. Medical aid in dying is a safe and effective medical practice.

**Supporting Organizations:** ACLU of NM, Equality NM, Health Action NM, NM Nurse Practitioner Council, National Association of Social Workers, NAACP Albuquerque, NM Public Health Association, Nuestra Salud NM, Transgender Resource Center of NM

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