



## Planned Parenthood Votes Northwest

### WASHINGTON STATE QUESTIONNAIRE

Planned Parenthood Votes Northwest ("PPVNW") is a non-partisan 501(c)(4) organization formed as the advocacy, voter education, and political arm of the four Planned Parenthood affiliates operating in Washington, Alaska, and Idaho.

Planned Parenthood Votes Northwest ("PPVNW") conducts voter education, advocates for legislative and regulatory action, and operates independent expenditure campaigns. PPVNW also operates Planned Parenthood Votes Northwest Washington PAC, a state political action committee. PPVNW WA PAC makes direct cash and in-kind contributions to candidates and conducts independent expenditure campaigns.

PPVNW and the PPVNW WA PAC are non-partisan organizations committed to protecting and promoting reproductive health, rights, and justice. We support candidates who seek to guarantee full and nondiscriminatory access to reproductive health care including the right to abortion services, and who will foster and preserve a social and political climate favorable to reproductive choice. Please review the attached letter for information about the PPVNW endorsement process.

### INSTRUCTIONS

For consideration, this completed candidate questionnaire must be received by PPVNW by **June 12<sup>th</sup>, 2014** by mail or email.

Please mail your responses to:

Treasure Mackley, Political & Organizing Director  
Planned Parenthood Votes Northwest  
2001 East Madison Street  
Seattle WA 98122  
Phone: 206-861-7502  
Cell: 206-612-1011

[treasure.mackley@ppvotessouthwest.org](mailto:treasure.mackley@ppvotessouthwest.org)

Be certain to respond to EVERY question. Incomplete responses will be interpreted as "refused to respond" and will negatively affect your score. Your score determines whether or not PPVNW will endorse or recommend you.

Circle "YES" or "NO" for every question. You are welcome to attach a narrative statement to share your thoughts or expand your responses.

If you have questions, or need to make alternate arrangements for delivery of your completed questionnaire, please contact Treasure Mackley, Political & Organizing Director via email at: [treasure.mackley@ppvotessouthwest.org](mailto:treasure.mackley@ppvotessouthwest.org) or call 206-861-7502 office or 206-612-1011 cell.

## CAMPAIGN INFORMATION

Candidate Name	Chad Magendanz
Position sought	State Representative, 5 <sup>th</sup> LD (Position 2)
Party Preference if applicable	Republican
Residence: Congressional, Legislative, City and County Council District if applicable	25524 SE 159 <sup>th</sup> St. Issaquah, WA 98027 CD 8, LD 5
Are you a Challenger, Incumbent, or running for an Open Seat?	Incumbent
Campaign Information	
Campaign Name	Citizens for Chad Magendanz
Web page	<a href="http://www.Vote4Chad.com">http://www.Vote4Chad.com</a>
Campaign Email address	info@magendanz.com
Campaign Manager	Steve McNey
Campaign mailing address	P.O. Box 1362 Issaquah, WA 98027
Campaign phone number	(425) 395-4895
Campaign FAX	
Campaign Budget	\$120K
Contributions Raised to Date	\$55K

## CANDIDATE INFORMATION

**Will family planning, public funding for sexual and reproductive health care, clinic access, health reform implementation, abortion rights, access to emergency contraception, or sex education be significant issues in your race?**

As the only Republican to vote for the Reproductive Parity Act, I expect that these issues will be core to the campaign and a regular topic during candidate forums.

**What other elected / appointed offices have you sought or held? Include year and jurisdiction.**

- Elected as Issaquah School Board President in 2011
- Elected as School Board Legislative Representative in 2009
- Elected to WSSDA Legislative Committee in 2009 & 2011
- Appointed NSBA Legislative Coordinator for Congressional District 8
- Appointed to Washington Online Learning Advisory Committee
- Treasurer and executive board member for Kiwanis Club of Issaquah
- Coordinator for Stand for Children and Safe Roads for Issaquah PACs
- 2009 Washington State PTA Outstanding Advocate

**Describe your qualifications, education, employment, community and civic activity, and other relevant experience.**

### **Legislature:**

- Assistant Minority Floor Leader
- Ranking Minority Member on House Education Committee
- House Higher Education Committee
- House Technology & Economic Development Committee
- House Rules Committee
- Quality Education Council
- Career Education Opportunities Joint Legislative Task Force
- Joint Select Committee on Article IX Litigation
- Governor's Work Group on Education Funding
- Joint Legislative Systems Committee
- Technology Services Board

### **Career:**

- Electrical Engineering degree from Cornell
- 12 years as an officer in the U.S. Navy
- 10 years as a full-time manager at Microsoft
- 10 years as a software design consultant
- Over 20 Microsoft patent awards

## Family:

- Married for 25 years to wife Galen
- Father of teenage boys Quinn and Duncan
- 19 years living in the 5th Legislative District

## Describe, in general terms, your campaign plan and voter contact strategy.

I've been building name ID since the end of session, with an aggressive new Facebook ad campaign with coordinated yard signs and banners throughout the district:



made of the right stuff



(but not really Danish)

The ads have been highlighting campaign events such as the re-election kick-off, telephone town halls and recreational hikes, but I've also hit on legislative topics such session wrap-ups and interim projects around education funding and reform. The Facebook campaign will culminate in two weeks with an online video town hall and grassroots fundraising campaign.

I'll be covering six parades in district this summer, handing out candy and helium balloons with the new logo and campaign slogan. About a month before the primary, I'll step up visibility in district with about 600 yard signs and twenty 4x8 signs. Doorbelling by precinct will continue throughout, building on the 10,000 homes that I've already personally visited. Targeted direct mail will be stepped up just before ballots drop for the general election, and then after that we'll use targeted robocalls to get out the vote.

## What ratings and endorsements have you received to date?

I've already received endorsements from Stand for Children, League of Education Voters, and Washington Realtors this campaign season. Last election cycle I received endorsements from the following:

- [The Seattle Times](#)
- [The Issaquah Press](#)
- [SnoValley Star](#)
- [The League of Education Voters](#)
- [Stand for Children](#)





## PREFACE

Planned Parenthood believes in access to family planning, reproductive healthcare and abortion. We believe that every woman -- regardless of income, age or marital status -- has the fundamental right to decide whether and when to have a child. It is the government's role to support personal childbearing decisions with complete and reliable reproductive health information including sexual health education, access to comprehensive reproductive health care, and safe, legal abortion.

Circle "YES" or "NO" in response to the questions below. If you wish to expand your response, you may provide a narrative attachment.

## QUESTIONS

### FUNDING FOR REPRODUCTIVE HEALTH SERVICES:

Reproductive health care is basic health care, and an integral part of the health care safety net for men and women. For many individuals, family planning health centers are their only source of health care. These centers provide a wide array of care including cancer screenings, contraception, sexually transmitted infection testing, pregnancy testing, health education, health referrals, Medicaid or insurance enrollment assistance, and more.

It is critical that barrier-free access to reproductive health care is maintained in Washington, including making sure providers are included in all Medicaid and other insurance plans, and maintaining state funding to fill the gaps that remain even after ACA implementation. While we work to connect all of our patients with insurance or Medicaid, for those who have missed open enrollment or have other barriers to coverage, it is important that they be able to access family planning while they await the next open enrollment period.

This access is essential for strong families, public health, and better birth outcomes, and also for Washington's budget. In Washington, 49% of pregnancies are unintended, and 47% of all births are paid for by Medicaid. It costs approximately \$552 a year to cover a full range of family planning services for each Washingtonian in need, compared to over \$10,000 in state funds for each Medicaid paid birth, and every tax dollar spent on family planning in Washington saves \$6.30 in pregnancy care costs. Washington State spent over \$428 million on unintended pregnancy care costs in 2012. Furthermore, funding has been slashed for testing and treatment of sexually transmitted infections (STIs), many local public health departments have cut back or closed family planning and/or STI services, and community providers like Planned Parenthood have struggled to fill the gap while watching rates for Washington's most common STIs more than double since 1996.

State funding for family planning fills the gaps, reducing pregnancy care costs and negative health outcomes like infertility and prenatal problems. This funding comes through the Medicaid Apple Health expansion, the Medicaid Take Charge family planning program, the Department of Health family planning and Title X program, and Department of Health HIV/AIDS and STI programs. All of these programs save money, and several also receive federal match dollars, including the Title X program and a \$9 to \$1 federal-state match in the Medicaid Take Charge program.

**Will you vote to ensure the inclusion of reproductive health care in all basic health care programs, and to preserve or when appropriate, expand state funding for these critical reproductive health services that save money and improve the health of our families and our state?**

YES

NO

**COMPREHENSIVE SEXUAL HEALTH EDUCATION:**

The vast majority of parents in our state (76%) believe that teens should be provided with sexual health education that includes information about birth control (abstinence as well as contraceptives) and protection against sexually transmitted infections (STIs). Complete and responsible sexual health education is crucial to reducing Washington's high rate of unintended pregnancy and STIs. In 2007 the Washington State legislature passed the Healthy Youth Act. The Act requires that when teens get sex education in public schools, the information is medically accurate, age appropriate, and includes information about both abstinence and other methods of preventing pregnancy and STIs, such as contraceptives.

Washington is committed to reducing unintended pregnancy and promoting good reproductive health for our youth. Our state needs to ensure that funding applications serve these goals by supporting programs that are proven to work. Abstinence-only-until-marriage programs, as the federal government defines them today, are proven ineffective by the government's own studies. In 2009, the Washington State Legislature passed SB 5629, which ensures that Washington State applies for funding for sexual health education programs that are consistent with the Healthy Youth Act, and are proven effective.

**Do you support comprehensive, medically accurate sexual health education programs and oppose disproven and ineffective abstinence-only programs?**

YES                      NO

**Will you advocate and vote for adoption of comprehensive sexual health education policies and funding for programs proven to be effective?**

YES                      NO

**CONFIDENTIAL HEALTH SERVICES FOR MINORS:**

Planned Parenthood believes that minors as well as adults should have confidential access to health services, including family planning, disease prevention, and abortion. In 1975, the Washington State Supreme Court struck down a state law requiring parental consent for abortion by ruling it unconstitutional. Some groups continue to promote "parental notification" legislation as a "compromise." Parental consent and notification requirements put the health and safety of teenagers at risk by discouraging them from seeking preventive reproductive health care, and undermine Washington's efforts to reduce teen pregnancy. Currently, Washington state law says that minors may consent to care for abortion/contraception, as well as sexually transmitted disease/HIV testing, alcohol and drug treatment as well as mental health treatment. The American Medical Association, American Academy of Pediatrics, Society for Adolescent Medicine, and the American Public Health Association oppose *government-mandated* parental involvement in a minor's reproductive health care. **Planned Parenthood encourages minors to involve their parents in their reproductive health care, and especially in the case of an unintended pregnancy, the vast majority of minors do involve their parents. However, not all youth can involve their families due to abuse, violence, drug abuse or other dangerous factors in the home. Safety is most important for these most vulnerable youth, and legislation mandating family involvement can put them at risk. Are you opposed to *government-mandated* parental involvement in a minor's reproductive health care?**

YES                      NO

**Would you vote against *government-mandated* parental involvement in a minor's reproductive health care?**

YES                      NO

Note: I just believe an abortion should be treated like any other medical procedure. Currently, parental consent is required for all other non-emergency medical services, unless the minor meets the Mature Minor Doctrine. A legally emancipated minor or a minor married to either an adult or an emancipated minor is also treated as an adult. If a child is at risk from another family member for any reason, they should be removed by CPS.

**EMERGENCY CONTRACEPTION:**

In 1998, the FDA approved the first packaging of emergency contraception, also known as "the morning after pill." Emergency contraception is a high dose combination of birth control pills that if taken within days of unprotected sex, can safely prevent a pregnancy from occurring. It cannot terminate an existing pregnancy. In 2013 the age restriction was lifted on emergency contraception availability over the counter. Women having insurance or Medicaid coverage for emergency contraception, which typically costs from \$10 to \$70, must still have a prescription to obtain it. Today emergency contraception is kept behind the counter at pharmacies rather than on the store shelves thereby limiting access for adult women. In response to refusals to fill prescriptions because of personal beliefs, including—but not limited to—emergency contraception, the Washington State Board of Pharmacy adopted rules in 2007 which mandate that patients' prescriptions must be provided without discrimination or delay. These rules are currently the subject of litigation in federal court.

**Will you advocate and vote for efforts to increase access to emergency contraception?**

**YES**

**NO**

**REFUSAL CLAUSES:**

Some health care providers, facilities, employers and insurers are demanding the legal right to refuse to provide or pay for any reproductive health service or counseling they find objectionable. They are asking for special laws that allow them to put their personal beliefs above the medical needs and health care decisions of patients. An individual's right to reproductive health care should be protected and should not be determined by the views of anti-contraception and anti-choice individuals or institutions.

**Will you support an individual's reproductive rights by voting against restrictions that would allow institutions or individuals the right to refuse to provide legal medical services or insurance coverage based on their personal or religious beliefs?**

**YES**

**NO**

**VIOLENCE AGAINST REPRODUCTIVE HEALTH PROVIDERS:**

In recent years, a campaign of violence, intimidation, and harassment has been waged against patients seeking reproductive health care, as well as clinics and clinic staff. This campaign of violence has had devastating effects on access to reproductive health services, and yielded tragic results—such as the 2009 shooting death of Dr. George Tiller in Kansas. Planned Parenthood believes the government, including local government, should take an aggressive role in enacting and enforcing laws that protect patients and providers, and in prosecuting the perpetrators of illegal acts.

**Will you advocate and vote for the enactment and enforcement of laws that help prevent violence, intimidation and harassment directed at reproductive health patients and providers?**

**YES**

**NO**

**MEDICAL RECORDS AND THE RIGHT TO PRIVACY:**

In accordance with the Federal Privacy Law (HIPAA), family planning and abortion clinics keep medical information and records confidential and only use them for patient treatment, health care operations, and billing purposes. In recent cases around the United States, anti-choice Attorneys General and prosecutors have subpoenaed clinic medical records in vaguely-worded and wide-reaching searches for evidence of alleged late-term abortions, Medicaid fraud, and child rape. These “fishing expeditions” result in privacy violations of patients who are guilty of nothing. Planned Parenthood believes that threats of such intrusive searches could intimidate patients from seeking reproductive health services, including a legal and private abortion procedure, birth control, or STI screening.

**Do you support the position that government must show a compelling public interest or emergency circumstance before requiring clinics, hospitals, or doctors to release records and will you vote to protect the confidentiality of medical records?**

**YES**

**NO**

**RIGHT TO CHOOSE:**

Planned Parenthood believes that women have the right to obtain a medically safe, legal abortion under the standards set forth by the U.S. Supreme Court in the *Roe v. Wade* decision. Washington State has a long history of support for abortion access, voting to codify abortion rights in 1970, three years before the *Roe v. Wade* decision, and passing several initiatives on the subject of abortion rights over the years. Most recently, the voters of Washington voted to ensure abortion access for low-income women with Initiative 120 in 1991.

**Do you support a woman’s right to choose safe and legal abortion?**

**YES**

**NO**

Today, federal threats to abortion access in Washington loom in some anti-choice provisions of the federal Affordable Care Act, and Planned Parenthood is seeking to maintain current access levels and ensure parity by requiring all health insurance plans that are regulated by the state of Washington and that cover maternity care to also cover abortion.

**Do you support this position, and would you vote to ensure abortion access?**

**YES**

**NO**

#### **BANS ON ABORTION:**

Planned Parenthood believes that in all cases women and their doctors should be free to make the health care decisions that are best for the woman. Anti-choice organizations have tried to erode the Supreme Court's *Roe v. Wade* decision (which ensures a woman's constitutionally-protected right to choose abortion) by advancing vaguely-worded and deceptive bans on abortion procedures. In 1998, Washington State voters rejected the so-called "partial birth abortion ban" measure by a 57% margin. In 2013 39 states enacted 141 provisions related to reproductive health and rights. Half of these provisions restrict access to abortion –22 states enacted 70 restrictions to be exact. We have seen more restrictions on abortion passed in state legislatures across the country in 2011-2013 than in the entire previous decade. --and 21 states have passed bans on insurance coverage of abortion.

**Do you support a woman's right to choose the abortion method that she and her physician deem safest for her individual health and needs?**

YES

NO

Note: The intent of Initiative 120 was to protect a woman's right to choose to have an abortion prior to viability of the fetus, or to protect her life or health. While I would oppose legislation aiming to ban specific methods, I would at least consider legislation to ban late-term abortions when the mother's life or health was not endangered. That said, I did oppose I-694 because it was poorly written and worded in such a vague way that it could be construed to ban abortions other than the controversial, late-term procedure.

#### **MEDICAL ACCURACY OF INFORMATION:**

Planned Parenthood believes that anyone receiving a pregnancy test, ultrasound, or a test for sexually transmitted infections or diseases should receive information that is medically and scientifically accurate. In addition, Planned Parenthood believes that any facility offering such testing should follow medical privacy laws, and provide disclosure of what services they do/do not provide in order to provide a basic standard of care for patients.

**Do you support legislation or regulation ensuring that individuals receiving a pregnancy test, ultrasound, or a test for sexually transmitted infections will receive information that is medically and scientifically accurate, and that facilities providing such testing should follow medical privacy laws, and provide disclosure of what services they do/do not provide?**

YES

NO

#### **FETAL "PERSONHOOD":**

Legislation and regulations have been introduced that would elevate the status of the fetus at any stage of development, to that of an adult. This is an effort to establish fetal "personhood" to create a conflict with a woman's right to choose abortion. Furthermore, legislation has from time to time been introduced without the intention of restricting abortion rights, but that could have that effect, as is the case with legislation that seeks

to create birth certificates for stillbirths rather than existing certificates of stillbirth. Planned Parenthood advocates for expanded support services for families experiencing the loss of a wanted pregnancy, but must oppose any legislation that intentionally or unintentionally creates separate legal rights for fetuses.

**Would you support a woman's right to choose abortion by voting against legislation that creates separate legal rights for fetuses, distinct from those of the pregnant woman?**

YES

NO

#### **PUBLIC FUNDING FOR ABORTION:**

Congress has used its funding powers to single out certain classes of women (low-income women, federal employees, military personnel serving overseas, residents of the District of Columbia, and women in federal prisons) and restrict their access to legal abortion because their health care is funded in part by the federal government. Here in Washington, voters passed Initiative 120, The Reproductive Privacy Act, in 1991 which ensures fairness in access to choice for women of all income levels.

Initiative 120 became RCW 9.02 upon its passage, and it states in part that if the state provides, directly or by contract, maternity care benefits, services, or information to women through any program administered or funded in whole or in part by the state, the state shall also provide women otherwise eligible for any such program with substantially equivalent benefits, services, or information to permit them to voluntarily terminate their pregnancies.

**Will you vote against restrictions on public funding for abortion and vote to uphold the principles outlined in RCW 9.02.160?**

YES

NO

#### **HEALTH CARE REFORM:**

In 2010, Congress passed comprehensive health care reform legislation, The Patient Protection and Affordable Care Act. Although the bill represents a huge legislative advance for women's health by increasing access to family planning and birth control, as well as cervical and breast cancer screenings, Planned Parenthood continues to be deeply concerned about the inclusion of restrictions on private insurance coverage for abortion in the bill, known as the Nelson restrictions. The Nelson restrictions will, for the first time ever, single out a legal medical procedure by requiring the segregation of insurance funds for abortion from other funds. In addition, according to independent studies of insurance industry effect, and Washington State Insurance Commissioner, Mike Kreidler, the administrative burdens required of insurers will likely result in insurance companies forgoing offering abortion coverage altogether unless we address this issue.

**As Washington State moves forward with the implementation of federal health care reform, will you advocate for and vote to protect Washington women's ease of access to a full range of reproductive health services—including abortion?**

**YES**

**NO**

**Will you vote and advocate for a requirement that all insurance plans that are regulated by the State of Washington that offer maternity care coverage also offer insurance coverage for abortion care?**

**YES**

**NO**

Note: In both the 2013 and 2014 legislative sessions, I was the only Republican to vote for the Reproductive Parity Act.

Planned Parenthood Votes Northwest has an existing policy in support of Lesbian, Gay, Bisexual, and Transgender (LGBT) rights, from the right to be free of discrimination to the right to marry. Specifically, we have articulated that policy in support of sexually healthy communities, individual privacy, and personal freedom. Planned Parenthood Votes Northwest opposes discrimination based on actual or perceived sexual orientation or gender, and supports all efforts to enact protections against such discrimination.

**Do you support marriage equality for LGBT couples?**

**YES**

**NO**

**Do you oppose discrimination and bullying based on actual or perceived sexual orientation or gender identity?**

**YES**

**NO**

Across the state, patients at publicly funded hospitals and health centers are encountering restricted health care – and even restricted information about health care options – based on institutional religious doctrine. Reproductive health care services – including birth control, sterilization, abortion, emergency contraception, and infertility services – are the type of care most frequently banned at religiously-affiliated hospitals and health centers. Not only are services denied, but often referrals to providers who will help, and even fully accurate medical information are denied as well.

Religious restrictions undermine patients' rights to complete medical information and informed consent, and interfere with their ability to obtain a full range of health services. Health care refusals hurt all patients, but they fall most heavily on women, the LGBT community, and the poor. Patients may have no other accessible choice for hospital care, and they frequently only learn about the restrictions in a religious hospital once they are in an emergency, or later when they find out about information they were not provided.

Community hospitals are merging and/or affiliating with religious hospital systems at an alarming rate, making them subject to religious restrictions – along with all of their associated health clinics. When non-religious community hospitals merge or affiliate with religiously-sponsored hospitals that use doctrine to restrict care, patients can suddenly discover they have lost access to vital reproductive health care services. In Washington, just over 40% of all acute care hospital beds are owned or controlled by Catholic health systems, and proposed mergers could push that rate closer to 50%.

Health care policies in publicly funded hospitals and health centers should be based on medical ethics and state law, not religious doctrine. In Washington, we must make sure that all women and families, regardless of income or geographic location, have access and information to all of their health care options.

Do you support policies to assure that mergers and affiliations of publicly funded hospitals and health centers do not result in reduced access to reproductive health care?

YES

NO



---

Candidate Signature

5/30/2014

---

Date