

SB 947_Potomac Family Planning Center_fav.pdf

Uploaded by: Alice Harper

Position: FAV

Testimony in support of SB0947 (Abortion Care Access Grant Program and Fund - Establishment) to the Maryland State General Assembly Senate Finance Committee

March 6, 2024

My name is Alice Harper and I am the Executive Administrator for three abortion clinics in Maryland: Potomac Family Planning Center in Rockville, Hillcrest Clinic in Catonsville, and Hagerstown Reproductive Health Services in Hagerstown. I am writing to express my support for Senate Bill 0947, a bill to establish the Abortion Care Access Grant Program.

Our medical director and I have been operating abortion clinics in Maryland for over 30 years and have witnessed threats to our ability to provide care such as aggressive protesters and crisis pregnancy centers opening up next door. But, we have also seen progress and community support in the establishment of two local abortion funds (Baltimore Abortion Fund and DC Abortion Fund) and the many volunteer hours from clinic escorts from the Washington Area Clinic Defense Task Force (WACDTF). At the center of our work is ensuring compassionate and safe care to those seeking abortions in Maryland, whether they be from down the street or many states away. We are excited about the new opportunities the Abortion Care Access Grant Program will make possible and assist us in continuing to provide high quality care.

We believe security at our clinics is one part of the abortion access puzzle that allows us to provide care. We rarely need to call local police for assistance but if and when we do, our hope is that law enforcement will treat our calls with respect and knowledge. Our desire is for law enforcement across the state to understand abortion-specific laws and enforce them fairly and appropriately.

We are continuously examining new ways to ensure patients, staff, and clinic escorts are safe. Our Hagerstown clinic is a key example of the importance of security due to its proximity to a crisis pregnancy center and location that allows for protesters to follow patients all the way to our entrance. While we cannot stop protesters from interacting with patients, funds from the Abortion Care Access Grant Program would allow us to invest in better cameras and lighting to allow staff to better monitor the situation inside and outside of the clinic.

The barriers to getting to the door of our abortion clinics are not just physical protesters but monetary and logistical barriers to accessing care. Patients at our clinics can use Medicaid to pay for care, something we recognize is not the norm across the country. About 40% of our patients use Medicaid, an additional 10-20% use abortion fund funding to cover some or all of their appointment costs. We also accept some private insurance, though many plans do not cover abortion care. Many patients also chose to pay out of pocket to avoid charges showing up on bank accounts or insurance that can be traced back to their appointment. Funds from the Abortion Care Access Grant Program have the potential to help break down the monetary barriers of accessing care for many patients.

The list of logistical barriers to accessing abortion care is endless. Patients need to take time off work, pay for gas, find child care, or find a ride to and from the clinic. Of patients surveyed over the last six months at our Rockville location, over 60% indicated they would benefit from funds to help offset these logistical costs. Funds from the Abortion Care Access Grant Program could allow for patients to not only pay for their care, but offset the costs that can accumulate as part of accessing care and the post-care needs.

We are grateful to the Maryland Senate for considering this bill and appreciate Senator Kelly's sponsorship. The future of abortion care is uncertain in our country but Maryland has the opportunity to be a leader and innovator through the establishment of the Abortion Care Access Grant Program.

Thank you,
Alice Harper
Executive Administrator
Potomac Family Planning Center, Inc.
afharper@potomacfamilyplanning.com

SB947 Testimony 2024.pdf

Uploaded by: Debi Jasen

Position: FAV

Senate Bill 947
Finance Committee

Honorable Chair, Vice Chair, and Members of the Finance Committee;

Please give Senate Bill 947, regarding an abortion care access grant and fund, a Favorable report.

Reproductive healthcare is necessary in order for pregnant people to have the right to self-determination. Without the right to oneself, one can't have any rights at all. I appreciate that the Maryland legislature decided that we shouldn't lose our rights when we become pregnant. Unfortunately, there are still barriers to abortion access in Maryland. As you know if you've read testimony for Senate Bill 975, clinics, and those who work, volunteer, or seek care at them, are under constant threat. Reproductive healthcare clinics could use whatever help they can get in order to be safe and secure. Insurance companies certainly have enough extra money to help make this happen.

I urge you to vote favorably for Senate Bill 947. Thank you for your consideration.

Sincerely,
Debi Jasen
Pasadena, MD

PPM--SB 947--FAV.pdf

Uploaded by: Erin Bradley

Position: FAV

Planned Parenthood of Maryland

Committee:	Senate Finance Committee
Bill Number:	Senate Bill 947 - Abortion Care Access Grant Program and Fund – Establishment
Hearing:	March 6, 2024
Position:	Favorable

Planned Parenthood of Maryland (PPM) supports *SB 947—Abortion Care Access Grant Program and Fund—Establishment*. This bill creates the Abortion Care Access Grant Program with the purpose of providing operating and capital grants to abortion providers to protect the security of patients, staff and volunteers. The grant program fund would be a nonlapsing fund utilizing certain premiums collected by health insurance carriers.

The physical safety of our providers, patients, their families and our staff is of paramount importance to Planned Parenthood of Maryland. Since 1977, well before the fall of *Roe*, there have been thousands of criminal activities directed at abortion providers, patients and support staff. The National Abortion Federation (NAF) reports that there have been 531 assaults, 492 clinic invasions, 375 burglaries, 200 arsons, 42 bombings and 11 murders directed at abortion care facilities, their providers and patients since 1977.¹ According to the same report, the 2022 violence and disruption statistics show a devastating increase in violence in states, like Maryland, that protect abortion rights. In 2021 there were 28 instances of stalking patients or providers nationwide, just a year later in 2022 that number rose sharply to 92 incidents. That same year there was also a 100% increase in the number of clinic arsons compared to 2021. Most concerning for Marylanders is that the NAF data shows “in 2022, many anti-abortion extremists shifted their attention to protective states after dozens of clinics were forced to close in states that banned abortion. Clinics in protective states saw a disproportionate increase in violence and disruption.”

¹ <https://prochoice.org/wp-content/uploads/2022-VD-Report-FINAL.pdf>

At Planned Parenthood of Maryland, our patients and staff must not only face vile comments to enter clinics, they are also subject to threats of violence and destruction, harassment and acts of physical aggression for accessing and providing legally protected healthcare. Since 2022 there have been 60 reported incidents at PPM clinics. One of the most egregious occurred in December 2023 when a known, violent protestor, followed a PPM doctor to their car. Later that day the same protestor followed a patient around a corner after they exited the clinic. This bill will have an immediate positive impact on the physical safety of our facilities and the people within by providing a funding mechanism to help providers meet their everchanging physical security needs. PPM is particularly supportive of this approach to security as the program outlined is flexible and allows providers to determine their own security needs and apply for funding to meet their unique needs.

PPM is aware that there is an issue with the funding mechanism laid out in the bill, but we are certain that the bill sponsor is working with technical experts to find a solution. As such, PPM would also support the bill as amended to fix any technical concerns.

If we can provide any additional information, please contact Erin Bradley at erin.bradley@ppm.care or (443) 604-3544.

MLAW Testimony - SB947 - Abortion Care Access Gran

Uploaded by: Jessica Morgan

Position: FAV



Bill No: SB947
Title: Abortion Care Access Grant Program and Fund – Establishment
Committee: Finance
Hearing: March 6, 2024
Position: SUPPORT

The Maryland Legislative Agenda for Women (MLAW) is a statewide coalition of women’s groups and individuals formed to provide a non-partisan, independent voice for Maryland women and families. MLAW’s purpose is to advocate for legislation affecting women and families. To accomplish this goal, MLAW creates an annual legislative agenda with issues voted on by MLAW members and endorsed by organizations and individuals from all over Maryland. **SB947 - Abortion Care Access Grant Program and Fund – Establishment** is a priority on the [2024 MLAW Agenda](#) and we urge your support.

SB947 will promote security measures around sexual and reproductive health clinics to protect patients, providers, and advocates from harassment and risk of physical harm.

In the aftermath of the *Dobbs v. Jackson Women’s Health Organization* decision by the US Supreme Court, anti-choice advocates have been successful in drastically reducing or eliminating access to abortion and other reproductive health care in many states, particularly in the Southeast. In Maryland we are rising to meet the challenge of providing access to sexual and reproductive health care to not only Maryland women, but people coming from all over the country. Just as people come here from all over seeking abortion care, so too will anti-choice advocates focus their efforts here as they work to eliminate abortion access elsewhere. All people seeking sexual and reproductive health services deserve the dignity of safe passage into our health care facilities. At present, Maryland law prohibits the obstruction of clinic entrances, but does not provide any sort of affirmative support for security measures at clinics. Additionally, there is no present state funding to help individuals access abortion care.

The Abortion Care Access Grant Program and Fund will provide grants to abortion care facilities to enhance security measures. This can include physical improvements to clinics to promote safety and security, as well as security measures such as cameras. This bill also provides for funding to assist individuals with abortion-related expenses such as fees for the procedure itself, as well as ancillary expenses such as travel expenses. The funding for this program will come from directed appropriations as well as funding that already exists under the federal Patient Protection and Affordable Care Act (ACA). ACA requires insurers offering coverage of abortion care to segregate the portion of premiums paid for that purpose. These bills mandate that any funds left over in excess of 10% after insurers have paid expenses for abortion care be remitted to the Abortion Care Access Grant Program.

For these reasons, MLAW strongly urges the passage of SB947.

MLAW 2024 Supporting Organizations

The following organizations have signed on in support of our 2024 Legislative Agenda:

1199 SEIU United Healthcare Workers East
AAUW Anne Arundel County
AAUW Garrett Branch
AAUW Kensington-Rockville Branch
AAUW Maryland
Adolescent Single Parent Program (PGCPS)
Anne Arundel County Commission for Women
Anne Arundel County NOW
Baltimore County Commission for Women
Black Women for Positive Change, Baltimore Chapter
Bound for Better, Advocates for Domestic Violence
Bound for Better, advocates for Domestic Violence
Business & Professional Women/Maryland
Center for Infant & Child Loss
Child Justice, Inc.
Church Women United, Inc.
Climate XChange Maryland
Court Watch Montgomery
CTLDomGroup Inc
DABS Consulting, LLC
Engage Mountain Maryland
Frederick County Commission For Women
If/When/How at University of Baltimore School of Law
Lee Law, LLC
Les Etoiles in Haiti
Maryland Coalition Against Sexual Assault
Maryland Legislative Coalition
Maryland Network Against Domestic Violence
Maryland WISE Women
Miller Partnership Consultants
MomsRising
Montgomery County Alumnae Chapter, Delta Sigma Theta Sorority, Inc.
Montgomery County NOW
National Coalition of 100 Black Women, Inc., Anne Arundel County Chapter
National Organization for Women, Maryland Chapter
Rebuild, Overcome, and Rise (ROAR) Center at UMB
REHarrington Plumbing and Heating
Reproductive Justice Maryland
Stella's Girls Inc
The Federation of Jewish Women's Organizations of Maryland
The Hackerman Foundation
The Relentless Feminist
The Salvation Army Catherine's Cottage
Top Ladies of Distinction, Inc., Patuxent River
Top Ladies of Distinction, Prince George's County
TurnAround Inc.
University System of Maryland Women's Forum
Women of Action Maryland
Women's Equity Center and Action Network (WE CAN)
Women's Law Center of Maryland
Zeta Phi Beta Sorority, Incorporate - Alpha Zeta Chapter
Zonta Club of Annapolis

Maryland Legislative Agenda for Women

102 W. Pennsylvania Avenue, Suite 100 - Towson, MD 21204 - 443-519-1005 phone/fax
mdlegagenda4women@yahoo.com - www.mdlegagendaforwomen.org

WDC 2024 Testimony_SB0947_FINAL.pdf

Uploaded by: JoAnne Koravos

Position: FAV



MONTGOMERY COUNTY, MARYLAND
WOMEN'S DEMOCRATIC CLUB

P.O. Box 34047, Bethesda, MD 20827

www.womensdemocraticclub.org

**Senate Bill 0947 - Abortion Care Access Grant Program and Fund - Establishment
Finance Committee - March 6, 2024
SUPPORT**

Thank you for this opportunity to submit written testimony concerning an important priority of the **Montgomery County Women's Democratic Club (WDC)** for the 2024 legislative session. WDC is one of Maryland's largest and most active Democratic clubs with hundreds of politically active members, including many elected officials.

WDC urges the passage of [SB0947](#) *Abortion Care Access Grant Program and Fund – Establishment*. This bill will establish a special non-lapsing fund to provide operating and capital grants to abortion care providers for the purpose of protecting the security of their patients, staff, and volunteers. This grant program will be funded by appropriated funds and excess funds that have been set aside for abortion coverage as required by the Affordable Care Act (ACA). ACA requires health insurers, non-profit health service plans, and health maintenance organizations to set aside, in a segregated account, money collected from premiums for abortion coverage. For the fiscal year 2025, the Governor shall appropriate at least \$1,000,000 for this program. Beginning in fiscal year 2026, the Governor's annual budget shall appropriate at least 75 percent of the year-end balance in the ACA set aside accounts. This grant program will be administered by the Maryland State Department of Health. The Department will coordinate with federal, state, and local law enforcement to create security plans for specific providers.

The U.S. Supreme Court's Dobbs decision ended a woman's right to an abortion. Last year the Maryland Legislature passed a number of State bills to protect a woman's right to reproductive health care in Maryland, including abortion, and made Maryland a safe-harbor for women from other States who seek this care. However, since the Dobbs decision, [abortion clinic violence and harassment has increased nationally](#). Anti-choice advocates from other States are also targeting Maryland. Although Maryland law prohibits the obstruction of clinic entrances, the current law does not provide for any kind of safe access zone around them. Women and their providers need protections to ensure safe and free access to reproductive health clinics without harassment and intimidation.

We ask for your support for SB0947 and strongly urge a favorable Committee report. Passage of this legislation will enable clinics to protect women who are seeking reproductive health care and their caregivers.

Tazeen Ahmad
WDC President

Ginger Macomber
WDC Working Families Committee

Cynthia Rubenstein
Co-Chair, WDC Advocacy

2024 SB 947 LOS MD NAPNAP.pdf

Uploaded by: Lindsay Ward

Position: FAV



Support: SB 947 Abortion Care Access Grant Program and Fund - Establishment

3/3/24

Maryland Senate
Finance Committee
3 East
Miller Senate Office Building
Annapolis, Maryland 21401

Dear Honorable Chair, Vice-Chair and Members of the Committee:

On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter, I am writing to express our support of **SB 947 Abortion Care Access Grant Program and Fund - Establishment**.

This bill would establish the Abortion Care Access Grant Program to provide grants to improve access to abortion care services for individuals in the State and establish the Abortion Care Access Grant Program Fund. Access to reproductive health care is a fundamental right and Maryland has worked to protect the health, well-being, and rights of Marylanders in relation to reproductive care.

For these reasons the Maryland Chesapeake Chapter of NAPNAP extends their support to On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter, I am writing to express our support of **SB 947 Abortion Care Access Grant Program and Fund - Establishment**.

This bill would establish the Abortion Care Access Grant Program to provide grants to improve access to abortion care services for individuals in the State and establish the Abortion Care Access Grant Program Fund. Access to reproductive health care is a fundamental right and Maryland has worked to protect the health, well-being, and rights of Marylanders in relation to reproductive care.

For these reasons the Maryland Chesapeake Chapter of NAPNAP extends their support to **HB 1412 Abortion Care Access Grant Program and Fund - Establishment**.

Abortion Care Access Grant Program and Fund - Establishment.

The pediatric advanced practice nurses of your state are grateful to you for your attention to these crucial issues. The members of Chesapeake Chapter of the National Association of Pediatric Nurse Practitioners memberships includes over 200 primary and acute care pediatric nurse practitioners who are committed to improving the health and advocating for Maryland's pediatric patients. If we can be of



National Association of
Pediatric Nurse PractitionersSM
MD: CHESAPEAKE

any further assistance, or if you have any questions, please do not hesitate to contact Lindsay J. Ward, the Chesapeake Chapter President at 410-507-3642 or MDChesNAPNAPLeg@outlook.com .

Sincerely,

Lindsay J. Ward CRNP, RN, IBCLC, MSN, BSN
Certified Registered Nurse Practitioner- Pediatric Primary Care
International Board-Certified Lactation Consultant
National Association of Pediatric Nurse Practitioners (NAPNAP)
Chesapeake Chapter President

Evgenia Ogordova

Evgenia Ogordova-DNP
National Association of Pediatric Nurse Practitioners (NAPNAP)
Chesapeake Chapter Legislative Chair

Abortion Care - Security - MDH and Insurance supp

Uploaded by: Lisae C Jordan

Position: FAV



Working to end sexual violence in Maryland

P.O. Box 8782
Silver Spring, MD 20907
Phone: 301-565-2277
Fax: 301-565-3619

For more information contact:
Lisae C. Jordan, Esquire
443-995-5544
mcasa.org

Testimony Supporting Senate Bill 947 **Lisae C. Jordan, Executive Director & Counsel** March 6, 2024

The Maryland Coalition Against Sexual Assault (MCASA) is a non-profit membership organization that includes the State's seventeen rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute (SALI), a statewide legal services provider for survivors of sexual assault. MCASA represents the unified voice and combined energy of all of its members working to eliminate sexual violence. MCASA urges the Finance and Budget & Taxation Committees to issue a favorable report on Senate Bill 947.

Senate Bill 947

Abortion Care Access Grant Program Fund– Safety & Security for Clinic Patients

This bill will establish the Abortion Care Access Grant Program Fund to improve access to abortion care services and protect patients seeking abortion care. These patients include survivors of rape who seek to terminate pregnancies caused by the sexual assault.

This bill is similar to SB975, however, it includes mandatory funding and financial support from health insurance carriers. Additionally, it would be administered by the Maryland Department of Health, an agency best suited to administering a fund supporting health care providers. For these reasons, MCASA prefers the provisions of this bill.

Access to abortion care is vital to survivors of rape.

The CDC reports that almost 3 million women in the U.S. experienced Rape-Related Pregnancy (RRP) during their lifetime. <https://www.cdc.gov/violenceprevention/sexualviolence/understanding-RRP-inUS.html>

A three year longitudinal study of rape-related pregnancy in the U.S., published in the American Journal of Obstetrics and Gynecology (1996, vol. 175, pp. 320-325), found:

5% of rape victims of reproductive age (age 12-45) became pregnant as a result of rape, with the majority of pregnancies in adolescents. Of these, half terminated the pregnancy.

Adolescents are more likely to become pregnant as result of rape because they are less likely to be on birth control or to seek emergency contraception following a rape. 29% of all forcible rapes occurred when the victim was less than 11 years old; 32% of all forcible rapes occurred when the victim was between the ages of 11 and 17.

Survivors of Reproductive Coercion Need Access to Abortion Care

Reproductive coercion is a form of intimate partner violence where a woman's partner tries to control reproductive decisions by preventing access to or tampering with birth control, or forcing sexual intercourse with the intent of causing pregnancy. Of women who were raped by an intimate partner, 30% experienced a form of reproductive coercion by the same partner. Specifically, about 20% reported that their partner had tried to get them pregnant when they did not want to or tried to stop them from using birth control. About 23% reported their partner refused to use a condom.

<https://www.cdc.gov/violenceprevention/sexualviolence/understanding-RRP-inUS.html>

These survivors need access to abortion care if they become pregnant and choose not to continue the pregnancy.

Senate Bill 947 will provide health care facilities with practical operational support needed to help ensure that the survivors and other patients seeking abortion care are safe.

**The Maryland Coalition Against Sexual Assault urges the
Finance and Budget & Taxation Committees to
report favorably on Senate Bill 947**



SB 947_MNADV_FAV.pdf

Uploaded by: Melanie Shapiro

Position: FAV



BILL NO: Senate Bill 947
TITLE: Abortion Care Access Grant Program and Fund - Establishment
COMMITTEE: Finance
HEARING DATE: March 6, 2024
POSITION: **SUPPORT**

The Maryland Network Against Domestic Violence (MNADV) is the state domestic violence coalition that brings together victim service providers, allied professionals, and concerned individuals for the common purpose of reducing intimate partner and family violence and its harmful effects on our citizens. **MNADV urges the Senate Finance Committee to issue a favorable report on SB 947.**

Between 6-22% of women terminate their pregnancies because they're in an abusive relationship.¹ One of the most common reasons why survivors struggle to leave their abuser is because they have children in common. When a survivor is denied an abortion, they remain tethered to their abusive partner, whereas survivors who choose to terminate an unwanted pregnancy have a reduced risk of experiencing violence over time.² Additionally, survivors frequently experience forms of abuse that put them at an increased risk for unintended pregnancy, such as birth control sabotage, sexual assault, and reproductive coercion.³ 2.1 million women in the U.S. have become pregnant as a result of rape by an intimate partner,⁴ and, in one study, 16% of survivors with rape-related pregnancies chose to get an abortion.⁵ Access to abortions can be a matter of life or death for survivors of domestic violence because experiencing abuse while pregnant puts survivors at a much higher risk of being killed by their abuser.⁶

This bill establishes the Abortion Care Access Grant Program under the Department of Health. The program would provide for grants and community-based organizations to support access to abortion care in Maryland. The grants could be used by abortion providers to ensure patients and provider staff are secure and that resources are available to support abortion care and wrap-around services.

For the above stated reasons, the **Maryland Network Against Domestic Violence urges a favorable report on SB 947.**

¹ <https://ncadv.org/blog/posts/ncadv-denounces-law-restricting-abortion-in-texas>

² <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4182793/>

³

<https://www.futureswithoutviolence.org/userfiles/file/HealthCare/Reproductive%20Health%20Guidelines.pdf>

⁴ <https://www.guttmacher.org/gpr/2016/07/understanding-intimate-partner-violence-sexual-and-reproductive-health-and-rights-issue>

⁵ <https://www.ojp.gov/pdffiles1/nij/grants/211678.pdf>

⁶ https://apps.who.int/iris/bitstream/handle/10665/70764/WHO_RHR_11.35_eng.pdf?sequence=1

For further information contact Melanie Shapiro • Public Policy Director • 301-852-3930 • mshapiro@mnadv.org

SB0947-FIN-FAV.pdf

Uploaded by: Nina Themelis

Position: FAV



BRANDON M. SCOTT
MAYOR

Office of Government Relations
88 State Circle
Annapolis, Maryland 21401

SB0947

March 6, 2024

TO: Members of the Senate Finance Committee
FROM: Nina Themelis, Director of Mayor's Office of Government Relations
RE: Senate Bill 947 – Abortion Care Access Grant Program and Fund - Establishment
POSITION: FAVORABLE

Chair Beidle, Vice Chair Klausmeier, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **supports** Senate Bill (SB) 947.

This bill will ensure access to safe abortion care by extending grant opportunities available to family planning programs to abortion clinic providers statewide. SB 947 will and support clinics in their ability to protect their patients, staff, and volunteers by funding security staffing and other security measures. This is important for ensuring that abortion is accessible, as accessibility is what transforms a right simply a theory to a reality. “There is no choice where there is no access.”ⁱ

Abortion services are one of many reproductive health services that abortion clinics provide; annual exams, contraception, testing and treatment for sexually transmitted diseases, education, as well as breast and cervical cancer screenings are often also available. In fact, reproductive health providers are often the primary source of care for some people, particularly women.ⁱⁱ Connecting a person to abortion care is a connection to healthcare and choice.

Following the June 2022 Dobbs v. Jackson Women's Health decision that ended Roe, fewer and fewer Americans can get abortion care in their own state due to an increase in bans and restrictions. Patients are traveling to states that border those with total abortion bans or those that begin early in gestation to receive abortion care. The proportion of patients traveling to other states to obtain an abortion has **nearly doubled** since 2020, reaching nearly one in five in the first half of 2023, compared to one in 10 in 2020.ⁱⁱⁱ

Maryland could easily become an island of safe, accessible abortion care. West Virginia has completely banned abortion with very limited exceptions.^{iv} While abortion remains legal in Pennsylvania and Virginia, it is restricted.^{v,vi} Political volatility could change the landscape of accessibility within these states, disconnecting more patients from the healthcare that they want and need. As Maryland strives to remain a safe haven for reproductive justice, it must sustain and safeguard comprehensive reproductive care. For these reasons, the BCA respectfully requests a **favorable** report on SB 947.

ⁱ SisterSong. (n.d.). Reproductive Justice. Retrieved from <https://www.sistersong.net/reproductive-justice/>

ⁱⁱ Hall, K. S., Harris, L. H., & Dalton, V. K. (2017). Women's Preferred Sources for Primary and Mental Health Care: Implications for Reproductive Health Providers. *Women's Health Issues*, 27(2), 196–205. <https://doi-org.proxy-hs.researchport.umd.edu/10.1016/j.whi.2016.09.014>

ⁱⁱⁱ Forouzan, K., Friedrich-Karnik, A., & Maddow-Zimet, I. (2023). The High Toll of US Abortion Bans: Nearly One in Five Patients Now Traveling Out of State for Abortion Care. Retrieved from <https://www.guttmacher.org/2023/12/high-toll-us-abortion-bans-nearly-one-five-patients-now-traveling-out-state-abortion-care>

^{iv} West Virginia Code Ch. 16 §16-2R-3. Retrieved from <https://code.wvlegislature.gov/16-2R-3/>

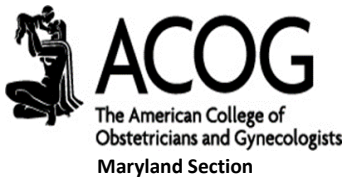
^v Virginia Code Title 18.2 Ch. 4 § 18.2-71. Retrieved from <https://law.lis.virginia.gov/vacodefull/title18.2/chapter4/article9/>

^{vi} Pennsylvania Code Title 18 Ch. 32. Retrieved from <https://www.legis.state.pa.us/cfdocs/legis/LI/consCheck.cfm?txtType=HTM&ttl=18&div=0&chpt=32>

SB0947_FAV_MDACOG, MDAAP_Abortion Care Access Gran

Uploaded by: Pam Kasemeyer

Position: FAV



TO: The Honorable Pamela Beidle, Chair
Members, Senate Finance Committee
The Honorable Ariana B. Kelly

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Christine K. Krone
410-244-7000

DATE: March 6, 2024

RE: **SUPPORT** – Senate Bill 947 – *Abortion Care Access Grant Program and Fund – Establishment*

On behalf of the Maryland Section of The American College of Obstetricians and Gynecologists and the Maryland Chapter of the American Academy of Pediatrics, we submit this **support** for Senate Bill 947.

Senate Bill 947 establishes the Abortion Care Access Grant Program with the Maryland Department of Health (MDH) to provide grants and resources to community-based organizations to support safe access to abortion care in Maryland. Funding will be available for enhancing the security of abortion provider facilities, providing resources to support abortion care access and wrap-around services, such as transportation for uninsured individuals or resources for individuals who are insured but cannot use their insurance for fear of family members receiving an explanation of benefits. MDH will also have the authority to develop additional programming to support access to abortion care in conjunction with stakeholders.

The program will be funded by unspent insurance premiums for abortion coverage. The Affordable Care Act requires insurers to charge \$12 per year for abortion coverage for all insured individuals. The insurers are prohibited by federal law from using the funds for other costs and are required to keep the monies in a separate account. These unspent funds will be transferred to MDH annually to ensure a sustainable funding source.

While Maryland has increased access to abortion care through the passage of several critical reproductive rights bills in previous sessions, access to abortion care remains challenging for many individuals, especially with respect to safety and privacy issues that create barriers to easy access. Senate Bill 947 will help address those access challenges. A favorable report is requested.

Testimony in support of SB0947.pdf

Uploaded by: Richard KAP Kaplowitz

Position: FAV

SB0947_RichardKaplowitz_FAV
3/06/2022

Richard Keith Kaplowitz
Frederick, MD 21703-7134

TESTIMONY ON SB#0947 - POSITION: FAVORABLE
Abortion Care Access Grant Program and Fund – Establishment

TO: Chair Beidle, Vice Chair Klausmeier and members of the Finance Committee
FROM: Richard Keith Kaplowitz

My name is Richard Kaplowitz. I am a resident of District 3. I am submitting this testimony in support of SB#0947, Abortion Care Access Grant Program and Fund – Establishment

This bill will help Governor Moore and the State of Maryland meet the goal established by the Governor in which abortion is treated as a health care issue with decisions made by a childbearing individual and their doctor.

“Access to reproductive health care is a fundamental right,” **said Gov. Moore.** “Today, we take another big step forward to protect the health, well-being, and rights of Marylanders – and we will keep working together to ensure that Maryland remains a safe haven for reproductive care.”¹

It was further noted that this bill will support the Moore-Miller administration’s efforts in creating more equity and inclusion leaving no one behind in accessing health care.

“In 2020, more than 60% of Maryland counties had no community-based clinics that provided abortion care. Expanding the pool of clinicians who provide abortion care—particularly in communities where abortions are more difficult to access and for patient populations who experience discrimination within the health care system—is critical to improving equitable access to care across the state.”²

This bill will create funding mechanisms that improve access to abortion care services and place the burden on the insurance carriers and not the taxpayers to equalize this access for all Marylanders requiring abortion care. The fund created will be a nonlapsing fund utilized for that purpose. It removes theocratic definitions of what access to abortion is available to all and replaces it with the recognition that abortion is health care, and everyone has the right to healthcare in this arena without access denial due to lack of financial resources.

I respectfully urge this committee to return a favorable report on SB0947.

¹ <https://governor.maryland.gov/news/press/pages/governor-moore-announces-156-million-investment-to-improve-abortion-care-access-statewide.aspx>

² Ibid

2024 ACNM SB 947 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance Committee

Bill: Senate Bill 947 – Abortion Care Access Grant Program and Fund-Establishment

Hearing Date: March 6, 2024

Position: Support

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) strongly supports *Senate Bill 947 – Abortion Care Access Grant Program and Fund*. The bill addresses the urgent need for sustainable resources to ensure abortion access in Maryland.

Abortion care has been excluded from most traditional public health programs. Federal law, known as the Hyde Amendment, prohibits federal funds from being used for most abortion services. Thus, there is no public health grant funding for abortion care in contrast for programs that exist for family planning, breast and cervical cancer screening, and prenatal care.

People who need support for abortion care and wrap-around services, such as travel, often turn to abortion funds, which are non-profit organizations committed to ensuring access to abortion care for everyone regardless of resources. However, abortion funds have reported that their resources are stretched beyond capacity.

Abortion providers also need support for more security. Violence has increased since the *Dobbs* decision. There has been a 900% increase in stalking and a 133% increase in bomb threats.ⁱ

We ask for a favorable report. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net.

ⁱ <https://prochoice.org/our-work/provider-security/2022-naf-violence-disruption/>

2024 WLCM SB 947 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV

Committee:	Senate Finance Committee
Bill:	Senate Bill 947 – Abortion Care Access Fund Act
Hearing Date:	March 8, 2024
Position:	Support

The Women's Law Center of Maryland strongly supports *Senate Bill 947 – Abortion Care Access Fund Act*. The bill establishes the Abortion Care Access Grant Program and identifies a sustainable funding source through unspent insurance premiums for abortion coverage.

The Need for Sustainable Resources for Abortion Access

Maryland protects the right to abortion care. However, the legal right to abortion care does not equate to access. People with limited resources still struggle with accessing abortion care. Unlike other kinds of women's health services – including family planning and cancer screening, there are no public health grant programs that support abortion care. This lack of resources is a legacy of the federal Hyde amendment which prevents the use of federal dollars to support abortion care.

SB 947 addresses this long-standing equity by creating a public health program to support abortion care for uninsured and underinsured people. The bill explicitly recognizes that even some fully insured individuals may need support, as some people cannot use their insurance for abortion care as their safety could be at risk if a family member received an explanation of benefits for the care.

The legislation also recognizes resources are needed to support travel and other wraparound services. This is an unfortunately reality, as so many people must travel to obtain abortion care because of bans in their home states. Despite the spike in contributions after the *Dobbs* decision, abortion funds are facing severe fiscal challenges because they are the primary source of support for this travel. ⁱ

Following the *Dobbs* decision, many states – including California, Massachusetts, New Jersey, New York, and Oregon - allocated emergency funding to address the immediate impact on abortion care access in their states. Given the present landscape, with 21 states banning abortion care, we need to shift from emergency actions to long-term, sustainable solutions to supporting abortion access.

An Urgent Call to Protect Maryland Abortion Providers and Patients

We are deeply concerned about the escalation of violence and threats to abortion providers and patients since the *Dobbs* decision. There has been over a 900% increase in reports of stalking by abortion providers in 2022.ⁱⁱ

The threat of violence has a chilling effect on abortion access in Maryland and other jurisdictions. Providers are afraid to offer services, leaving many communities without access to abortion care. Maryland residents are still forced to travel, and at many abortion provider sites, patients face intimidating lines of protestors. Patients do not face this kind of threat in accessing any other kind of health care service.

SB 947 offers critical support to abortion providers for improving security for their staff and patients. Funding may be used for grants for equipment, security staffing, and capital improvements.

Safeguarding Funding for Abortion Coverage

Under federal law requires, qualified health plans (also known as Exchange plans) must charge \$1 per month for abortion coverage for every insured individual. The insurers must keep track of the collection and expenditure of these premium dollars in a separate account, called a segregated account under Section 1303.

Under federal law, funds in segregated funds cannot be used for any purpose other than abortion care. This condition has been imposed to ensure that no federal funds are being used to support abortion coverage. Since the actuarial value of abortion coverage is far under \$1 per member per month, the segregated accounts have surpluses. According to annual reports by the Maryland Insurance Administration, insurers have an average of almost \$3 million in

unspent abortion premiums each year.ⁱⁱⁱ SB 947 taps into these unspent funds to provide a sustainable funding source for the Abortion Care Access fund.

Conclusion

We ask for a favorable report of SB 947. Please contact Robyn Elliott for any additional information at relliott@policypartners.net.

The Women’s Law Center of Maryland is a private, non-profit, legal services organization that serves as a leading voice for justice and fairness for women. It advocates for the rights of women through legal assistance to individuals and strategic initiatives to achieve systemic change, working to ensure physical safety, economic security, and bodily autonomy for women in Maryland.

ⁱ <https://abortionfunds.org/abortion-funds-post-roe/>

ⁱⁱ <https://prochoice.org/our-work/provider-security/2022-naf-violence-disruption/>

ⁱⁱⁱ <https://insurance.maryland.gov/Consumer/Appeals%20and%20Grievances%20Reports/Abortion-Care-Access-Act-Data-Report-MSAR-14161.pdf>

SB947 Sponsor Amendment.pdf

Uploaded by: Senator Ariana Kelly

Position: FAV



SB0947/363628/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

05 MAR 24
15:25:16

BY: Senator Kelly
(To be offered in the Finance Committee and the Budget and
Taxation Committee)

AMENDMENT TO SENATE BILL 947

(First Reading File Bill)

On page 4, after line 1, insert:

“(D) WITH ANY REMAINING FUNDS, THE SECRETARY SHALL PROVIDE
GRANTS TO SUPPORT:

(1) ABORTION CARE FOR UNINSURED INDIVIDUALS OR
INDIVIDUALS UNABLE TO USE THEIR INSURANCE DUE TO THE RISKS POSED BY
COMMUNICATION FROM INSURANCE CARRIERS REGARDING COVERAGE;

(2) TRAVEL AND RELATED COSTS FOR INDIVIDUALS WHO ARE
UNABLE TO ACCESS ABORTION CARE IN THEIR OWN COMMUNITIES; AND

(3) ANY OTHER INITIATIVE TO IMPROVE ACCESS TO ABORTION
CARE AS DETERMINED BY THE SECRETARY, IN CONSULTATION WITH NATIONAL,
STATE, AND LOCAL CONSUMER, HEALTH PROFESSIONAL, AND PUBLIC HEALTH
ORGANIZATIONS THAT HAVE A FOCUS ON INCREASING ACCESS TO CULTURALLY
COMPETENT ABORTION CARE.”.

Senator Kelly SB947 FAV Testimony.pdf

Uploaded by: Senator Ariana Kelly

Position: FAV



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

March 6th, 2024

**Testimony in Support of SB947
Abortion Care Access Grant Program and Fund - Establishment**

Dear Chair Beidle, Vice Chair Klausmeier, and Members of the Finance Committee:

In Maryland, we are facing a critical juncture to ensure the sustainability of abortion access. We are also facing a state fiscal crisis at the same time. HB 1412/SB 947 offers a solution – our state can tap into a sustainable funding source to support abortion access.

In 2022, I sponsored the *Abortion Care Access Act* with Senator Delores Kelley. This legislation included an important reporting requirement. Every year, the *Maryland Insurance Administration* must report on how many dollars are unspent in premiums collected for abortion coverage by Exchange plans (also known as qualified health plans). According to these reports there is an average of \$3 million in unspent funds every year. SB 947 proposes to use these unspent dollars to fund an annual appropriation for the Abortion Care Access Fund.

Why Do We Need A Fund To Support Abortion Access?

Background

In the first six months following the *Dobbs* decision, some states made emergency funding available to address the immediate crisis as abortion bans in over a dozen states went into effect. Governors and legislators in Maryland, Massachusetts, New Mexico, New York, and Oregon set aside funding. In Maryland, two local jurisdictions – Baltimore City and Montgomery County – also set aside funding.

Now, we are almost two years past the *Dobbs* decision, and the landscape for abortion access has only become more unpredictable. Every day brings new challenges for abortion providers and people seeking abortion care. Twenty-one states have banned abortion. Some bans have been blocked by state courts for now, but the uncertainty has a profound impact on the availability of services.

There are reports, complaints, and litigation in multiple states – including Florida, Idaho, Tennessee, and Texas – where abortion bans have resulted in women being denied emergency medical care. Recently, a court decision suddenly halted invitro fertilization in Alabama. Just in

the past week, a bill is advancing in Kentucky that would establish a right to child support from conception.

Affording Abortion Care

This environment makes it very difficult for health care practitioners, even in states like Maryland, to provide reproductive health care. Our reproductive healthcare providers are worried about the sustainability of their work.

1. While we have required abortion coverage for state-regulated and Medicaid plans, many people remain without abortion coverage in ERISA-exempt plans.
2. Many people are also afraid to use their insurance, as they will risk an explanation of benefits being mailed home and opened by a family member.

Increasing Violence Against Providers

Abortion providers and their patients have always faced threats and incidents of violence. Unlike any other health care service, people face unique safety risks when providing or obtaining abortion care. Since the *Dobbs* decision overturned *Roe v Wade*, these threats have increased sharply:

In 2022, abortion providers reported^[i]:

- 29% increase in assault and batteries
- 100% increase in burglaries
- 913% increase in stalking
- 133% increase in bomb threats.

These incidents most often occur in states that protect abortion access, as dozens of providers have closed in states that restrict abortion. The Department of Justice charged 26 people in 2022 for anti-abortion violence and threats, which was more than the previous three years combined^[ii].

Role of Nonprofit Abortion Funds

Maryland does not have any stop-gap programs that support abortion care. *Unlike other types of care – including behavioral health, primary care, and cancer screening and treatment – providers of abortion care have been historically excluded from public health grant programs because of federal rules.* People seeking abortion services often turn to abortion funds, which are nonprofit organizations, for support in covering services and travel costs. Abortion funds experienced a spike in donations following the *Dobbs* decision. However, those contributions have not been sustained at a continuous level – leaving abortion funds running out of resources.

Proposed Abortion Care Access Grant Program and Fund

This bill establishes the *Abortion Care Access Grant Program* under the *Department of Health*. The program would provide for grants and community-based organizations to support

access to abortion care in Maryland. The grants could be used to support abortion providers in ensuring patients and provider staff are secure by funding:

- Physical plant improvements
- Security services
- Costs of coordinating with law enforcement when appropriate
- Costs associated with abortion care and wrap-around services, such as travel, for people who are uninsured
- Resources would also be available to people who have insurance, but cannot use their insurance for fear that a partner or family member would receive an explanation of benefits
- Providing for other programming to support access to abortion care

Under this legislation the Secretary of Health could make the determination about appropriate uses of the funds in consultation with stakeholders to support access to abortion care and ensure care is culturally competent.

Where Does the Money in the Fund Come From?

To understand why insurers have so many unspent dollars for abortion coverage, we need to go back to the history of the *Affordable Care Act*. This federal legislation has expanded access to care more so than any other legislation in our lifetime. However, there is one hidden provision that was intended to restrict access to care.

Exchange plans are required to charge at least \$1 per member per month for abortion coverage, even though this premium far exceeds the actuarial value of abortion coverage. The Exchange plans are then required to keep these premium dollars in a separate account to only be used for abortion care. The accounting rules are intended to demonstrate that abortion coverage is not supported by advanced premium tax credits which are funded by the federal government. These requirements were designed to make abortion coverage expensive and difficult for carriers to manage.

With SB 947, Maryland would be the first state to create a sustainable funding source for abortion care access. The \$1 monthly premium requirement was intended to discourage abortion coverage and limit access. We cannot change the federal law. However, we can ensure that these funds are used for their intended purpose – supporting abortion care access.

Each year, the Maryland Insurance Commissioner would assess the dollar amount of those unspent funds from the prior year. Insurers would have the opportunity to work with the Insurance Commissioner in verifying the accuracy of the numbers. Then the Insurance Commission would order the transfer of 90% of the balance to the *Abortion Care Access Fund* under the Department of Health. We think the value of the unspent funds is approximately \$3 million a year.

Conclusion

We need a sustainable funding source to support access to abortion care in Maryland. While we have protected abortion access in our law and fully expect that Marylanders will approve reproductive freedom as a state constitutional right in November, we know that a legal right does not equate to access to care. ***SB 947 – Abortion Care Access Grant Program and Fund*** provides Maryland with the opportunity to create sustainable funding for abortion care access.

[i] <https://prochoice.org/our-work/provider-security/2022-naf-violence-disruption/>

[ii] <https://www.justice.gov/crt/recent-cases-violence-against-reproductive-health-care-providers>

Candace Love Testimony - Senate.pdf

Uploaded by: Sharon Blugis

Position: FAV



To: Finance Committee Members
Senator Pam Beidle, Chair
Senator Katherine Klausmeier, Vice Chair

From: Candace Love RN, MSN, FNP-BC
Reproductive Justice Maryland, Inc. Board Member

Re: SB0947 – Abortion Care Access Grant Program and Fund - Establishment
FAVORABLE

Date: March 4, 2024

I worked at Planned Parenthood as my part time job to support my mother and to pay for her caretakers as she had been diagnosed with cancer. I was offered the job as a Post Anesthesia Care Nurse/ Nurse Practitioner because I had 20 years' experience as a Post Anesthesia Care Nurse and worked as the Assistant Nurse Practitioner.

My job would be to provide care to women after their procedures including prescribing birth control of choice and education. I was proud of this job as women's health has always been an interest of mine. What I didn't know is that every Saturday I worked I would have to walk through a line of protesters.

When I arrived to work on Saturdays, I could see the protesters lined up on both sides of the sidewalk before the entrance of the clinic. The escorts for the patients were at the entrance waiting. As I walked through the protesters, they would shove pamphlets in my hand and tell me about the other options besides abortion. The closer I got to the door, the louder they became. Eventually, they figured out that I worked there and that is when the harassment began. Now when I walked through the protester's line they would shout, "WHY DO YOU WORK HERE -SHAME!" and I would curse to get them out of my way. Then Planned Parenthood decided that all employees should come through the back door and the doctors were now wearing bulletproof vests.

All I wanted was to provide health care to women after their procedure in a safe and supportive environment. Health Care is a basic human right and the health care providers should not be threatened as they deliver care. Thus, I hope you will vote **FAVORABLY** in support of SB0947.

SB947_ProChoiceMD_FAV.pdf

Uploaded by: Jennifer Mercer

Position: FWA

Pro-Choice Maryland Action

www.prochoicemd.net

info@prochoicemd.net



TESTIMONY IN SUPPORT OF SENATE BILL 947: Abortion Care Access Grant Program and Fund – Establishment

TO: Chair Pamela Beidle, Vice Chair Klausmeier, and Members of the Senate Finance Committee

FROM: Pro-Choice Maryland Action

DATE: March 6, 2024

Pro-Choice Maryland Action 501(c)(4) is an independent, nonprofit organization that develops and advocates for policies that protect reproductive freedom and that advance reproductive justice, including support and services for those who have children. Pro-Choice Maryland Action **supports Senate Bill 947 with amendments as an important support for abortion providers and patients.**

In the aftermath of *Dobbs*, anti-choice advocates have been successful in drastically reducing or eliminating access to abortion and other reproductive health care in many states, particularly in the Southeast. In Maryland we are rising to meet the challenge of providing access to sexual and reproductive health care to not only our own citizens, but people coming from all over the country. Just as people come here from all over seeking abortion care, so too are anti-choice advocates focusing their efforts here as they work to eliminate abortion access elsewhere. All people seeking sexual and reproductive health services deserve the dignity of safe passage into our health care facilities. At present, Maryland law prohibits the obstruction of clinic entrances, but does not provide any sort of affirmative support for security measures at clinics.

Unfortunately, the need for increased security measures at reproductive health care clinics has never been more apparent. In 2022, abortion providers in states protective of abortion rights reported a 29% increase in assault and batteries, a 100% increase in burglaries, a 913% increase in stalking, and a 133% increase in bomb threats as compared to 2021.¹ And in 2021, abortion providers overall reported a 600% increase in stalking, a 450% increase in blockades, a 13% increase in hoax devices or suspicious packages, a 129% increase in invasions, and a 128% increase in assault and battery as compared to 2020.² These staggering figures are borne out by the experiences of our clinic partners, who are under constant threat simply for providing health care services that are protected under Maryland law.

¹ <https://prochoice.org/our-work/provider-security/2022-naf-violence-disruption/>

² https://prochoice.org/wp-content/uploads/2021_NAF_VD_Stats_Final.pdf

Pro-Choice Maryland Action

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SB 947 will create a grant program for abortion providers through the Maryland Department of Health. Clinics will be able to use these funds to meet their specific needs, which may vary depending on the location and physical characteristics of each clinic. The grants will be funded through funds already set aside by health insurers due to the federal Affordable Care Act. The ACA mandates that each health insurer offering a plan that covers abortion services charge each subscriber a separate \$12 premium for this coverage. Under the ACA, the insurer must hold these funds in a separate account. Since the amount collected in funds far exceeds the cost of claims paid by insurers for abortion services, there is a remainder of funds available for the grants contemplated by SB 947.

While Pro-Choice Maryland is supportive of SB 947 generally, our clinic partners have reported concerns with § 13–5202(C)(2)(I), as this section states that clinics may use funds to collaborate with federal, state, and/or local law enforcement on security procedures. Specifically, they have found that law enforcement typically is not supportive of the clinic’s purpose and they have not been able to rely on law enforcement in the past when there is an incident at a clinic. Additionally, our clinic partners want communities of color to feel safe and welcome, and the presence of law enforcement would detract from this goal. Although we understand that the language in § 13–5202(C)(2)(I) is discretionary, we at Pro-Choice Maryland Action want to keep communication with providers clear and would therefore suggest an amendment to omit this language.

For the aforementioned reasons, **we urge a favorable report with amendments on Senate Bill 947.**

SB947_MDH_FWA

Uploaded by: Sarah Case-Herron

Position: FWA



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 6, 2024

The Honorable Pamela Beidle
Chair, Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 947 – Abortion Care Access Grant Program and Fund - Establishment – Letter of Support With Amendments

Dear Chair Beidle and Committee members:

The Maryland Department of Health (Department) respectfully submits this letter of support with amendments for Senate Bill (SB) 947 – Abortion Care Access Grant Program and Fund - Establishment. SB 947 establishes the Abortion Care Access Grant Program as a special, nonlapsing fund to provide grants to improve access to abortion care services for individuals in the State and requires that certain premium funds collected by health insurance carriers be used to provide coverage for abortion care services.

SB 947 would provide safety and security grants to abortion providers to provide protection to their patients, staff and volunteers. Violence against abortion providers is an ongoing and worsening issue. The Department of Justice tracks violence against abortion providers and, in 1998, established the National Task Force On Violence Against Reproductive Health Care Providers.¹ Since 1993, ten clinic employees have been murdered and several others dealt life-threatening injuries in violent incidents that were motivated by anti-abortion animus.¹ In addition, the National Abortion Federation’s 2022 Violence & Disruption Report found a sharp increase in violence in states protective of abortion rights as clinics in states that banned abortions closed following the overturning of *Roe v. Wade* in June 2022.²

The Department proposes an amendment to the bill to include language in the bill that states that the names and other identifying information of the grant recipients, including abortion clinics, providers, patients, and potential subrecipients, will not be released in order to protect abortion clinics, providers, and patients that are funded through this bill. Additionally, the Department is in discussions with the bill sponsors about the best agency or office to administer the bill.

¹ National Task Force On Violence Against Reproductive Health Care Providers. U.S. Department of Justice. May 2023. <https://www.justice.gov/crt/national-task-force-violence-against-reproductive-health-care-providers>

² Violence Against Abortion Providers Continues to Rise Following Roe Reversal, New Report Finds. National Abortion Federation. May 2023. <https://prochoice.org/violence-against-abortion-providers-continues-to-rise-following-roe-reversal-new-report-finds/>

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott", is enclosed within a faint, light-colored outline of the state of Maryland.

Laura Herrera Scott, M.D., M.P.H.
Secretary

AMENDMENT TO SENATE BILL 947
(First Reading File Bill)

AMENDMENT NO.1

On page 4, after line 24, insert “**(D) NAMES, ADDRESSES, ELECTRONIC MAIL ADDRESSES, TELEPHONE NUMBERS AND SIMILAR IDENTIFYING INFORMATION FROM APPLICATIONS FOR GRANTS UNDER THE FUND OR, AWARDEES UNDER THE FUND, ARE NOT SUBJECT TO DISCLOSURE UNDER THE MARYLAND PUBLIC INFORMATION ACT, STATE GOVT. 4-101 ET. SEQ.**”

Rationale: The National Abortion Federation’s 2022 Violence and Disruption Report found a sharp increase in violence in states protective towards abortion as clinics in ban states closed following the overturning of Roe v. Wade in June 2022. This amendment will protect reproductive health care clinics funded through this bill.

HB1412 & SB0947 HEARING 3-6 & 3-8.pdf

Uploaded by: Jennifer Mitchell

Position: UNF

When will pregnant women be offered a choice, in Maryland?

Jennifer Mitchell <jennim3@outlook.com>


Sun 3/3/2024 5:09 PM

To: Jennifer Mitchell <jennim3@outlook.com>; terry.baker@house.state.md.us <terry.baker@house.state.md.us>; christopher.bouchat@house.state.md.us <christopher.bouchat@house.state.md.us>; christopher.adams@house.state.md.us <christopher.adams@house.state.md.us>; lauren.arikan@house.state.md.us <lauren.arikan@house.state.md.us>; steven.arentz@house.state.md.us <steven.arentz@house.state.md.us>; carl.anderton@house.state.md.us <carl.anderton@house.state.md.us>; barrie.ciliberti@house.state.md.us <barrie.ciliberti@house.state.md.us>; mark.fisher@house.state.md.us <mark.fisher@house.state.md.us>; jeff.ghrist@house.state.md.us <jeff.ghrist@house.state.md.us>; wayne.hartman@house.state.md.us <wayne.hartman@house.state.md.us>; mike.griffith@house.state.md.us <mike.griffith@house.state.md.us>; robin.grammer@house.state.md.us <robin.grammer@house.state.md.us>; jim.hinebaugh@house.state.md.us <jim.hinebaugh@house.state.md.us>; kevin.hornberger@house.state.md.us <kevin.hornberger@house.state.md.us>; 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 2 attachments (2 MB)

SB0947 - Abortion Care Access Program and Fund - Establishment.pdf; HB1412 - Abortion Care Access Program and Fund - Establishment.pdf;

Greetings to ALL of our elected representatives & Governor Moore,

Do either one of these bills require the abortionist offer a pregnant woman a choice to hear her babies' heartbeat before she decides to murder and dismember it?

Ask yourselves would you want your abortionist to ask you if you wanted to hear your babies' heartbeat before YOU murder and dismember it?

I was young, dumb and stupid and let my abortionist murder and dismember my baby without knowing I had a CHOICE.

I suffer each and every day. Will YOU allow young women to suffer the same consequences?

Jennifer Mitchell
217 McKinley St.
Westernport, MD 21562

SB 947 Written Testimony_King.pdf

Uploaded by: Linda King

Position: UNF

SB 947

Senate Finance Committee

March 6, 2024

Unfavorable

My name is Linda King, I am the executive director of the Care Net Pregnancy Center of Frederick, Maryland. I am providing testimony in opposition to SB 947, and am asking this committee for an unfavorable report. We have served the community for over 40 years, providing support to pregnant women who would otherwise fall through the cracks.

Our center, located in the heart of historic downtown Frederick, has been the victim of repeated acts of violence.

Most recently, on Wednesday, May 4th, 2022, the staff arrived at the center to the disturbing scene of graffiti spray painted on the front of our building. Phrases such as: "Not A Real Clinic," "End Forced Motherhood," "Pro-Abortion Go 2 PP Instead," and "Abortion is a Right" were spray painted in black and red paint. This happened after the SCOTUS leak of a draft opinion regarding Roe V Wade. This shocking display of hatred and violence was frightening, but we continued to serve our clients that day.





With the added threat for violence if Roe V Wade was overturned, we quickly needed to take steps to enhance our security measures. In the days that followed the assault on our property, we added the following security measures to protect our clients, volunteers, and staff:

- Armed Guards for a 2 week period
- Installation of 6 security cameras
- Protective film over the door and windows of the lobby
- Installation of a panic arm on the entrance door
- Installation of ground floor window sensors

The cost of expanding security was significant. All of our services are provided free of charge and we are primarily funded through churches and individuals, receiving no government money. We are here to serve our clients and would vastly prefer not to have to siphon money away from our clients to enhance our security.

Unfortunately, this is not the first time our center has been vandalized. We were previously vandalized twice in 2014 in the same manner.

In March of 2014 a brick was thrown through the entrance door shattering the glass, and the same kind of graffiti was spray painted at the entrance, on our sign and various parts of the building.



In September 2014 we once again faced vandalism with more graffiti spray painted on the entrance area and side of our building.

In spite of these tactics, we will not be deterred from doing what we've been doing for 41 years in the Frederick community. Our doors remain open to women and men making a pregnancy decision. Whether they need limited medical services to confirm pregnancy, compassionate education about their options, or helpful classes on pregnancy, parenting, and life skills; we are here for the women, men and families in Frederick.

When people understand what we do, they understand that we are a valuable part of our community. Over the last five years, 100% of our clients have been satisfied with the care and service they received.

In closing, I am asking for an unfavorable vote on SB 947.

Sincerely,

Linda King

Executive Director

Care Net Pregnancy Center of Frederick

707 N. Market Street, Frederick, MD 21701

SB0947 (1).pdf

Uploaded by: Suzanne Price

Position: UNF

SB0947 is the solidification of Maryland being an **abortion destination state**. Shame on you, all of you who support this abomination happening in Maryland by ending the lives of human babies. Thanks for putting our state on the Angel of Death's top 10 list.

I do not want my tax dollars going towards this travesty. I grew up being 'pro-choice' and then I educated myself on the horrors of the abortion 'baby sacrifice' industry. If you understand the why, it is EVEN MORE horrifically sickening. Know that this killing spree has ZERO to do with "women's health", absolutely nothing, another farce.

FACT: Full term babies equal big time \$\$\$ product profit.

Next time you drink a Mug Root Beer or eat a Swedish Fish candy think about this statement. And when you buy products with 'natural flavors', think about this statement. Did you know aborted enzymes are used for food and drink flavoring? And yet another horror is Fauci's 'humanized mice', where did those human scalps come from?

Answer: BABIES

Please stop funding this death cult of murdering babies in the womb. No more support for murder.

Suzanne Price
AACo, MD

Aborted enzymes:

- <https://www.hli.org/resources/products-that-use-aborted-fetuses/>
- <https://beforeitsnews.com/alternative/2023/09/senomyx-aborted-fetus-cells-in-our-food-3799803.html>

Fauci's HUMANIZED BABY SCALP MICE:

Leaked Fauci emails from January '20 show Covid was engineered with gain of function using...wait for it...**HUMANIZED MICE**

- <https://www.barnhardt.biz/2021/12/29/barnhardt-podcast-163-moloch-vs-the-innocents/>

Fauci's agency has come under fire for bankrolling Frankenstein-style experiments where aborted babies' scalps and organs were stitched on to rodents.

- <https://www.the-sun.com/news/3353606/dr-anthony-fauci-agency-funded-aborted-baby-p-arts-experiments/>
- Fauci financed the creation of "humanized mice" using aborted baby parts, according to peer-reviewed journal [Scientific Reports](#).

<https://www.lifesitenews.com/news/canadian-university-publishes-studies-on-humanizing-mice-using-aborted-fetal-tissue/>

<https://thejewishvoice.com/2021/09/bombshell-foia-release-fauci-funded-construction-of-chimeric-coronaviruses-in-wuhan/>

- <https://nypost.com/2023/02/28/hubris-horseshoe-bats-humanized-mice-uncovering-faucis-covid-lies/>

And in case you aren't reading the words it was suggested I add a visual:





SB0947.pdf

Uploaded by: Suzanne Price

Position: UNF

SB0947 is the solidification of Maryland being an abortion destination state. Shame on you, All of you who support this abomination of Maryland by ending the lives of babies. Thanks for putting our state on the Angel of Death's top 10 list.

I do not want my tax dollars going towards this travesty. I grew up being 'pro-choice' and then I educated myself on the horrors of the abortion 'baby sacrifice' industry. If you understand why it is sickening. **Full term babies equal big time \$\$\$ product profit.**

Next time you drink a Mug Root Beer or eat a Swedish Fish think about this statement. And when you buy products with 'natural flavors', think about this statement. Or think about Fauci's 'humanized mice', where did those human scalps come from?

Answer: BABIES

Please stop funding this death cult of murdering babies in the womb.

Suzanne Price
AACo, MD

1/Leaked Fauci emails from January '20 show Covid was engineered with gain of function using... wait for it... HUMANIZED MICE

<https://www.barnhardt.biz/2021/12/29/barnhardt-podcast-163-moloch-vs-the-innocents/>

2/ Fauci's agency has come under fire for bankrolling Frankenstein-style experiments where aborted babies' scalps and organs were stitched on to rodents.

<https://www.the-sun.com/news/3353606/dr-anthony-fauci-agency-funded-aborted-baby-parts-experiments/>

3/ Fauci financed the creation of "humanized mice" using aborted baby parts, according to peer-reviewed journal [Scientific Reports](#).

4/

<https://www.lifesitenews.com/news/canadian-university-publishes-studies-on-humanizing-mice-using-aborted-fetal-tissue/>

5/

<https://thejewishvoice.com/2021/09/bombshell-foia-release-fauci-funded-construction-of-chimeric-coronaviruses-in-wuhan/>

6/

<https://thejewishvoice.com/2021/09/bombshell-foia-release-fauci-funded-construction-of-chimeric-coronaviruses-in-wuhan/>

DOCS-#234572-v1-SB_947_LOI_2024.pdf

Uploaded by: Matthew Celentano

Position: INFO



The **League** of Life
and Health Insurers
of Maryland

15 School Street, Suite 200
Annapolis, Maryland 21401
410-269-1554

March 6, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, Maryland 21401

Senate Bill 947 – Abortion Care Access Grant Program and Fund - Establishment

Dear Chair Beidle,

The League of Life and Health Insurers of Maryland, Inc. respectfully submits this *letter of information* relating to *Senate Bill 947 – Abortion Care Access Grant Program and Fund – Establishment*.

Senate Bill 947 establishes the Abortion Care Access Grant Program for the purpose of providing grants to improve access to abortion care services. Under the provisions of the bill, the grant program would receive funds, in part, from excess premium collected by a carrier in accordance with §1303(b)(2)(B) of the Patient Protection and Affordable Care Act (“ACA”), and from funds appropriated by the state budget, interest, and any other source accepted for benefit of the program. Senate Bill 947 would require a carrier to, in cases where the funds collected by a carrier in accordance with §1303(b)(2)(B) of the ACA exceed disbursements made by more than 10% in the previous 12-month period, use excess funds to support improving access to abortion care services in Maryland.

Since its enactment in 2010, Section 1303 of the ACA establishes several requirements with which Qualified Health Plan (“QHP”) issuers must comply in relation to coverage of certain abortion services. Notably, Section 1303 restricts the use of Federal funds from being used to pay for coverage by QHP’s of abortions for which payment would be inhibited by the Hyde Amendment. If a QHP seeks to cover abortion services, provisions of Section 1303 require the QHP to charge and collect at least \$1 per enrollee per month for such coverage, deposit the collected funds into a segregated account, and use only those segregated funds to pay for abortion services.

The provisions of Section 1303, specifically Section 1303(b)(2)(D), requires insurers to determine the amount of, and collect from its enrollees, a separate payment that equals the actuarially-determined cost of coverage for non-Hyde abortion services on an annual basis. Thus, if an insurer disburses funds for a non-Hyde abortion, it must draw those funds from the allocated amount residing in the covered individual’s segregated account. **According to a 2017 bulletin issued by the Center for Medicare and Medicaid**

Services, funds in a covered individual's segregated account *may not be used for any other purpose.*¹
Failure to comply with the requirements of Section 1303 may result in decertification or civil monetary penalties. League members appreciate the intent of Senate Bill 947, but we also must be aware of federal guidelines and our inability to operate outside of those parameters.

We also argue that this legislation could be considered a taking of the carrier's property. The Fifth Amendment of the Constitution prohibits a state from taking property "without just compensation," even if there is a compelling state interest, such as protecting access to abortion care. As noted in Armstrong v. United States (1960), "The Fifth Amendment's [Takings Clause] . . . was designed to bar Government from forcing some people alone to bear public burdens which, in all fairness and justice, should be borne by the public as a whole."

The League appreciates the opportunity to provide the aforementioned information on Senate Bill 947. We are happy to answer any questions and provide further information as the committee considers this piece of legislation.

Very truly yours,

A handwritten signature in black ink, appearing to read "Matthew Celentano", with a long horizontal line extending to the right.

Matthew Celentano
Executive Director

cc: Members, Senate Finance Committee

¹ Randy Pate, Director, Center for Consumer Information and Insurance Oversight, "CMS Bulletin Addressing Enforcement of Section 1303 of the Patient Protection and Affordable Care Act" (October 6, 2017).