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MID-ATLANTIC
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TO: The Honorable Shane E. Pendergrass, Chair
 Members, House Health and Government Operations Committee
 The Honorable Neil Parrott

FROM: Pamela Metz Kasemeyer
 J. Steven Wise
 Danna L. Kauffman
 Richard A. Tabuteau

DATE: March 13, 2020

RE: **OPPOSE** – House Bill 53 – *Public Health – Contraceptive Devices – Minors*

On behalf of the Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, the Mid-Atlantic Association of Community Health Centers, and the Maryland Section of the American College of Obstetricians and Gynecologists, we submit this letter of **opposition** for House Bill 53.

House Bill 53 prohibits a health care provider from inserting or implanting a long acting reversible contraceptive (LARC) unless the minor’s parent or guardian provides written authorization. Under current law a minor has the same capacity to consent to contraception other than sterilization and can consent to all forms of contraception which ensures that a provider is able to determine what form of contraception is most appropriate for an individual.

Minor consent for health care services has generally been granted for services that a minor may be ashamed, scared, or otherwise unlikely to discuss with a parent or guardian. The current minor consent law is discretionary for a provider who has the authority to determine whether or not the minor has the capacity to understand what is being consented to and the implications of consent. Further, even if a minor consents to care, a health care provider has the authority to discuss the care with the parent or guardian if the provider believes it is in the best interest of the child.

LARCs are amongst the most effective forms of birth control. These include the intrauterine device and implant, both of which are 20 times more effective than pills or the shot. Not only are they effective for many years, they are safe, easily reversible, and do not affect a woman’s ability to get pregnant in the future. LARCs are proven to be much more effective than oral contraception which requires a teen to be compliant with taking medication daily. The positive impact of LARCs as the preferable method of contraception and their positive impact on young women’s lives is well established in the medical literature. In studies where teens had unobstructed access to these most effective methods, the teen pregnancy rate, birth and abortion rates all decreased by more than 75%.

House Bill 53 dramatically undermines the objectives of current law which provide minors the right to consent to all forms of contraception. There is no basis for excluding LARCs from the current consent law and will result in significant negative consequences for those minors seeking contraception. An unfavorable report is requested.

For more information call:

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