

Planned Parenthood of Maryland

Dr. Kyle Bukowski Statement in Support of HB 808 March 8, 2023

Planned Parenthood of Maryland clinicians provide Marylanders and anyone coming to Maryland a full range of reproductive health services—birth control, sexually-transmitted infection testing and treatment, cancer screenings and abortion services. In the current political environment, the provision of abortion, a health service that is legally protected in Maryland, puts clinicians at risk for civil, criminal, and professional penalties for treating patients coming to Maryland from localities where abortion bans are in place. HB 808 provides a layer of protection from these adverse actions, which is critical to recruiting and retaining healthcare providers and ensuring access to high-quality reproductive health care. Particularly now.

In November of 2022, anti-abortion organizations and activists filed a meritless lawsuit in a Texas federal court against the Food and Drug Administration (FDA) seeking to roll back its approval of mifepristone- a safe and effective drug commonly prescribed as part of the regimen used for medication abortions. This is an important case for providers because it has the capacity to: 1) change the medication regimen and increases the length of time needed to provide and complete a medication abortion; 2) demonstrates how easily bad actors in states hostile to sexual and reproductive health can impose their activist will on medical care that is legal in Maryland and supported by decades of rigorous safety data; and finally, 3) increases the risk to providers if patients take their legally prescribed medications across state lines.

SB 859 states unequivocally that Maryland will not support out-of-state investigations about a person's legal reproductive health decisions. We are seeing an onslaught of laws and lawsuits aimed at intimidating people from taking ownership of their own reproductive decisions. Sustained and organized campaigns are seeking to punish those that assist people in exercising their bodily autonomy. This legislation serves as an opportunity for Maryland to give a resounding response-we will not tolerate bullying our residents, our care providers, or our support networks. By not processing subpoenas, refusing to provide state agencies' records, refusing law enforcement cooperation, and ensuring Maryland health profession boards will not impose sanctions based on out-of-state complaints this bill allows Maryland's healthcare network to shield itself from threats and intimidation tactics of less progressive states.

Thank you for your consideration, and I urge a favorable report on HB 808.

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