



Opposition Statement SB944

Nonprescription Drugs and Devices - Provision by Registered Nurses
and Sale of Contraceptives through Automatic Devices
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We oppose SB944

On behalf of our 200,000 followers across the state, we respectfully object to SB944. The 2022 session of the Maryland General Assembly significantly lowered the standard of care for women and girls with The Abortion Care Access Act by removing the physician requirement for medical and surgical abortions. The Food and Drug Administration (FDA) has approved for over-the-counter (OTC) use emergency contraception pills (morning after pills) and now the Opill, a daily contraceptive pill. Both contraceptive pills are abortifacient in that they prevent implantation of a baby. Maryland Right to Life opposes this further promotion of abortion and the use of taxpayer funds for that end. Maryland Right to Life requests an amendment excluding abortion purposes from this bill.

The Opill is newly approved by the FDA for OTC use. One pill contains 0.75mg norgestrel which is to be taken daily at the same time each day. This daily pill works by preventing ovulation, preventing the sperm from reaching the egg, or **by thinning the uterine lining to prevent implantation of a fertilized egg in the womb (abortion)**. Risks include liver problems, ectopic pregnancy and severe allergic reaction. (mayoclinic.org)

Emergency contraception pills are taken as a one-dose pill after sex. **The emergency contraception pill contains 1.5mg norgestrel, which is 20 times the dose of the daily Opill taken all in one dose**. It is important to note that girls could take this high dose hormone regularly which is not how it is meant to be used and could cause serious health problems. This pill also works by preventing ovulation or **preventing implantation of a fertilized egg in the uterus (abortion)**. Risks include severe bleeding and ectopic pregnancy. The likelihood of those risks increase if this high-dose hormone is taken often, like after each sexual encounter. (mayoclinic.org)

This bill along with many others are treating abortion drugs as though they are without serious side effects. These hormones being placed in vending machines like candy and being handed out at every venue possible leaves the women and girls to believe they will suffer no harm. Maryland needs to do better to inform the women and girls of Maryland so they can make informed decisions about their reproductive healthcare.

Maryland is a State Sponsor of Abortion. The Abortion Care Access Act provides that taxpayer funds are used to pay for abortion through Medicaid and private health insurance providers. This legislation will further use taxpayer funds to provide abortifacient birth control to the general public.

Maryland is one of only 4 states that forces taxpayer funding of abortion. Maryland taxpayers are forced to subsidize the abortion industry through direct Maryland Medicaid reimbursements to abortion providers, through various state grants and contracts, and through pass-through funding in various state programs. Health insurance carriers are required to provide reproductive health coverage to participate with the Maryland Health Choice program.



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Americans oppose taxpayer funding of abortion. Taxpayers should not be forced to fund elective abortions, which make up the vast majority of abortions committed in Maryland. Polls consistently show that 60% of Americans, pro-life and pro-choice, oppose taxpayer funding of abortion.

Funding restrictions are constitutional. The Supreme Court of the United States has ruled that the government may distinguish between abortion and other procedures in funding decisions -- noting that "*no other procedure involves the purposeful termination of a potential life*", and held that there is "*no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds.*"

Maryland Right to Life requests an amendment excluding abortion purposes from this bill. Without it, we ask for an unfavorable report on SB944.