UNFAVORABLE STATEMENT

HB1617

Public Health - Health Innovation Zones - Establishment

Laura Bogley, JD
Executive Director
Maryland Right to Life, Inc.

On behalf of our Board of Directors and many chapters across the state, we respectfully request your amendment to exclude abortion funding or urge your unfavorable report. This bill admirably seeks to establish "Health Innovation Zones" to address documented health disparities and poor health outcomes. But as long as the State of Maryland misclassifies abortion violence as "healthcare", the abortion industry will continue to compete against legitimate maternal and prenatal health services, and disproportionately harm Black women and infants.

Abortion violence is the leading cause of death among Black Americans and is the most demographically consequential occurrence for the Black community, contributing to the drastically disproportionate maternal and fetal health complications.

Women seeking reproductive healthcare have a right to quality obstetrical and prenatal care provided by a licensed obstetrician. Induced abortion is not healthcare, is never medically necessary and confers no "public health" benefit to the people of Maryland.

By giving the abortion industry a monopoly over women's reproductive health for 5 decades, the State of Maryland has failed to meet the needs of pregnant women and families *as demonstrated by the state's poor maternal and fetal health statistics.*

The State has an obligation to correct these health disparities by prioritizing public funding for legitimate medical services including quality prenatal and maternal healthcare, particularly in minority communities historically targeted for extermination by the abortion industry.

PRIORITIZE FUNDING FOR HEALTHY CHILDBIRTH

State funding for abortion on demand with taxpayer funds is in direct conflict with the will of the people. 54% percent of those surveyed in a January 2026 Marist poll say they oppose taxpayer funding of abortion. There is longstanding bi-partisan unity on prohibiting the use of taxpayer funding for abortion. But Maryland is one of only 4 states that forces taxpayers to fund abortions.

81% of Americans polled favor laws that protect both the lives of women and unborn children. Public funds should not be *diverted from* but *prioritized for* health and family planning services which have the objective of saving the lives of both mothers and children, including programs for improving maternal health and birth and delivery outcomes, well baby care, parenting classes, foster care reform and affordable adoption programs.

Taxpayers should not be forced to fund elective abortions, and the intentional killing of a fetal human being through abortion is never medically necessary. The bill also can serve as a pass-through mechanism for the use of public funds to benefit the abortion industry. Under the concept of **"fungibility",** any public funds used to offset the costs of doing business of the abortion industry, i.e. training workforce, is to be considered a public abortion subsidy.

ABORTION IS NOT HEALTHCARE

Abortion is not healthcare. It is violence and brutality that ends the lives of unborn children through suction, dismemberment, chemical poisoning or starvation. Abortion disproportionately kills Black babies. The fact that 85% of OB/GYNs in a representative national survey refuse to commit induced abortions is glaring evidence that abortion is not an essential part of women's healthcare.

The sole purpose of induced abortion is to end the life of a preborn patient. Doctors regularly treat serious pregnancy complications without intentionally killing a preborn child. This includes being able to perform maternal-fetal separations when a woman's life is endangered by a pregnancy complication – something that is already allowed by EMTALA as well as by every state law in the country.

No law in any state prohibits medical intervention to treat miscarriage, ectopic pregnancy or to save the physical life of the mother.

ABORTION HAS GENOCIDAL EFFECT ON BLACK AMERICANS

Abortion has reached epidemic proportions among people of color with half of all pregnancies of Black women ending in abortion. Abortion has a disproportionate impact on Black Americans who have long been targeted by the abortion industry for eugenics purposes. Even today, 73% of abortion clinics are located in Minority communities.

As a result, Black women suffer greater rates of miscarriage, preterm births and fetal and maternal mortality. Abortion is now the leading cause of death of Black Americans, more than gun violence and all other causes combined. Since legalization in 1973, the government has sanctioned the killing of over 24 million Black children.

Abortion is the greatest human and civil rights abuse of our time and as a civilized people we cannot continue to justify or subsidize this genocide. For more information please see http://www.BlackGenocide.org.

MDH IS FAILING PREGNANT WOMEN

The Maryland Department of Health has consistently failed to meet the needs of pregnant women and families in Maryland and appropriations should be withheld until the Department provides the annual report to the Centers for Disease Control to measure the number of abortions committed each year in Maryland, abortion reasons, funding sources and related health complications or injuries.

- The Department has routinely failed to enforce existing state health and safety regulations of abortion clinics, even after two women were near fatally injured in botched abortions.
- The Department has routinely failed to provide women with information and access to abortion alternatives, including the Maryland Safe Haven Program (see Department of Human Services), affordable adoption programs or referral to quality prenatal care and family planning services that do not promote abortion.
- The Department has demonstrated systemic bias in favor of abortion providers, engaging in active partnerships with Planned Parenthood and other abortion organizations to develop and implement public programs, curriculum and training. In doing so the Department is failing to provide medically accurate information on pregnancy and abortion.
- The Department systemically discriminates against any reproductive health and education providers who are unwilling to promote abortion and in doing so, suppresses pro-life speech and action in community-based programs and public education.
- The Department fails to collect, aggregate and report data about abortion and the correlation between abortion and maternal mortality, maternal injury, subsequent pre-term birth, miscarriage and infertility.
- The Department is failing to protect the Constitutionally-guaranteed rights of freedom of conscience and religion for health care workers, contributing to the scarcity of medical professions and personnel in Maryland.
- The Department is failing to protect women and girls from sexual abuse and sex trafficking by waiving reporting requirements for abortionists, waiving mandatory reporter requirements for abortionists, and failing to regulate abortion practices.

REQUEST FOR AMENDMENT

Without your amendment, this bill will necessarily apply to abortion practices and contribute to the enrichment of the abortion industry. Under the concept of **"fungibility",** any public funds used to offset the costs of doing business of the abortion industry, i.e. training workforce, is to be considered a public abortion subsidy.

We respectfully request the following amendment to preserve the otherwise legitimate purposes of this bill by excluding its application to abortion, abortion workers, training and certification:

"NOTHING IN THIS [ACT, SECTION, CHAPTER] SHALL BE CONSTRUED TO AUTHORIZE THE USE OF STATE TAXPAYER FUNDS, INCLUDING THOSE APPROPRIATED BY STATE LAW OR IN ANY TRUST FUND TO WHICH FUNDS ARE AUTHORIZED OR APPROPRIATED BY STATE LAW, FOR ABORTION PROMOTION, TRAINING, OR CERTIFICATION, OR FOR THE DISTRIBUTION OF ABORTION INDUCING DRUGS, OR FOR THE PROCUREMENT, COMPENSATION, SUBSIDIZATION, REIMBURSEMENT OR OTHER FINANCIAL SUPPORT OF ABORTION PROVIDERS, THEIR AFFILIATES OR THEIR FACILITIES."

IN CONCLUSION

For these reasons, we respectfully ask you to amend this bill or issue an unfavorable report. We urge you to vote against any measure to allocate public funds to abortion providers, services, education, training or certification.

We appeal to you to prioritize the state's interest in human life and restore to all people, born and preborn, our natural and Constitutional rights to life, liberty, freedom of speech and religion.