Chair Eklund and members of the Committee, thank you for the opportunity to provide written-only interested party testimony regarding SB 308.

My name is Maria Matzik and I am a Proud Disabled Woman, Disability Rights Advocate and Consumer on the Ohio Home Care Program. I have Spinal Muscular Atrophy Type II. I use the assistance of a ventilator for breathing and I have a tracheostomy. I use a reclining motorized wheelchair for mobility. In addition, I have a job, a wonderful partner, beautiful cats, great friends, own an accessible home, own a wheelchair accessible vehicle, vote, and pay taxes.

I am submitting this testimony to address concerns with SB 308 and its impact on people with disabilities in Ohio. I am here today to respectfully ask that you do not support the passage of SB 308. I hope that you will hear me and find this direction illogical and unsafe for thousands of Ohioans who are dependent upon life sustaining care.

SB 308 will disproportionately impact people with disabilities receiving care in hospitals, congregate care settings, and in home and community-based settings.

Evidence is proving that individuals with disabilities, especially people of color, are disproportionately affected by this virus and pandemic. As the world responds to this pandemic, we must assure that measures are taken to fully include the unique and specific needs of our community.

If this bill passes healthcare professionals will be exempt from legal action and professional licensure discipline for all negligence during this pandemic. Individuals with disabilities could face unjustified rationing of care as a result of this legislation and die for no other reason than they have a disability and are viewed as having no quality to their life. This bill will prohibit individuals from taking legal action if a provider does not treat an individual for COVID-19

I recently read an article titled:

How rationing resources may impact your health care

WASHINGTON (SBG)
Wednesday, April 15th 2020
This particular paragraph concerned me at the time, but in light of this potential Bill I am now terrified for my life:

In some locations, Lerner told us, the patient's status as a health care professional is also up for consideration when and if rationing decisions are made. "If you save their life and they go back to work, they will save more lives. So that's one of those ethical judgments I think individual institutions will probably make on their own," Lerner said. "We would say who is most likely going to get off a ventilator, be well enough and live for a long period of time afterward. That would be the person at the top of the list."

Under this scenario my life is dispensable because I could not, nor will I ever, get off the ventilator. If quality of life will now be based on whether or not an individual can live and function without a ventilator, many of us have been handed a death sentence.

**SB 308 has a disparate impact on employees with disabilities.**

This bill will allow for businesses, and professionals, to be negligent in taking the proper precautions to protect their employees, patients and clients. People with disabilities are more likely to contract COVID-19, especially with the stay-at-home order being lifted and the communities reopening. It is absolutely essential that businesses, and professionals, follow the recommended safety guidelines and that individuals have a right to seek legal action when that does not occur.

Medical discrimination, and the fear and anxiety associated with this, is outlined in an article that I read in the American Psychological Association:

**How COVID-19 impacts people with disabilities**

Research shows people with disabilities are at risk for mental health problems.

Date created: May 6, 2020

Who is at risk?

*It is important not to conflate health status with disability. Many people with disabilities are healthy. However, some have underlying or secondary aspects of their disability, like suppressed immune systems or respiratory concerns, that COVID-19 could worsen. Some have underlying acute health conditions, such as skin breakdown or urinary tract infection, which increase risk of severe symptoms associated with COVID-19. Being classified as “high risk” in the current pandemic can cause additional stress and fears. The social gradient of risk may influence policies and decision-making related to access to care or treatments. Medical discrimination is always a dangerous reality for many people with disabilities in need of healthcare. Many disabled adults (60% report being “very concerned” in a recent survey - National Disability Institute, 2020) and disability*
rights organizations are anxious about how these policies may prevent them from getting equitable and fair treatment.

Most people view “disability” as an “illness” or a “condition”. It is just a natural part of life for most of us. I do not have to think about what my needs are – I know my needs just like you know yours. The difference is that you perform your own tasks and I cannot. I have to think about who will perform my tasks and how.

People with disabilities are resilient individuals with a passion for life and a drive to succeed. Most non-disabled individuals will never, and could never, endure the oppression, segregation, discrimination, humiliation, ignorance and pain that individuals with disabilities face throughout their entire lives. We are constantly having to prove our worth and value to a society that only values wealth, beauty and success. It is time to fight like our life is in danger, because it is!

Thank you for your time and consideration regarding SB 308.

Respectfully Submitted,

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