

## Written Testimony

### **Elizabeth Menduni HB 23 – Six-Week Abortion Ban Opponent Testimony Ohio Senate Health, Human Services, and Medicaid Committee February 26, 2019**

Chairman Burke, Vice-Chair Huffman, Ranking Member Antonio, and members of the Health, Human Services and Medicaid Committee, thank you for allowing me the opportunity to provide written testimony on Senate Bill 23, the Heartbeat Bill.

I am a concerned citizen of the state of Ohio. I am a woman and a mother who has recently went through pregnancy and a birth. I have invested interest because I am a woman who will be directly affected by this bill. The proposed Senate Bill 23 will increase medicaid costs, increase infant mortality, and, most importantly, endanger the lives of women in the state of Ohio.

This bill claims that the state has legitimate interest in protecting the health of the woman, but S.B.23 will have the opposite effect as an increase in births will cause a rise in the state's maternal mortality rate and the death of Ohio women.

In the United States, more women die due to complications related to pregnancy or childbirth than women in any other country in the developed world.<sup>1</sup> According to America's Health Rankings.org, Ohio is ranked 29th in 2018 among the states in terms of Maternal mortality.<sup>2</sup> The revision to Sec. 2317.56 to remove lines 25 - 29 and the definition of "Medical necessity" will require women to proceed with pregnancies against the advisement of her physician. The state is obligated to protect its citizens, but should S.B.23 be passed, there will be an increase in death among Ohio's mothers, daughters, nieces, aunts, and spouses.

Maternal mortality and morbidity rates in the United States are on the rise. According to a report published in August 2018, the Centers for Disease Control and Prevention (CDC) and the Pregnancy Risk Assessment Monitoring System (PRAMS) cited the following:

Maternal mortality and morbidity rates have also been increasing. The number of reported pregnancy-related deaths in the United States rose from 7.2 per 100,000 live births in 1987 to 17.3 per 100,000 live births in 2013. Moreover, the number of women presenting at delivery with 1 or more chronic conditions rose from 66.9 per

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<sup>1</sup> "U.S. Has The Worst Rate of Maternal Deaths In The Developed World ...." 12 May. 2017, <https://www.npr.org/2017/05/12/528098789/u-s-has-the-worst-rate-of-maternal-deaths-in-the-developed-world>. Accessed 24 Feb. 2019.

<sup>2</sup> "Explore Maternal Mortality in the United States | 2018 Health of ...." [https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/maternal\\_mortality](https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/maternal_mortality). Accessed 24 Feb. 2019.

1,000 delivery hospitalizations in 2005–2006 to 91.8 per 1,000 delivery hospitalizations in 2013–2014.<sup>3</sup>

Severe maternal morbidity (SMM) includes unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a woman's health. SMM has been steadily increasing in recent years and affected more than 50,000 women in the United States in 2014.<sup>4</sup> Ohio's SMM rate for 2013 was 143 per 10,000 births.<sup>5</sup>

SMM is increasing. The CDC cites changes in the overall health of the population of women giving birth may be contributing to increases in complications. For example, increases in maternal age, pre-pregnancy obesity, preexisting chronic medical conditions, and cesarean delivery have been documented.<sup>6</sup> Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States.<sup>7</sup> They are also leading drivers of the nation's \$3.3 trillion in annual health care costs.<sup>8</sup>

An increase of births will result in an increase of poor outcomes for women giving birth. S.B.23 goes against the Ohio Department of Health Pregnancy-Associated Mortality Review and Bureau of Vital Statistics initiative to prevent and reduce maternal morbidity and mortality in Ohio. The bureau lists the following reasons for pregnancy-related deaths in Ohio from 2008-2014 as caused by cardiovascular diseases non-cardiovascular diseases, infection or sepsis, hemorrhage, cardiomyopathy, thrombotic pulmonary embolism, cerebrovascular accidents, hypertensive disorders of pregnancy, amniotic fluid embolism, and anesthesia complications.<sup>9</sup>

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<sup>3</sup> "PRAMS: Overview of Design and Methodology - CDC." 23 Aug. 2018, <https://www.cdc.gov/prams/pdf/methodology/PRAMS-Design-Methodology-508.pdf>. Accessed 24 Feb. 2019.

<sup>4</sup> "Severe Maternal Morbidity in the United States | Pregnancy ... - CDC." <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/severematernalmorbidity.html>. Accessed 24 Feb. 2019.

<sup>5</sup> "Severe Maternal Morbidity - Ohio Department of Health" [https://odh.ohio.gov/wps/wcm/connect/gov/db0ab299-4e0d-411e-a107-2db1f555106a/SMM-Factsheet.pdf?MOD=AJPERES&CONVERT\\_TO=url&CACHEID=ROOTWORKSPACE.Z18\\_M1HGGIK0N0JO00QO9DDDDM3000-db0ab299-4e0d-411e-a107-2db1f555106a-mrVyhBB](https://odh.ohio.gov/wps/wcm/connect/gov/db0ab299-4e0d-411e-a107-2db1f555106a/SMM-Factsheet.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-db0ab299-4e0d-411e-a107-2db1f555106a-mrVyhBB) Accessed 24 Feb. 2019.

<sup>6</sup> "Severe Maternal Morbidity in the United States | Pregnancy ... - CDC." <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/severematernalmorbidity.html>. Accessed 24 Feb. 2019.

<sup>7</sup> "About Chronic Diseases | CDC." 19 Nov. 2018, <https://www.cdc.gov/chronicdisease/about/index.htm>. Accessed 24 Feb. 2019.

<sup>8</sup> "About Chronic Diseases | CDC." 19 Nov. 2018, <https://www.cdc.gov/chronicdisease/about/index.htm>. Accessed 24 Feb. 2019.

<sup>9</sup> "Pregnancy Associated Mortality Review (PAMR) Data." <https://odh.ohio.gov/wps/portal/gov/odh/knownour-programs/pregnancy-associated-mortality-review/resources/PAMR-Data>. Accessed 24 Feb. 2019.

S.B.23 has been called a matter of the heart, but the heartbeat we should be focusing on is that of the pregnant mother. 40.9% of maternal deaths in Ohio were listed as 'Cardiovascular Conditions', 'Embolisms, and 'Hypertensive Disorders'.<sup>10</sup>

Heart Disease is the number one cause of death among women in the United States.<sup>11</sup> The hearts of pregnant women are beating for two. Pregnancy, in general, causes the heart to work harder due to increased blood volume. During delivery, the body experiences rapid changes in blood flow that can put stress on the heart. Women with preexisting heart conditions are at higher risk for life-threatening complications.<sup>12</sup> And women who experience pre-pregnancy obesity, are at risk of cardiovascular disease.<sup>13</sup> In 2012, 2014, and 2015, Ohio participated in PRAMS to track the prevalence of selected maternal and child health indicators for Ohio. This data showed a rise in women classified as obese.<sup>14</sup>

In the U.S., one in three babies are delivered via Cesarean section.<sup>15</sup> This major surgery includes risks to the baby and the mother including life threatening postpartum hemorrhaging and infection.<sup>16</sup> Once a woman delivers via cesarean, there is a very low probability (about 10%) of a subsequent vaginal delivery. Women of advanced maternal age, 40 and older were more than twice as likely to deliver by cesarean as women under age 20.<sup>17</sup> Pregnant women of advanced maternal age, 35 and older, also face a higher maternal mortality rate.<sup>18</sup>

The same PRAMS report showed a rise in medicaid participants with 29.4% of the pregnant women in the study being on Medicaid in 2015.<sup>19</sup> While the fiscal notice of SB23 highlights the medicaid cost of abortions will go down, the CDC cites the consequences of the increasing births with SMM prevalence, in addition to the health effects for the woman, are wide-ranging and include increased medical costs and longer hospitalization stays. Tracking and understanding patterns of SMM, along with developing and carrying out interventions to

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<sup>10</sup> "Pregnancy Associated Mortality Review (PAMR) Data." <https://odh.ohio.gov/wps/portal/gov/odh/known-our-programs/pregnancy-associated-mortality-review/resources/PAMR-Data>. Accessed 24 Feb. 2019.

<sup>11</sup> "Heart Disease Facts - CDC." <https://www.cdc.gov/heartdisease/facts.htm>. Accessed 24 Feb. 2019.

<sup>12</sup> "Severe Maternal Morbidity - Ohio Department of Health" [https://odh.ohio.gov/wps/wcm/connect/gov/db0ab299-4e0d-411e-a107-2db1f555106a/SMM-Factsheet.pdf?MOD=AJPERES&CONVERT\\_TO=url&CACHEID=ROOTWORKSPACE.Z18\\_M1HGGIK0N0JO00QO9DDDDM3000-db0ab299-4e0d-411e-a107-2db1f555106a-mrVyhBB](https://odh.ohio.gov/wps/wcm/connect/gov/db0ab299-4e0d-411e-a107-2db1f555106a/SMM-Factsheet.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-db0ab299-4e0d-411e-a107-2db1f555106a-mrVyhBB) Accessed 24 Feb. 2019.

<sup>13</sup> "Obesity and cardiovascular diseases. - NCBI." 1 Feb. 2017, <https://www.ncbi.nlm.nih.gov/pubmed/28150485>. Accessed 24 Feb. 2019.

<sup>14</sup> "Pregnancy Risk Assessment Monitoring System (PRAMS ... - CDC." <https://www.cdc.gov/prams/pramstat/pdfs/mch-indicators/Ohio-508.pdf>. Accessed 24 Feb. 2019.

<sup>15</sup> "FastStats - Births - Method of Delivery - CDC." 31 Mar. 2017, <https://www.cdc.gov/nchs/fastats/delivery.htm>. Accessed 24 Feb. 2019.

<sup>16</sup> "C-section - Mayo Clinic." 9 Jun. 2018, <https://www.mayoclinic.org/tests-procedures/c-section/about/pac-20393655>. Accessed 24 Feb. 2019.

<sup>17</sup> "Births: Final Data for 2015 - CDC." 5 Jan. 2017, [https://www.cdc.gov/nchs/data/nvsr/nvsr66/nvsr66\\_01.pdf](https://www.cdc.gov/nchs/data/nvsr/nvsr66/nvsr66_01.pdf). Accessed 24 Feb. 2019.

<sup>18</sup> "Factors associated with maternal mortality at advanced ... - NCBI - NIH." 13 Jul. 2016, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5484371/>. Accessed 24 Feb. 2019.

<sup>19</sup> "Pregnancy Risk Assessment Monitoring System (PRAMS ... - CDC." <https://www.cdc.gov/prams/pramstat/pdfs/mch-indicators/Ohio-508.pdf>. Accessed 24 Feb. 2019.

improve the quality of maternal care are essential to reducing SMM.<sup>20</sup> In 2017, 19,615 abortions were performed on Ohio residents. If S.B.23 passes and the number of abortions turn into births, the PRAMS data shows us that 29.4% of the births will require Medicaid assistance and dramatically increase Medicaid spending.

Lastly, this bill aims to decrease the rates of infant mortality, but it will actually increase the statistic. Rising birth rates will increase deaths in new mothers. The 4th leading cause for infant mortality in 2016 was classified by the CDC as "Newborn affected by maternal complications of pregnancy (maternal complications)."<sup>21</sup>

On behalf of Ohio women, **I urge you to strongly consider my testimony and vote NO on this bill that will threaten the lives of Ohio women.** Thank you again for the opportunity to testify. I will now take any questions you might have.

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<sup>20</sup> "Severe Maternal Morbidity in the United States | Pregnancy ... - CDC."  
<https://www.cdc.gov/reproductivehealth/maternalinfanthealth/severematernalmorbidity.html>. Accessed 24 Feb. 2019.

<sup>21</sup> "Final Data for 2016 - CDC." 26 Jul. 2018, [https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67\\_05.pdf](https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67_05.pdf). Accessed 24 Feb. 2019.