

Testimony of Jaime Miracle, Deputy Director for NARAL Pro-Choice Ohio, to the House Health Committee Opposing House Bill 149 May 10, 2017

Chairman Huffman, Ranking Member Antonio and members of the House Health committee, my name is Jaime Miracle. I am the Deputy Director for NARAL Pro-Choice Ohio. I am here to speak in opposition to HB 149 on behalf of our activists and members across Ohio.

Given that Ohio law currently restricts the donation of fetal tissue from abortion, such that no such donation programs exist in Ohio, H.B. 149 is a classic example of a solution in search of a problem. It is a waste of taxpayer dollars, and does exactly the opposite of what the sponsors and proponents say it does.

Last week Representative Merrin asked why abortion rights organizations would oppose this bill if it wouldn't change the practices of providers in our state. In that, Rep. Merrin was correct. This bill will not change how abortion clinics operate, since no fetal tissue donation programs exist. Unlike the other 18 restrictions on abortion and other reproductive health care services that this legislature has passed, HB 149 will not close the doors of clinics in our state. Instead, we oppose this bill because it stigmatizes medical professionals who provide abortion care by creating a wholly separate set of laws governing the donation of fetal and embryonic tissue from abortion. This is directly contrary to proponents' claims that HB 149 creates equality under the law.

State law restricts fetal tissue donation from abortion, which is why these programs currently do not exist in our state. Moreover, existing federal law controls how the donation of tissue can occur in the US and forbids all sale of tissue, whether fetal tissue from abortion, or tissue or organs from another source. Current law, both federally and in Ohio, does allow for the reimbursement of various expenses related to the donation of tissue. This practice occurs not only in the donation of fetal tissue, where programs exist in other states, but in other tissue donation programs as well. H.B. 149 will change this law, stating that if someone were to donate fetal tissue from abortion. Doctors and procurement agencies will still be able to charge these fees when a woman decides to donate fetal tissue following a miscarriage, for example, or if a cornea or tendon is donated following someone's death. H.B. 149 sets up two separate systems of laws, one for fetal tissue from abortion, and another for all other tissue.

Not only does this bill create a separate set of laws for fetal tissue from abortion but it also sets up different laws based on who is processing the tissue. It creates one set of laws for the physician performing the abortion or a "person associated with" the physician, and another set of laws for anyone else who may be handling the tissue. Only the physician or someone associated with them are forbidden to receive compensation for services surrounding the donation of fetal tissue following an abortion. A procurement agency or another medical facility not owned or partnered with the physician who performed the abortion would not be covered under the same set of rules.

Over and over again proponents of this legislation have stated that H.B. 149 is simply about making the laws equal when it comes to these kinds of processes. As you can see, this couldn't be further from the truth. If this bill were about treating these donations, wherever the tissue came from, with the dignity and respect that I think we all agree should be conferred, why is this bill singling out a certain type of tissue and a certain type of provider for regulations that others are not subject to?

Additionally, the codification of the anti-choice, pejorative term of "abortionist" reinforces this bill's intent to stigmatize and shame physicians who provide abortion care and those who turn to them for health care services. We do not define other physicians by a single service that they provide, why then are we doing it for physicians who provide abortion services? A search in medical literature finds no reference to this term, but a simple google search shows that it appears time and time again on the websites of anti-abortion organizations. This unnecessary addition confirms the political nature of this bill and puts it in line with all the other restrictions this legislature has passed based on anti-abortion talking points rather than facts and medical science.

I would also like to clear up several misconceptions from testimony last week. In states where these donation programs exist the decision to donate this tissue begins and ends with the woman, not the physician performing the abortion. The woman gives her consent to the donation of the tissue, she is in control, and she makes the decision. In fact, federal law requires this consent. Tissue is not being donated without her knowledge.

There were also insinuations that we don't know how clinics that were not part of the Ohio Attorney General's investigation are handling fetal and embryonic tissue in Ohio. One just needs to turn to the Ohio Department of Health for all the information you need on this subject. All ambulatory surgical facilities, including those that provide abortion care, are inspected every year as required by law. The Ohio Department of Health is tasked with ensuring that these ambulatory surgical facilities handle this tissue properly, and there have been no citations for mishandling this tissue from the Ohio Department of Health. The state of Ohio already regulates these practices, again showing that we do not need additional, politically motivated, unnecessary, and stigmatizing legislation like H.B. 149.

Thank you for your time today, I am happy to answer any questions you may have.