Planned Parenthood® Act. No matter what.

Planned Parenthood Great Plains Votes

Testimony of Katie Baylie (written only) Director of Legislative Affairs Planned Parenthood Great Plains Votes Opposing House Bill 2135 House Taxation Committee February 2, 2023

Dear Chair and Honorable Committee Members:

Planned Parenthood Great Plains Votes ("PPGPV") is the advocacy and political arm of Planned Parenthood Great Plains. Planned Parenthood Great Plains offers expert, compassionate sexual and reproductive health care to patients, with three health center locations in Kansas. PPGPV submits this testimony in opposition to House Bill 2135.

HB 2135, or the Pregnancy Resource Act, would provide a tax credit of 70% of the total amount contributed by individuals and business to support eligible charitable organizations. The proposed legislation would cap tax credits through a single center at an annual amount of \$5 million and \$10 million cap statewide. Although the legislation does not propose a direct grant of money to these eligible charitable organizations, the tax credit would allow individuals/entities to give to eligible charitable organizations in lieu of owing the money to the state in the form of taxes.

The proposed legislation encourages individuals and businesses to donate to crisis pregnancy centers and diverts funds away from legitimate and comprehensive sexual and reproductive health care.

Based upon the requirements as outlined in the proposed legislation, the primary organizations which would qualify as "eligible charitable organizations" are those known as crisis pregnancy centers ("CPCs"). CPCs are nonprofit organizations that present themselves as healthcare clinics but operate with the sole intention of persuading pregnant persons against having abortions. In contrast, legitimate healthcare organizations, including non-profit hospitals, which simply affiliate in any way with any organization that provides, pays for, refers for or provides coverage of abortions, would not be an eligible charitable organization under the current language. The legislation, if enacted, would encourage individuals and business to donate to CPCs rather than to other non-profits that provide the full range of comprehensive sexual and reproductive health care services to patients.

Additionally, although there is no fiscal note associated with this bill yet, a tax credit of up to 70% will divert tax revenue away from legitimate reproductive health care services and other safety-net programs for low-income people and children. When providing tax credits to individuals and businesses to support CPCs, the state implicitly endorses the unregulated, unethical, and harmful tactics of these organizations. Upwards of ten million dollars per year could be given to crisis pregnancy centers through the program.

Several Kansas counties have very high infant and maternal mortality rates, with 48.6% of counties being classified as maternity care deserts.¹ Each dollar in tax credits proposed by this legislation is a dollar that cannot be spent towards improving outcomes for mothers, babies, and patients in Kansas. There is no oversight or accountability for how CPCs will use the funds they receive as a result of the incentivized donations from individuals and entities. Additionally, there is no requirement that the money received by such organizations be used to improve the health of Kansans. The impact of the state losing the tax money is significant; this includes, but is not limited to, a loss of tax dollars for public schools, public health, infrastructure, and public employment.

Patients deserve access to ethical, comprehensive, and evidence-based sexual and reproductive health care.

The bill does not require eligible charitable organizations provide medically accurate information nor ethical, comprehensive, and evidenced-based health care. Instead, the only requirement is that the individual or business donate to an organization that will "provide assistance to women in order to carry their pregnancy to term, encourage parenting or adoption and prevent abortion."

There is no requirement in the proposed legislation that the eligible organization provide medically factual or accurate information. CPCs are well-known for using misinformation to pressure or scare pregnant individuals out of seeking an abortion.² For example, a 2012 academic study of CPCs in North Carolina found that 86% of centers promoted false or misleading medical information on their websites.³ These organizations often claim to provide "all options" counseling but withhold critical information and referrals to legitimate healthcare providers. Instead, unlicensed staff are encouraged to use misinformation and intimidation tactics to dissuade people from making their own healthcare decisions. This bill encourages CPCs to engage in deceptive practices to prevent abortions to remain an eligible healthcare organization in order to receive donations from individuals and businesses, with little to no oversight.

The bill requires the organization to utilize trained and licensed medical professionals to perform *any available* medical procedures. However, it does not require that the organization offer medical procedures. Many CPCs falsely advertise themselves as healthcare facilities, confusing patients who believe they are visiting licensed medical centers to receive healthcare services from licensed medical providers. Unlike licensed medical facilities, such as Planned Parenthood Great Plains, CPCs are exempt from regulatory and credentialing oversight. CPCs are not required to follow strict requirements regarding patient confidentiality, quality of medical care, and hygiene and safety practices.

The proposed legislation decreases access to safe and necessary healthcare. Diverting funds away from legitimate healthcare facilities which offer the full range of sexual and reproductive health to unregulated, unlicensed organizations whose sole purpose is to prevent abortions harms patients. PPGPV is opposed to the legislation and respectfully requests all committee members oppose HB 2135.

¹ March of Dimes. Nowhere to Go: Maternity Care Deserts Across the U.S. 2020. Available at: <u>https://www.marchofdimes.org/research/maternity-care-deserts-report.aspx</u>. Retrieved January 30, 2023, from www.marchofdimes.org/peristats.

² Melissa N Montoya, Colleen Judge-Golden & Jonas J Swartz, "The problems with crisis pregnancy centers: Reviewing the literature and identifying New Directions for future research," Volume 14 International Journal of Women's Health 757-763 (Jun. 8, 2022), available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9189146/.

³ Bryant AG, Levi EE. Abortion misinformation from crisis pregnancy centers in North Carolina. Contraception. 2012 Dec;86(6):752-6.