

## Testimony in Support of Funding for Reproductive Health Services and Data Collection

## Submitted by: Kimberly Koops, Policy Director NARAL Pro-Choice Oregon

Chairs Beyer and Nosse and Members of the Joint Subcommittee on Human Services:

I'm Kimberly Koops, and I'm the Policy Director for NARAL Pro-Choice Oregon. As advocates for reproductive justice, NARAL Pro-Choice Oregon understands the importance of ensuring that all Oregonians are able to make their own personal medical decisions. Accordingly, we urge you to fund the total public health budget at the current service level for 2019-2021 at \$725,408,214, and the Reproductive Health Budget for 2019-2021 at \$36,986,810 to protect funding for reproductive health services and data collection that allows organizations like NARAL Pro-Choice Oregon and public health researchers to identify gaps in access to healthcare and address inequities in service delivery.

NARAL Pro-Choice Oregon is dedicated to developing and sustaining a constituency that uses the political process to guarantee every woman the right to make personal decisions regarding the full range of reproductive choices, including preventing unintended pregnancy, bearing healthy children, and choosing legal abortion. Everyone—regardless of their circumstances—deserves the tools to be able to make those personal decisions when and if they are ready.

In 2017, NARAL Pro-Choice Oregon advocated for passage of the Reproductive Health Equity Act, which has become known as the most sweeping reproductive health access bill signed into law in the country. The Reproductive Health Equity Act not only ensured that women covered by private health insurance will be able to continue to receive reproductive healthcare services including contraception with no copay should the Affordable Care Act be repealed, the bill provided 60-day postpartum healthcare coverage for undocumented women under CAWEM Plus. While the state is still in the process of fully and equitably implementing the law, preliminary figures from the Oregon Health Authority show that between April 2018 and February 2019, more than 2,500 women received postpartum coverage through the Reproductive Health Equity Act.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Data provided via email by the Oregon Health Authority.

In addition to services covered under the Reproductive Health Equity Act, the Reproductive Health Program in the Public Health Division of the Oregon Health Authority also works with clinics in 33 of Oregon's 36 counties across the state to offer free or low-cost reproductive healthcare services and birth control to Oregonians with incomes at or below 250% of the federal poverty level (FPL) who are not enrolled in the Oregon Health Plan (OHP). In some places in Oregon, the county health clinic is the sole safety net provider of reproductive health care.

While all Oregonians have the right to decide when and if to become a parent, a right is only a right if you are able to access it. With rising costs and limited dollars, local clinics are struggling to keep their doors open. Without more funding for the public health system, clinics may close and people will lose access to vital reproductive health services, along with other health care people need.

In addition to funding services, the Public Health Division also collects data regarding births and pregnancies by county,<sup>2</sup> as well as data on risk factors during and before pregnancy and barriers to accessing reproductive health services.<sup>3</sup> This information is critical in determining gaps in healthcare services and developing policy to address barriers to accessing the full range of reproductive healthcare. Investing more in public health means more, better data, plus more capacity to analyze those data to inform policy and practice to improve health. In addition, we support additional investments to public health and prevention, such as public health modernization.

Oregon has long been a leader in increasing access to healthcare for those who need it most. To continue this trend it is imperative that we continue to provide adequate funding for reproductive healthcare services and protect the Oregon Health Authority's ability to collect important data. I urge you to support the Governor's Public Health Division budget so that all Oregonians are able to make their own personal medical decisions regardless of how much money they make and how they are insured.

<sup>&</sup>lt;sup>2</sup> Center for Health Statistics, Vital Statistics

<sup>&</sup>lt;sup>3</sup> Oregon Pregnancy Risk Assessment Monitoring System (PRAMS)