Ms. Rogers, chair, and members of the House Health Policy Standing Committee:

My name is Dr. Catherine Stark. I am a licensed physician and board certified in obstetrics and gynecology and have practiced in Michigan for the past 25 years. I have cared for thousands of women during my career, both in a private group practice and at Beaumont Hospital in southeast Michigan. I hold an appointment as an adjunct assistant professor at Oakland University-William Beaumont Medical School. I also currently serve as Medical Director at Crossroads Care Center in Auburn Hills, MI.

I am grateful to be able to address this committee today to express my concern. This legislation seeks to reverse many common sense protections and safety measures that women in Michigan have benefitted from for the past decade and more. Protecting the health and safety of women is not a partisan issue. It should not be a political issue. Abortion has been legal in Michigan since I began my professional career, and it remains so today. That women have a right to choose to abort or to carry their child to term is not at issue here. I think that we can all agree that we want women to make an informed decision freely, without coercion or deception. They should be provided with up to date and accurate information about any medical treatment or surgical procedure that they undergo. They should be confident in the quality of care that they receive. Women have a right to know.

This Act includes a provision which would repeal the current requirement that surgical abortion facilities be licensed. As with all free-standing outpatient surgical facilities, this requires compliance with reasonable safety and cleanliness standards. The act also repeals the current requirement to report surgical complications when they occur. As a physician caring for women, I have to wonder at this audacity to name this bill Reproductive Health! All of these measures were enacted for the protection of health and safety of women undergoing an abortion in our state. While these measures may inconvenience the abortion provider, they do serve a purpose in allowing the public to know when a clinic is not safe, or a provider has repetitive violations of safe care. These requirements for licensing and reporting have not been undue burdens for my patients. If the patient was your sister or daughter, wouldn't you want to know which abortion clinics have a high rate of complications? Or which clinic has had their license revoked due to dangerous practices? How could you know without licensing and inspections? Why would you vote to end reporting requirements for surgical complications when all other surgical centers must report? Please consider who is the beneficiary of such an unregulated industry. Women have a right to know!

Another unfortunate proposal included here is the elimination of our state's informed consent law. Without complete and medically accurate information about pregnancy, the potential risks of each type of abortion option, varying risks depending on gestational age, and/or alternative options, a pregnant individual is not going to be able to make the best decision about their own health and that of their unborn child. Not only is informed consent a standard of care, as a surgeon myself, I know that this is an important discussion. Patients need time to digest the information and formulate questions. With an elective abortion procedure, especially when the life of the unborn child is at stake, it is very reasonable to require that pregnant persons are given some time to consider before an irreversible procedure is performed on them. Michigan's current informed consent law, which provides accurate medical information available online through the state government website, and allowing a 24-hour waiting period, is a safe and reasonable measure which helps to protect individuals who may be vulnerable to coercion by a partner, poverty or a lack of information. Women have a right to know.

It appears to me that the purpose of this current proposal is to remove all remaining regulations and controls on the abortion industry in Michigan, allowing the abortion providers to regulate themselves. When this was the case in the past, before surgical abortion clinics were required to meet the same licensing and safety requirements as other outpatient surgical clinics, there were well documented, downright horrible practices at some unregulated clinics, notably in Muskegon in 2012. I am disheartened to think that this legislative body would take action to put many vulnerable women at risk of substandard and unregulated surgical care. Women have a right to know. And women deserve better than this.

Women seeking abortion deserve the same level of quality healthcare as any other woman. For the sake of my patients who may seek abortion care in the future, and for all residents of this state who rely on their government officials act responsibly to protect their health and safety, I urge you to vote NO on this proposal as it is currently written. Thank you for your consideration.

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