

MEMORANDUM

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FROM: Andy Hoover, Legislative Director, ACLU of Pennsylvania

DATE: April 8, 2016

RE: OPPOSITION TO HOUSE BILL 1948 (RAPP)

Next week the House may consider House Bill 1948. The American Civil Liberties Union of Pennsylvania opposes HB 1948 because it interferes in a woman's most personal, private medical decisions and threatens to block access to critical care. On behalf of the 23,000 members of the ACLU of Pennsylvania, I urge you to please vote "no" on this bill.

This legislation bans abortion after 20 weeks and bans one of the most common methods of second trimester abortion. It does so with only very narrow exceptions that do not take into account the range of complex circumstances a woman may be facing when she seeks later abortion care.

The 20-week ban provision violates more than four decades of binding US Supreme Court precedent holding that a state cannot ban abortion prior to viability under any circumstances, regardless of whether the ban has any exceptions.¹ In addition, the provision banning one of the most common procedures for second trimester abortion is inconsistent with past Supreme Court decisions which make crystal clear that a state legislature cannot prohibit one of the most common second trimester abortion methods.²

Our rights and freedoms are rendered meaningless if our government makes it extremely difficult or impossible to exercise them. Yet by banning one of the most common methods of second trimester abortion and abortion after 20 weeks, that is precisely what HB 1948 would do.

¹ See e.g., Roe v. Wade, 410 U.S. 113 (1973); Planned Parenthood of Se. Pa v. Casey, 505 U.S. 833 (1992); see also Stenberg v. Carhart, 530 U.S. 914, 920-21 (2000); Gonzales v. Carhart, 550 U.S. 124, 146 (2007)

² Planned Parenthood of Central Missouri v. Danforth, 428 U.S. 52 (1976) (striking a ban on the use of saline amniocentesis as a method of abortion after 12 weeks); Stenberg v. Carhart, 530 U.S. 914 (2000) (striking down a statute which was so broadly written that it would ban D&E abortions, the most commonly used method for second trimester abortions); Gonzales v. Carhart, 550 U.S. 124 (2007) (upholding a ban on one method, but resting its decision on the continued availability of D&E abortions).

Many things can go wrong during a pregnancy. A woman's health and well-being could be at risk in ways that we cannot even imagine. When complications develop, a woman should be able to get the care she needs. Every pregnancy is different and we cannot presume to know all the circumstances surrounding a personal, medical decision to have an abortion. Medical professionals like the American Congress of Obstetricians and Gynecologists agree these restrictions are without medical or scientific basis, and in fact will cause substantial harm to patient care.³

A woman's health, not politics, should drive important medical decisions. It's time to stop criminalizing women's health care, interfering with the personal decisions of women, and substituting political agendas for the expertise of health care professionals. Please vote "no" on HB 1948.

³ From ACOG's statement: Efforts to ban specific types of procedures will limit the ability of physicians to provide women with the medically appropriate care they need, and will likely result in worsened outcomes and increased complications." http://www.acog.org/About-ACOG/News-Room/Statements/2015/ACOG-Statement-Regarding-Abortion-Procedure-Bans