

22 January 2025

Chairwoman Rachel Rodriguez-Williams House Labor Committee Capitol Extension, Room E003 Cheyenne, Wyoming

Dear Chairwoman and Committee Members:

My name is Katie Knutter, and I am the Executive Director of Wellspring Health Access, which is an organization that operates the state's only procedural and medication abortion facility. I want to thank you for the opportunity to address the committee regarding HB 42 today.

This bill, which we call, "Targeted Regulations Against Abortion Providers," has appeared, in a variety of forms, around the United States, for at least the past two decades. Reputable medical establishments, such as the American Medical Association (AMA) and the American College of Obstetricians and Gynecologists (ACOG) have voiced opposition to these measures over the years.

For those who are unsure about the origin and intent of this bill, please make no mistake, this bill is targeted at us, Wellspring, the only medication, and procedural abortion clinic in the state. The sole purpose of this bill is to put us out of business, thus restricting health care services to people, with punitive, detrimental measures that increase costs and restrict healthcare options. The facts do not substantiate the necessity for this bill or enhance the quality of patient care.

The high standard of care provided by abortion clinics is evidenced by the fact that abortion is one of the safest medical procedures performed in the United States. Nationally, abortion entails half the risk of a tonsillectomy and one-hundredth the risk of an appendectomy, and, in the first trimester, is eleven times safer than childbirth. Of women who have first trimester abortions, 97% report no complications, 2.5% have minor complications and less than 0.5% require additional surgical procedure or hospitalization.

The realistic implication of this TRAP bill would force us to undergo more construction on our clinic for things such as, but not limited to, expanding hallways, altering the dimensions of our procedure rooms, changing out our HVAC system and reconfiguring our janitorial setup.

This bill would also compel physicians who practice at our clinic to obtain hospital admitting privileges, which are unnecessary and often times, due to the politics of abortion and



the few number of hospital admittance cases, impossible to obtain. The admitting privileges requirement, for example, is particularly problematic because it places a physician's ability to serve his or her patients at the mercy of hospitals which may, out of anti-abortion bias or fear of anti-abortion backlash or terrorism, rarely grant admitting privileges to abortion providers. The safety of abortion patients, however, can be fully protected without such a requirement.

What we do have in our clinic are detailed and thorough emergency protocols and have the capability to transfer a patient promptly to a hospital for emergency care if necessary. The admitting privileges requirement serves only to target abortion providers in a way that is likely to harm patients and physicians. Furthermore, it is not medically justifiable.

Our clinic in Wyoming is already appropriately required to follow important safety requirements, including federal CLIA and OSHA regulations. All of our physicians are fully licensed and insured.

Additionally, HB 42 is unequivocally unconstitutional. Article 1, Sec 38 of the Wyoming Constitution states that people have the right to make their own health care decisions. By imposing such a punitive and discriminatory law on providers of abortion, the legislature would be interfering in the ability of people in the state to freely exercise their constitutional right to seek health care as they see fit.

HB 42 is a gotcha bill, with no sincere intent to "protect" patients who are coming to our clinic for health care. Two years ago, this body passed the Life is a Human Right Act, in the hopes that it would, once again, be able to ban abortion. Last year the legislature passed an almost identical bill to HB 42 that was subsequently vetoed by the governor. The state is part of ongoing litigation over Article 1, Section 38 of the Wyoming Constitution. A district court judge found that Article 1, Section 38 does in fact protect the rights of people in Wyoming to choose their own health care, including the right to seek abortion services. In HB 42, the Life is a Human Right Act is quoted to state that abortion is not health care. This is in direct contradiction to the Wyoming Constitution and creates a clear contradiction over the state's desire to regulate abortion clinics as they would ambulatory surgery centers.

As a society, if we're really concerned about reducing the number of abortions, then the legislature should seriously consider a bill that would allow marketing Emergency Contraception (EC), which is not an abortifacient, much more broadly and provide educational materials so that the larger population has knowledge of EC. For those who are unfamiliar with this medication, if



it is taken within 72 hours of unprotected sex, an unintended pregnancy can be avoided, thus, lowering the need for abortion services. Additionally, we can also work to provide contraceptive equity so that so that all people, no matter their financial situation, have access to contraception. We can also work to make sure that teens and adults receive comprehensive sex education so they will be able to make the best decisions for themselves. These are just a few things that the legislature could do if the intent is to reduce the number of abortions performed each year.

ACOG, which I referenced previously, has publicly stated that, "Abortion is a confidential, medical matter that should be protected between the physician and their patient. The intervention of legislative bodies into medical decision-making is inappropriate, ill advised, and dangerous. Women who wish to obtain an abortion should be unencumbered by obstacles such as: ...stricter facility regulations for abortion than for other surgical procedures of similar risk."

I do agree that the Legislature has the right to regulate healthcare in an evidence-based, non-gender specific, non-prejudicial fashion for the preservation of the public safety and welfare. However, there is no public health crisis that necessitates further restriction of abortion in Wyoming.

In conclusion, this bill is bad for women trying to access abortion care. Quite clearly, this legislative measure is intended to restrict abortion even further by eliminating practitioners who safely do abortion procedures in their office-based practices. I urge you to oppose this bill, as it is purely political and does not respect the intellect of Wyoming women to decide what is best for themselves and their families.

Sincerely, Katie Knutter Executive Director