



Senate State Affairs Committee Hearing on SB 22

Testimony by Joseph E. Potter, PhD,

March 18, 2019

Good morning! My name is Joe Potter. I am a professor at the University of Texas here in Austin. Since 2011, I have been leading a project to evaluate the impact of reproductive health policies and programs in the state of Texas. I am against the bill. I believe it will deprive a substantial number of Texas women of access to high quality reproductive health care.

This bill follows on two previous measures, both of which had adverse consequences for Texas women.

The first, passed in 2011, was the reduction of funding for family planning by 2/3 together with prioritization of organizations that provide comprehensive primary care over those providing only family planning services. Ostensibly, the purpose of the 2011 legislation was to defund Planned Parenthood in an attempt to limit access to abortion, even though federal and state funding cannot be used for abortion care. Instead, these policies limited women's access to a range of preventive reproductive health services and screenings. Over 80 clinics closed, many of them with no affiliation to Planned Parenthood. The remaining clinics severely restricted access to the most effective contraceptive methods because of their higher up-front costs.

The second measure was the removal of Planned Parenthood from the Women's Health Program in January 2013. We assessed the size and nature of the impact of this exclusion. As with the 2011 cuts, the greatest impact was on the use of the most effective methods: IUDs, subdermal implants, and injectable contraceptives.

Neither of these measures seemed to anticipate the long-term effects of removing skilled providers from a safety net that took decades to build. They were predicated on the idea that high quality reproductive health care is easily and readily obtainable from any primary health care clinic or ob/gyn practice.

To assess differences between new providers and those which have extensive experience in family planning, we recently conducted a survey of 114 clinics or organizations contracted by the Healthy Texas Women program. We were particularly interested in whether they followed four key clinical guidelines that facilitate women's access to services. Long story short, there was a substantial difference between the newly enrolled providers, and the experienced family planning providers. I would be happy to provide you with a brief report on the survey.

The bottom line is that not all providers are equal in quality, and experience matters. Something substantial would be lost if this bill were passed and local governments wishing to contract reproductive health services would no longer be free to choose the organization or clinic that they considered to be the most competent in their community.

Thank you.

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