



Oppose Bills Putting Medically Unnecessary Requirements on Abortion Doctors and Facilities

Legislators have filed several bills for the 2016 session that would impose medically unnecessary regulations on doctors and facilities that provide abortions in an attempt to shut them down. Part of a nationwide movement to limit access to safe and legal abortions, these types of laws are opposed by medical professionals and have been struck down by courts as unconstitutional. Legislation pending in Florida includes:

- Facilities Regulation: HB 233 by Rep. Trujillo would require facilities to meet the same regulatory standards as ambulatory surgical centers. These regulations are incredibly particular and burdensome because they are intended to assure the safety of procedures that are riskier and more complicated than abortion -- and often have no nexus to abortion at all.
- Doctor Regulation: HB 1 by Rep. Hill would require all doctors who provide abortions to personally obtain admitting privileges at a nearby hospital, and SB 602 by Sen. Stargel would require doctors who provide abortions after the first trimester to obtain either admitting privileges or transfer agreements with a nearby hospital. Because abortion is so safe, these requirements are medically unnecessary.

Florida's legislators must oppose these political proposals masquerading as medicine:

- These bills are medically unnecessary: Abortion is one of the safest medical procedures in modern medicine. The Centers for Disease Control state that abortion is 99% safe, and medical experts like the American Medical Association and the American Congress of Obstetricians and Gynecologists oppose these laws. There is also an extensive licensing and regulation scheme already in place for abortion facilities and the doctors who perform them in Florida.
- These bills create insurmountable hurdles designed to close clinics: Hospital admitting privileges, for example, are determined by each hospital and are based on business decisions that may be unrelated to a doctor's quality of care or medical credentials. For

example, they often include a minimum number of admittances to maintain the privilege, something doctors may not be able to do because abortion is so safe. Similarly, the facilities regulations are so technical and specific that clinics often can't meet them. In other states, these types of requirements have closed clinics altogether and limited meaningful access to safe and legal abortions.

- These bills are bad for women's health: The decision about whether to end a pregnancy or carry a pregnancy to term is a private medical decision. By threatening to close clinics, these bills jeopardize a woman's health and safety and her ability to access comprehensive care.
- These bills are unconstitutional.
 - Federal courts have struck down similar laws in other states: Courts have struck down the targeted regulation of abortion providers (TRAP laws) in Alabama, Louisiana, Mississippi, Oklahoma and Wisconsin. A federal court partially upheld a regulation in Texas and that case is likely to be heard in the U.S. Supreme Court in the coming months. Overwhelmingly, the courts are holding that these sorts of faux medical requirements place an unconstitutional undue burden on a woman who needs an abortion.
 - Florida's state constitutional right to privacy is even more protective: A Florida court enjoined the mandatory 24-hour waiting period passed by the legislature earlier this year. That court reaffirmed that Florida's right to privacy is even stronger than the federal right and that when regulating abortion, the burden is on the government to demonstrate that there is a compelling interest and that the restrictions are the least intrusive means to advance it. This very high standard would be applied to these bills as well.