



JANEL BRANDTJEN

STATE REPRESENTATIVE • 22ND ASSEMBLY DISTRICT

Thank you Chairman Sanfelippo and the Assembly Committee on Health for holding this hearing on AB528. Simply put, this bill requires the Department of Health Services (DHS) to decertify providers of Medical Assistance (MA) that provide abortion services. These abortion providers include private entities that have received project grants or family planning services under federal law. Unlike other bills that have been introduced this session, this bill prohibits ALL abortions from being funded with taxpayer dollars.

Decertifying abortion providers in the Title XIX or MA program would finally ensure that taxpayer dollars are not spent directly or indirectly on subsidizing abortions. Wisconsin taxpayers should not have to use their dollars to support abortion providers.

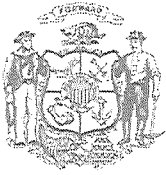
The United States Supreme Court rulings have consistently determined that abortion providers have no right to financial assistance from taxpayers. Yet, Planned Parenthood Wisconsin has received over \$94 million in BadgerCare MA reimbursements in a seven-year period. If the taxpayer funding was not enough, a one-month audit in 2016 determined 6 Planned Parenthood locations in Wisconsin overbilled almost \$1 million dollars to the taxpayers of Wisconsin. Planned Parenthood committed fraud, so just imagine the reclaimed dollars if the audit had covered a year.

Medical Assistance payments to these providers represent the last funding vehicle to abortion providers who have no right to taxpayer money.

Thank you for your consideration of this long overdue legislation.

Rep. Janel Brandtjen

A large, stylized handwritten signature in black ink, which appears to read "Janel Brandtjen". The signature is written over the printed name and extends significantly to the right of the page.



ANDRÉ JACQUE

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*Testimony before the Assembly Committee on Health
State Senator André Jacque
October 7, 2021*

Chairman Sanfelippo and Committee Members,

Thank you for holding this hearing on Assembly Bill 528, ending abortion provider subsidies in Wisconsin's Medical Assistance program.

According to the drafting attorney for both bills on this topic: "Assembly Bill 493 (as corrected) and Assembly Bill 528 have the same end goal. Ensure that abortion providers are not allowed to obtain reimbursement for services to Medical Assistance program recipients. Both of the bills prohibit certification of abortion providers and also decertifies abortion providers that are currently certified. Where the bills differ is the approach of describing those abortion providers.

Assembly Bill 528 attempts to pinpoint the abortion providers by describing them as 1) providers of or affiliates of a provider of abortion services, 2) nonprofit entities, 3) private entities, and 4) entities that have or are affiliated with entities that have ever received or applied for a certain family planning grant from the federal government.

Assembly Bill 493, on the other hand, excludes certain hospitals from a broader description of abortion providers. AB 493 first includes all providers of or affiliates of a provider of abortion services, which is the same language as AB 528. But then, AB 493 excludes any hospital that performs abortions under circumstances of sexual assault or incest, when saving the life of the woman, or when preventing health damage to the woman.

I like to describe the bills as a harpoon versus a net. AB 528 attempts to only describe the providers it targets like a harpoon. AB 493 nets more providers than it intends and then, figuratively, throws back the ones it does not intend to prohibit from certification."

AB 528 has the language that I feel all pro life groups and pro life legislators can support that defunds Planned Parenthood of their biggest taxpayer-bilking revenue stream and does not explicitly condone abortion as long as it takes place in a hospital.

Under current law, the Wisconsin Department of Health Services establishes criteria for certifying providers for services under the Medical Assistance program and certifies those providers.

Consistent with previous state standards adopted for Wisconsin's Title V and Title X programs, AB 528 removes abortion providers, including Wisconsin's and the nation's largest abortion provider, Planned Parenthood, from Wisconsin's MA program and prevent them from being certified in the future.



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Even after a tax dollar giveaway for Planned Parenthood from the last throes of the Doyle administration was uncovered and legislatively ended, an audit by Wisconsin's DHS Office of Inspector General found that still as many as two-thirds of all Medicaid payments to the state's Planned Parenthood locations were fraudulent, inappropriate or overbilled. These systemic abuses made it the worst offender among all family planning entities investigated.

Assembly Bill 528 is consistent with the August 17, 2017 ruling of the 8th Federal Circuit Court of Appeals (and subsequent rulings from a US District judge once the case was remanded back to her) in upholding and allowing to be put into effect the 2015 action by the State of Arkansas to sever its Medicaid funding to Planned Parenthood.

AB 528 is also consistent with the March 12, 2019 ruling of the full 6th Federal Circuit Court of Appeals in upholding the state of Ohio's defunding of Planned Parenthood. That ruling held that "Private organizations do not have a constitutional right to obtain governmental funding to support their activities... Case after case establishes that a government may refuse to subsidize abortion services... The Supreme Court has never identified a freestanding right to perform abortions. To the contrary, it has indicated that there is no such thing."

Wisconsin Family Action and Pro-Life Wisconsin support this legislation.

Thank you for your consideration of Assembly Bill 528.



WISCONSIN FAMILY ACTION
Marriage|Family|Life|Liberty

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**TESTIMONY ON ASSEMBLY BILL 528
ASSEMBLY COMMITTEE ON HEALTH
THURSDAY, OCTOBER 7, 2021
JULAIN K. APPLING, PRESIDENT**

Thank you, Chairman Sanfelippo and committee members, for holding this hearing on Assembly Bill 528. Wisconsin Family Action supports this bill with one reservation.

Wisconsin Family Action has a long and solid history of supporting efforts to stop public funding of abortion providers, and we are grateful for Representative Brandtjen's and Senator Jacque's working to continue that effort with Assembly Bill 528. Like Assembly Bill 493, Assembly Bill 528 has a highly laudable intent: to ultimately prevent Medicaid/Medical Assistance funding for abortion in Wisconsin. Abortion is not health care. Health care does not intentionally take the life of a human being. Abortion is a procedure a woman chooses for a variety of reasons. Taxpayer money, regardless of the form in which it flows through the pipeline, should never be used to pay for this choice that ends in the death of a person.

However, we do believe AB 528 could be improved by including hospitals in the certifying and decertifying requirement. This bill differs from AB 493 in a significant way when it comes to this issue. AB 493 explicitly exempts hospitals and explicitly cites exceptions (*i.e.*, rape, incest, life of the mother, etc.) within that exemption. In this bill, that explicit exemption is appropriately absent. There's simply no mention of hospitals at all. We believe it would be best to explicitly include hospitals in the decertification requirement. Hospitals that perform abortions should not receive taxpayer funding—not even in the situations enumerated. We would certainly support an amendment that addresses this. In spite of this concern, Assembly Bill 528 is a proposal deserving of our support as an organization—an organization that firmly believes no public monies should support the atrocity of abortion.

Thank you for your thoughtful and careful attention to our position on this bill.

Members, Assembly Committee on Health

Support for Assembly Bill 528

October 7, 2021

Greetings Chairman Sanfelippo and Committee Members,

My name is Ken Pientka, I am resident of Montello and support AB 528, which removes Title XIX Medical Assistance funding from abortion providers, including Planned Parenthood of Wisconsin. I support this bill for the following reasons:

1. I am opposed to abortion in all cases. It truly is the taking of a human life.
2. I oppose the use of my tax dollars that fund any and all services connected to abortion, including Title XIX family planning services.
3. I support AB 528 because it complements enacted State law prohibiting the use of State funding of abortion and my personal views against using tax dollars to fund abortion.

Thank you for this opportunity to share my views on this important legislation. I urge you to recommend passage of AB 528.

Thankfully,

Ken Pientka

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ProLife
LOVE. FOR LIFE. WI.

**Testimony in Support of Assembly Bill 528: decertifying abortion providers in the
Medical Assistance program
Assembly Committee on Health
By Matt Sande, Director of Legislation**

October 7, 2021

Good morning, Chairman Sanfelippo and Committee members. My name is Matt Sande and I serve as director of legislation for Pro-Life Wisconsin. Thank you for this opportunity to express our support for Assembly Bill (AB) 528, legislation that would remove abortion providers, including Planned Parenthood of Wisconsin, from the state Medical Assistance (MA) program.

Specifically, Assembly Bill 528 prohibits the Department of Health Services (DHS) from certifying, and requires DHS to decertify, as a provider for Medical Assistance persons that provide abortion services, are affiliated with persons that provide abortion services, are nonprofit private entities that have received or have applied for project grants and contracts for family planning services under federal law (42 USC 300), or are affiliated with nonprofit private entities with affiliates that have received grants or contracts under federal law (42 USC 300).

Planned Parenthood of Wisconsin satisfies the above criterion for MA decertification, although hospitals that perform abortions do not. We would prefer that the scope of AB 528 extend to hospitals. However, unlike Assembly Bill 493, AB 528 does not explicitly exempt hospitals that perform abortions in the exceptional cases of sexual assault, incest, life and health of the mother. It is one thing for a pro-life bill defunding abortion not to cover as much ground as we would like. It is quite another for it to specifically authorize public funding of a certain type of abortion provider in certain circumstances. This is a denial of equal protection. This fundamental difference is why we are supporting AB 528 and opposing AB 493.

During the Walker Administration, the state of Wisconsin consistently and substantially defunded abortion providers of taxpayer dollars, including Title V and Title X family planning monies. Title XIX (Medical Assistance) is the last and largest public funding stream propping up Planned Parenthood of Wisconsin, our state's largest abortion provider. Pro-Life Wisconsin has championed these efforts, and we thank Representative Brandtjen for working to remove Medicaid funding from abortion providers.

Planned Parenthood of Wisconsin (PPWI) receives MA funding through BadgerCare Plus and the Family Planning Only Services Program. DHS reports that from July 1, 2010, through December 31, 2017, PPWI received \$94.7 million in BadgerCare MA reimbursements. DHS also reports, through numerous audits over the past 10 years, consistent overbilling of the MA program by multiple PPWI clinics.

(OVER)

Abortion - the direct, intentional killing of a preborn child - is not health care. And in poll after poll, Americans overwhelmingly say they oppose taxpayer-funded abortion. A Knights of Columbus/Marist Poll released on January 27, 2021, showed 77% of respondents opposing the use of tax dollars to pay for abortions overseas and 58% opposing the use of tax dollars to fund abortions in the United States.

Decertifying abortion providers in the MA program respects the consciences of Wisconsin taxpayers who oppose the use of public funds to subsidize abortion directly or indirectly. All money is fungible. Family planning funds undeniably free up resources within receiving organizations, like Planned Parenthood, to engage in the surgical/medical abortion business. Government must not force us to participate in the killing of our preborn brothers and sisters with our federal and state tax dollars.

Thank you for your consideration, and I would be happy to answer any questions committee members may have for me.

**Testimony in support of Assembly Bill 528: decertifying abortion providers in the Medical Assistance program
Assembly Committee on Health
By Gwen Finnegan**

October 7, 2021

Thank you Chairman Sanfelippo and Committee Members for allowing me to speak in support of Assembly Bill 528. My name is Gwen Finnegan. I am a resident of Baraboo.

I am in support of Assembly Bill 528 because:

1. Abortion is the direct, intentional killing of a human being in its most vulnerable state.
2. I do not want any of my taxpayer dollars paying for abortions in any way through any means, including Title XIX (Medical Assistance).
3. Planned Parenthood of Wisconsin must be defunded. Our state should not be giving money in any way to an organization whose main goal is to kill our children often by literally ripping them apart limb from limb.

I urge you to recommend Assembly Bill 528 to the full Assembly for passage.

Thank you so much!

Gwen Finnegan
1711 Valley View Drive
Baraboo, WI 53913



WISCONSIN CATHOLIC CONFERENCE

TO: Members, Assembly Committee on Health

FROM: Barbara Sella, Associate Director for Respect Life and Social Concerns

DATE: October 7, 2021

RE: AB 493 and AB 528 Medicaid Abortions

The Wisconsin Catholic Conference (WCC), the public policy voice of the Catholic bishops of Wisconsin, urges you to support Assembly Bills 493 and 528, which prohibit the Wisconsin Department of Health Services (DHS) from certifying a private abortion services provider or affiliate under the Medical Assistance program.

Assembly Bill 493 retains the exemptions to save the life of the mother, to prevent grave, long-lasting damage to her health due to a prior medical condition, or when the pregnancy is the result of rape or incest. Assembly Bill 528 does not include these exemptions. While the lives of those conceived in rape or incest are as valuable as any other, our position has always been that incremental change is better than no change.

Both bills have a clear and straightforward objective – to affirm that funds held by public authorities are prohibited from being used to subsidize the performance of abortions. Since 1919, the bishops of the United States have been vocal advocates of the idea that all Americans should enjoy access to affordable health care, especially those who are vulnerable or of limited means. As the U.S. bishops stated in 1993, “Health care is more than a commodity; it is a basic human right, an essential safeguard of human life and dignity.” We affirm that Wisconsin must continue to seek improved access to comprehensive health care services for those in need, especially women.

However, abortion and those entities that facilitate abortion do not reflect the respect for human dignity that should be at the core of all health care institutions. By reserving Medicaid funding for those providers that do not perform abortions, both bills ensure that women’s health care is devoted to prevention, diagnosis, and care, not termination of life.

We therefore urge you to advance either of these two bills.

To: Members of the Assembly Committee on Health
From: Dr. Shannon Rush
Date: October 7, 2021
Re: Assembly Bill 528 and 493

My name is Shannon Rush and I am a physician trained in obstetrics & gynecology and am completing further training in gynecologic oncology. I am writing in opposition to Assembly Bills 493 and 528. These bills seek to limit abortion access, but instead will limit access to preventative health care for women seeking care at these clinics. We should be able to agree that we want our family members, neighbors and loved ones to be able to access the health care they need.

Regardless of feelings about abortion or even Planned Parenthood, specifically, the reality is in some communities these clinics are the only available option for women who are uninsured, underinsured or on Medicaid to seek preventative health care at all stages of life. These are places for women to access breast and cervical cancer screening, maternity services, safe family planning, contraception, management of infections and infertility. Excluding these clinics from the Medicaid program will not result in restricting access to abortion care, but will result in fewer women being able to access the basic health care.

I regularly see women in my gynecology oncology clinic who present with advanced cervical cancer because they could not access medical care sooner. I have witnessed women in their 30s and 40s say goodbye to their children and families as they succumb to an entirely preventable cancer. It is well-documented that we have a healthcare provider shortage in Wisconsin. Many counties don't even have an OB/GYN. Who is going to provide breast and cervical cancer screenings, maternity care, and basic preventative healthcare if the provider network continues disappear? These bills will further erode access to high-quality providers and preventative healthcare.

I ask the legislature to support women's health physicians who care for our mothers, wives, sisters, daughters, girlfriends, and friends. I'm calling on the legislature to take a step back and on Assembly Bills 493 and 528. They do not serve the women of Wisconsin well and only reduce access to women's health care.

To: Members of the Assembly Committee on Health
From: Dr. Sreevalli Atluru
Date: October 7, 2021
Re: Assembly Bill 493 and Assembly Bill 528

As a family medicine doctor who works primarily with a rural population, Assembly Bills 493 and 528 severely restricts the ability for marginalized patients, both economically and socially, from accessing critical preventive services. These bills would limit and interfere with my ability to provide comprehensive, evidence based, safe care. I care for families including pregnant people, from grandparents to great grandchildren and see the devastating effects of restricting access to high quality care. Preventive services are instrumental in my ability to care for patients and help Wisconsin stay healthy. Unfortunately, our health outcomes, birth outcomes and death rates have risen disproportionately to our neighboring states due to already limited access to high quality, evidence-based care. Further limiting my ability with this legislation will lead to increased morbidity and mortality for patients who are already marginalized from access care due to distance, cost and lack of access. I am strongly opposed to this bill.

To: Assembly Committee on Health
From: American College of Obstetricians and Gynecologists –
Wisconsin Section
Date: October 7, 2021
Re: Legislation to Restrict Access to Women's Health Care



The Wisconsin Section of American College of Obstetrician Gynecologists (ACOG), an organization focused on providing quality, compassionate and often life-saving health care to women, strongly denounces the rhetoric that is being used to promote the bills before you today. Assembly Bills 6, 262, 493, 528, 593, 594 and 595 spread false, dangerous information and undermine the public's trust in OB/gyns. These bills insert legislative interference in the patient-physician relationship and decrease access to preventative health care and constitutionally protected women's health care, namely abortion care.

Assembly Bill 6 comprises inflammatory language that intentionally mischaracterize the provision of health care. This bill is irresponsible and dangerous. In the rare case that a woman undergoes an abortion via induction of labor during the periviable period and a baby is born alive, all decisions regarding possible resuscitation are made between herself and a multidisciplinary team of doctors who use compassion, ethics, and evidence-based expertise to help navigate what are often difficult decisions. These decisions are complex, nuanced, often heart wrenching and are quite simply not conducive to a one-size-fits-all law that all but ignores not only the scientific facts at hand, but also the individual circumstances that a woman and her family are faced with. We oppose this bill in the strongest terms.

The reporting of certain vital statistics information is generally important and useful to furthering legitimate public health interests. However, **Assembly Bill 262** is motivated by animus to abortion and exploits reporting that exists for public health purposes to shame women and intimidate health care providers. Alarming, this bill attempts to create and maintain a public list of medical practices that provide abortion care. Such a public registry would be an invitation for intimidation, threats, and even violence against women's health care providers and their patients. There is real fear that providers could be targeted using this information. In this way, abortion is distinct from other types of health care procedures and vital health statistics about which the state collects information. Stigma, harassment, and violence discourage abortion access and provision and harm patients. Acts of harassment include picketing, picketing with physical contact or blocking, vandalism, picketing of homes of staff members, bomb threats, harassing phone calls, noise disturbances, taking photos or videos of patients and staff, tampering with garbage, placing glue in locks or nails on the driveway of clinics, breaking windows, interfering with phone lines, approaching cars, and recording license plates.

Instead of increasing health care access for patients who already suffer disproportionately poor health outcomes – including high rates of breast and cervical cancer, sexually transmitted infection, premature birth, infant mortality, and maternal mortality – **Assembly Bills 493 and 528** further restrict access to basic health care for women in our state. As is well known, there is already a shortage of primary care physicians in Wisconsin and many providers limit the number of uninsured, underinsured, and Medicaid patients they serve. At a time when we should be focused on improving the health of ALL Wisconsinites, it is unconscionable to cut off access to preventive care for women at highest risk. The best way to reduce costly public health problems is to provide preventative healthcare, health education, prenatal and postpartum care, and reliable contraception, not further restrict access to basic health care for women.

Assembly Bill 593 would mandate that physicians provide information to patients which is not based on rigorous scientific evidence. If this bill becomes law physicians would be required to misled patients into believing that evidence-based treatment is available to “reverse” the effects of mifepristone. So-called “abortion reversal” regimens have not been adequately studied or evaluated for the safety of the mother or the fetus, and do not meet clinical standards of care. Legislative mandates based on unproven, unethical research are dangerous to women’s health. Politicians should never mandate treatments or require that physicians tell patients inaccurate information. *Requiring doctors to offer a medical therapy that lacks the requisite evidence base is unethical at best and harmful at worst.* We cannot allow political interference to compromise the care and safety of our patients.

Assembly Bill 594 would require physicians to give legislatively mandated information regarding a fetal condition to a patient. It is the ethical responsibility of a physician, and indeed we take an oath, to provide patients with medically correct information to help them make their own informed choices regarding their diagnosis and based on their individual prognosis. It is not the place of politicians to interfere into the patient-physician relationship. Physicians have open, honest, and confidential discussions with their patients about the diagnosis, prognosis, and appropriate treatment options a patient may be faced with. Politicians should be looking to scientific data and the knowledge and experience of our excellent and compassionate physicians to be providing evidence-based, safe, and quality care to our patients.

We are additionally opposed to **Assembly Bill 595** which represents gross interference in the patient-physician relationship. People seek abortion for many different reasons, which can be complex, and reflect a variety of considerations including her health, her family, and her future. Ob-gyns will tell you that some of the most difficult decisions are made by women whose pregnancies are affected by genetic disorders, and they are not taken lightly. This proposed bill stigmatizes women who seek abortion care by

questioning the motivation behind their decisions; invites discriminatory profiling by doctors against our own patients; and discourages honest, confidential conversations between patients and their doctors. When health care providers must question their patients’ motivations for obtaining an abortion, some patients may feel forced to withhold information or lie to their provider—or they may *be dissuaded from seeking care from a provider altogether.* Such legislation not only restricts a woman’s constitutional right to access safe abortion, but it jeopardizes her ability to access accurate medical information and safe, timely and compassionate health care.

In closing, as the largest organization of women's health care providers, ACOG proudly stands behind our members who provide comprehensive health care for women, delivered with quality, safety, integrity, and compassion. The bills before us today create a dangerous and hostile environment for physicians and patients, and ultimately prevent doctors from providing a patient with the best possible health care.