Testimony of

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House Committee on Oversight and Reform

“Examining State Efforts to Undermine Access to Reproductive Health Care”

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Thank you, Acting Chairwoman Maloney, Ranking Member Jordan, and members of the committee. My name is Dr. Colleen McNicholas. I am a practicing OB/GYN in Missouri and the Chief Medical Officer of Planned Parenthood of the St. Louis Region and Southwest Missouri. For more than a decade, I have been honored with the trust of patients seeking a broad spectrum of reproductive health care services, including abortion.

As you may know, there is only one health center left in Missouri that provides abortions to meet the needs of the 1.1 million women of reproductive age in our state: Planned Parenthood’s Reproductive Health Services in St. Louis. I am here today because if Governor Parson and Health Director Williams get their way, Missouri could soon become the first state since Roe v. Wade without a single health center that provides abortion.

I want to tell you how we ended up here and the dangers we face when state officials abuse their power and disregard patients’ lives to pursue a political agenda.

Despite the reality that abortion is safe, Missouri politicians have layered restriction upon restriction — ranging from long waiting periods to insurance coverage bans — in a deliberate attempt to end abortion access. And over the last 30 years, Missouri has gone from nearly 30 clinics that provide abortion to just one today.
Earlier this year, Governor Parson signed one of the most restrictive abortion bans in the country, banning abortion as early as eight weeks and altogether if *Roe* were ever overruled. Fortunately, that ban — for now — is blocked by the courts.

Unable to get the job done through legislation, though, Parson’s administration weaponized the licensure process to deny our abortion facility license. Health officials admitted under oath that they singled out Planned Parenthood for extra inspections and additional scrutiny, including at the behest of anti-abortion protesters and legislators. They came to our clinic five times in the first five months of this year, although they conceded that hospitals and surgery centers providing much riskier procedures went years without inspections.

During this year’s inspection process, the department also admitted to keeping a spreadsheet of my patients’ menstrual cycles. A brazen abuse of power and misuse of data motivated by an agenda to find something — anything — they could use to justify further scrutiny.

As shocking as that sounds, more egregious was Director Williams’ reinterpretation of a 1988 regulation, which forced over 100 patients to undergo multiple invasive pelvic exams. My colleagues and I could not in good conscience force patients to take off their clothes unnecessarily and endure an extra, state-mandated vaginal exam. Due to public outcry, the department relented, but that only confirms there was no medical need for the extra exams.

Missourians want to believe state officials charged with protecting public health have their best interest in mind. They want to trust that, when they go to the doctor, their private medical information will not be mined by the department of health as part of a political fishing expedition. Governor Parson and Director Williams have repeatedly violated the trust of our community, and compromised my patients’ safety, to push a political agenda.

And it’s not just Missouri. Anti-abortion politicians in other states, including Louisana, refuse to license abortion facilities, simply because they do not agree with the health care that is provided there.

This year alone, 12 states have enacted 25 different abortion bans. That’s on top of the nearly 500 abortion restrictions enacted in states since 2011.

This obsession with abortion has not only proven detrimental to our patients but has lasting effects on the health of the entire community. While Missouri goes to incredible lengths to ban
abortion, maternal mortality is rising, and black women are dying during pregnancy at three times the rate of white women.

Despite this and many other serious public health crises, anti-abortion politicians continue to divert precious resources to the overregulation and targeting of abortion providers.

In Missouri, I am happy to say that despite the unrelenting attacks on reproductive health care, our doors remain open for now.

Planned Parenthood will continue the work of ensuring that every patient who needs and wants an abortion is able to access that care with dignity and respect — and consistent with their values in spite of the impossible landscape. In my exam room, abortion is not political; it’s simply health care. It’s time we listen to the majority of Americans: put an end to this rampant abuse of power and do what is necessary to keep abortion safe, legal, and accessible.

Thank you.