

Public Health Integrity Act

Summary: No private organization that holds itself out as a medical clinic shall receive state funding if it promotes any of those medical falsehoods.

[BILL DRAFTING NOTE: This could be a bill or a budget amendment. Further, it doesn't matter how many medical lies your bill highlights. The first two or three are the easiest to prove, so you might use only those. The point is to challenge opponents to defend their indefensible lies and publicize this truth-versus-lies debate.]

SECTION 1. SHORT TITLE

This Act shall be called the "Truth in Reproductive Health Act."

SECTION 2. FINDINGS

The legislature finds that:

1. Individuals and organizations have the right to lie about abortion; they are welcome to say whatever they like.
2. However, if organizations receive state funding and represent themselves as medical providers, it is necessary and appropriate to require them to refrain from asserting medically inaccurate information that could harm the health of [State] residents.
3. False or misleading information about the effects of abortion hinders a resident's ability to make an informed decision and may delay appropriate medical care when time is an important factor.
4. The American Medical Association (AMA) insists that: "any entity that represents itself as offering health-related services should uphold the standards of truthfulness, transparency, and confidentiality that govern health care professionals." The AMA further urges that: "public funding only support programs that provide complete, non-directive, medically accurate health information to support patients' informed, voluntary decisions."²²³
5. The American College of Obstetricians and Gynecologists (ACOG) states that: "People seeking reproductive health care must have access to comprehensive, evidence-based, nonjudgmental health care and information from qualified professionals, regardless of whether they decide to continue a pregnancy or seek abortion care."²²⁴

6. It is unconscionable for the government to use taxpayer funds to support the expression of health care information that is demonstrably false and potentially damaging to clients.

SECTION 3. TRUTH IN REPRODUCTIVE HEALTH CARE

After section XXX, the following new section XXX shall be inserted:

MEDICALLY ACCURATE INFORMATION FROM HEALTH CARE FACILITIES THAT RECEIVE GOVERNMENT FUNDING

(A) No organization shall be eligible for any type of grant or subsidy from the state if, while presenting itself as providing health care services, its staff or volunteers disseminate oral or written information asserting any of the following:

1. That having an abortion raises the risk of developing breast cancer;
2. That having an abortion raises the risk of infertility;
3. That having an abortion raises the risk of negative emotional or mental health problems or increases the risk of suicide ideation;
4. That medication abortion poses greater health risks than other common prescription drugs or than childbirth; or
5. That an abortion procedure poses greater health risks than other common medical procedures or than childbirth.

(B) A facility presents itself as providing health care services if it does any of the following:

1. Advertises itself, including on the Internet or on signage, as if it provides medical services, or uses medical imagery in promotional materials, including but not limited to websites, social media, and printed materials.
2. Is made to look like a medical office with medical examination tables or equipment not generally found in a nonmedical counseling center.
3. Has staff providing medical services or medical counseling who are not licensed medical providers.
4. Claims to comply with the requirements of the Health Insurance Portability and Accountability Act (HIPAA).

5. Claims that clients are able to file complaints against the facility with a particular federal or state health agency, if those agencies do not accept complaints for the type of facility being run.
6. Lists in advertising or on-site a medical director who is not licensed under [cite code] as a physician, [and if appropriate, licensed as a physician assistant or nurse practitioner] or lists a medical director who is licensed but does not directly supervise, in person, the provision of all medical services provided at the facility. [NOTE: Many states have laws or regulations that define “direct supervision.” Ask your in-state advocates and bill drafters to ensure that the legislation uses language that fits your state.]
7. Requires clients to fill out an intake form before receiving services which asks for personal health information, such as a listing of prescriptions the client is taking or a listing of medical conditions that are unrelated to establishing a client’s pregnancy.

SECTION 4. EFFECTIVE DATE

This law shall become effective on July 1, 20XX.