JUN 24 2021

June 25, 2021

## Clerks REPRODUCTIVE HEALTHCARE FOR ALL OREGONIANS

From the desk of: Representative Andrea Valderrama

Dear Colleagues,

E CAREPRESENTATION



Research has shown that healthcare consolidation drives up prices without improving quality. What's more, some affiliations, acquisitions, and mergers have resulted in the denial or delay of essential reproductive, LGBTQ, and compassionate end-of-life care. Consolidation, if left unchecked, will make Oregon's price—and equity—problems worse.

The COVID-19 pandemic has compromised access to reproductive health care in significant ways. A Guttmacher report<sup>1</sup> found that while 40% of women have changed their plans about when and how many children to have due to the pandemic, 1-in-3 women, disproportionately Black and Hispanic, reported the pandemic caused them to delay or cancel an appointment to receive reproductive care.

Experts predict that COVID will further accelerate consolidation, as independent providers are increasingly vulnerable to acquisition by larger health systems. Last month, the *New York Times* published <u>"Buoyed by Federal Covid Aid. Big Hospital Chains Buy Up Competitors"</u> which highlights the cost to patients of growing consolidation in healthcare and how COVID relief payments are bolstering large health systems and contributing to consolidation.

Urgent action must be taken if we hope to rein in healthcare costs (for employers and individual patients) and prioritize access to quality, equitable care. HB 2362-B is a critical transparency and accountability tool. Mergers among small providers, or those that expand or maintain access to essential services will continue to move forward with no additional requirements or under a simple, fastpass review. But large mergers or acquisitions that are likely to increase costs to consumers or reduce access, deserve a second look and small, independent providers deserve to have more bargaining power. Above all, communities must have a voice in vetting mergers and acquisitions that could impact their access to critical reproductive and gender-affirming care.

Now is the time to pass HB 2362-B. In the wake of a pandemic, we must ensure that all Oregonians are able to access quality, affordable, and comprehensive healthcare services. HB 2362 is not trying to stop mergers, it is trying to ensure that health equity—not profit—is centered in the process.

Reproductive voices in support include:







ABORTION ACCESS FUND

<sup>&</sup>lt;sup>1</sup>Based on a national survey conducted by the Guttmacher Institute over the week of April 30 - May 6, 2020 and included 2,009 respondents who self-identified as cisgender women aged 18–49 who had engaged in penile-vaginal sex. Our organizations acknowledge the limitations of cisgender women exclusive studies as inherently exclusionary. We recognize and are working to be more inclusive of the diverse population of transgender and gender nonbinary people who have sexual and reproductive health needs and experiences that can be similar to but also unique from those of cisgender women.