

Senate Health and Human Services Committee

Sophie Walsh 271-3469

HB 606, relative to a patient's right to medically appropriate care for reproductive disorders.

Hearing Date: April 23, 2025

Time Opened: 9:06 a.m.

Time Closed: 9:58 a.m.

Members of the Committee Present: Senators Rochefort, Avard, Birdsell, Prentiss and Long

Members of the Committee Absent: None

Bill Analysis: This bill affirms a patient's right to medically appropriate care for certain reproductive disorders.

Sponsors:

Rep. Read

Rep. Layon

Rep. Newell

Rep. Popovici-Muller

Rep. Spahr

Who supports the bill: 106 people signed in support of the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (Sophie.Walsh@gc.nh.gov).

Who opposes the bill: 17 people signed in opposition of the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (Sophie.Walsh@gc.nh.gov).

Who is neutral on the bill: 1 person signed in neutral to the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (Sophie.Walsh@gc.nh.gov).

Summary of testimony presented:

Representative Ellen Read, Rockingham – District 10

- Representative Read shared a personal story about her experience with irregular menstrual cycles. She raised concerns about this while in college but was not diagnosed with polycystic ovarian syndrome (PCOS) until she was in her late twenties.
- She noted that a hysterectomy is one of the treatment options for PCOS when bleeding is unmanageable.

- Representative Read explained that while her husband was able to receive a vasectomy without being questioned, she sought a hysterectomy for a span of 12 years and was denied by 6 different doctors.
- The doctors told her that she may change her mind about not wanting children, or that a future partner may want children. She felt as though the preferences of a hypothetical person were prioritized over her medical condition.
- Representative Read was not approved for a hysterectomy until she was deemed old enough at 38 years old.
- She described this as a patronizing experience and recalled questioning if she was doing something wrong.
- Representative Read has since found online communities of women who have had similar experiences. She noted that in her research, she has learned of two cases in which women with cancer were denied hysterectomies to preserve fertility, and later died from their cancer.
- She also noted that there have been cases in which women have been denied certain malaria treatments due to potential sterilizing effects, even when they have stated that they do not want children.
- These online communities have published a list of sterilization-friendly doctors, which includes 4 in New Hampshire. One of those doctors has since retired.
- Representative Read explained that medicine is not entirely separate from societal norms, as cultural and personal beliefs can influence medical decisions. She emphasized that this is a medical freedom issue.
- Representative Read reviewed the bill and explained that it would establish protections in cases where sterilization is medically necessary.
- Under this bill, physicians could still deny procedures based on medical or religious reasons, as well as payment concerns. They could not deny procedures based on age, number of children, marital status, or fertility goals contrary to the patient's statement.
- Physicians may require patients to sign informed consent and waive all damages. According to the bill's second paragraph, a patient who signs informed consent or a waiver has no civil right of action for damages specifically for being sterilized.
- The bill states that any physician in violation of this right could be disciplined by the Medical Board, which has broad discretion under existing law. No criminal discipline is included in the referenced chapter.
- Representative Read explained that "medical condition" is defined as any disease, disorder, syndrome, symptoms, genetic predisposition or medical history, or the state of being medicated that either affect the reproductive

system or make reproduction not advisable for either the medical interest of the patient or for potential children.

- She noted that the bill includes an appeals process through the Medical Board for patients who disagree with their doctor's judgement on medical necessity.
- Representative Read explained that this bill has received a lot of support the past two years in the House. It has made the House the first legislative chamber in the U.S. to formally assert the right to not be denied medically appropriate treatment because a doctor thinks they know better than patients regarding if they do or do not want kids.
- She explained New Hampshire could become a destination for patients seeking access to this care, potentially helping preserve maternity services in rural areas of the state.

Representative Loren Selig, Strafford – District 10

- Representative Selig stated that after the birth of her second child at 37, she sought sterilization, but the physician directed the question of consent to her husband.
- Ten years ago, she began experiencing complications from her uterus. She had consulted six different doctors and waited over a decade before receiving a hysterectomy. The surgery required her to travel out of state, and the physician told her the procedure should have been done years earlier.
- Representative Selig stated that society tends to prioritize childbearing over women's health. She emphasized the importance of respecting women's understanding of their own bodies and making it easier to access necessary medical procedures.

Representative Erica Layon, Rockingham – District 13

- Representative Layon described the bill as necessary to prevent patients from being denied care based on assumptions about their future desire to become parents or the number of kids they have.
- She emphasized that the bill only applies to individuals who would otherwise be eligible for treatment under different social circumstances. The bill does not provide unrestricted access to sterilization procedures, but instead removes discriminatory denials based on personal judgment.
- Representative Layon stated this is a common-sense bill that could save maternity wards, especially in the north country. She believes that this could support the continuation of maternity wards in rural areas by attracting world-class reproductive care.

Representative Daniel Popovici-Muller, Rockingham – District 17

- Representative Popovici-Muller stated that he is speaking in support of this bill.
- He described the current version of the bill as streamlined and clear, ensuring that patients could not be denied care solely because a physician believes they might want children in the future.
- He noted that physicians will retain the right to refuse care based on medical reasoning, religious belief, or other valid grounds.
- He noted that the bill's liability waiver is limited to protecting physicians from lawsuits based on a patient later changing their mind about sterilization.
- Representative Popovici-Muller said he believes the past objections to this effort were often rooted in disbelief that this type of practice is actually occurring.

Representative Jodi Newell, Cheshire – District 4

- Representative Newell read testimony submitted to the Committee on behalf of Lauren Fitch, who was diagnosed with endometriosis at 18 years old and has two other autoimmune diseases.
- Due to menstrual issues and a family history of reproductive health issues, Ms. Fitch began asking about sterilization at 15 years old. She knew since childhood that she never intended to be a parent.
- Four years ago, Ms. Fitch's kidneys became septic after a miscarriage, which she emphasized could have been avoided if her request for sterilization at 18 had been honored.

Hon. Betty Gay

- Ms. Gay explained that while she has not had to face any of these reproductive issues, she is speaking in support of this bill.
- She was shocked to learn how difficult it is for many women to obtain a hysterectomy.
- She urged the Committee to take these stories seriously and acknowledged that the bill is carefully drafted.

Hannah Smith

- Ms. Smith stated that she is speaking in support of this bill.
- She said she had to fight for 8 years to get a hysterectomy. She was initially denied for being too young and was told that despite her professional and education plans, pregnancy was a cure for endometriosis.
- After several years, she was able to get a second opinion from a doctor who was willing to perform the hysterectomy. The doctor said the procedure should have happened much sooner, and discovered five fibroids during surgery, one of which was adhered to her ureter. She was additionally diagnosed with adenomyosis, which would have made it impossible for her to carry a child anyway.

- Ms. Smith urged the Committee to act, so that no one else would have to go through what she did.

Jenna Bosi

- Ms. Bosi explained that she has had endometriosis since she was 12 years old, and did not receive a hysterectomy until she was 29 years old. By that point, she had undergone 12 laparoscopic procedures and experienced a stroke from hormonal therapy. She also suffered multiple miscarriages and dealt with adenomyosis, fibroid tumors, and cervical cancer.
- Despite having a child, Ms. Bosse was repeatedly told to prioritize potential future pregnancies over her health and the wellbeing of the child she does have.
- Ms. Bosi expressed hope that this bill would ensure women could access care without having to endure similar suffering.

Jade Flad

- Ms. Flad stated that she is speaking in support of this bill and believes it can help many other women like her.
- Ms. Flad shared a personal story about her experience with menstrual issues dating back to her adolescence.
- She requested a hysterectomy at age 30 after her symptoms became severe following the birth of her second child.
- While the doctor questioned whether she might want more children, Ms. Flad's husband was able to receive a vasectomy at 30 years old with no questions asked.
- When she brought this up to her doctor, they asked what would happen if she remarries. Ms. Flad said she is certain that her husband was not asked this.
- Once Ms. Flad's condition worsened and became so severe that she was experiencing cyclical vomiting, she was able to receive a hysterectomy in hopes of relieving some of the stress on her body. When in surgery, she was diagnosed with endometriosis. She emphasized that this delay in care cost her years of her life and compromised her ability to care for her children.
- She said this is an issue for all women, even those with children.

Cathy Stratton, New Hampshire Medical Society

- Ms. Stratton stated that she is speaking in opposition to this bill.
- She expressed concern about the bill's requirement that physicians perform procedures that may conflict with their training or ethical judgement.
- She said the penalties proposed in this bill will harm the patient-physician relationship and have ripple-effects on healthcare provided in New Hampshire.

- She noted a potential conflict with federal rules, as Medicaid regulations require sterilization patients to be at least 21 years old.
- Senator Birdsell asked if Ms. Stratton could identify any reason why a patient would not be given the opportunity by their provider to take care of their own health when they are suffering.
- Ms. Stratton stated that she cannot speculate on this, as she is not a physician, and the Medical Society is not present for these individual encounters. She emphasized that we can all empathize with the traumatic experiences expressed, but reiterated that physicians would be penalized by this bill for making clinical decisions.
- Ms. Stratton noted that there are many options available that do not require physicians to act against their own judgement. Patients have the right to seek a second opinion, and physicians can offer referrals if they feel ethically conflicted.
- Senator Birdsell noted that men are not typically required to seek a second opinion when requesting sterilization.
- Ms. Stratton explained that contradiction exists as it does everywhere. The Medical Society supports access to a full spectrum of care for women.
- Senator Rochefort asked whether Ms. Stratton believes it is ethical that men often are given no challenge, while women must fight for the same care.
- Ms. Stratton stated that there should be equality and parity when it comes to healthcare, and physicians do their best to make these decisions. The Medical Society would advocate for further training to promote equitable care if there is a need.
- Senator Long inquired about training that may not be aligned.
- Ms. Stratton clarified that her concern is not about medical training, but rather about needing to trust the patient-provider relationship and allowing physicians to make decisions in congruence with their training and experience.
- She noted that different physicians may make different clinical judgements, which is why patients have the option to get a second opinion.
- Ms. Stratton emphasized that she is not speaking against the procedure, but rather noting concerns with the bill itself regarding requirements and penalties.
- Senator Long asked what specific penalties are of concern.
- Ms. Stratton explained that the language in the first paragraph about physicians violating this right being disciplined pursuant to the chapter is vague.
- She also noted terminology in the bill found to be imprecise from a clinical standpoint by physicians, including “physiological medical condition” and “medically advisable.”

- Senator Avard inquired about the age discrepancy between this bill and Medicaid regulations.
- Ms. Stratton explained that federal Medicaid law stipulates that sterilization can only be performed on patients who are 21 years old and older. This created a legal contradiction for physicians treating Medicaid recipients.
- Senator Prentiss inquired about potential barriers in regards to insurance coverage, and Ms. Stratton said she would research the matter and provide information for the Committee.

Virginia Sykes

- Ms. Sykes stated that she is speaking in support of this bill.
- She explained that while this issue primarily affects women, it does also have an impact on men.
- She explained that unconscious biases, often shaped by cultural and institutional norms, can influence clinical decisions.
- She noted that technology offers different options to preserve fertility through harvesting sperm or eggs. She emphasized that quality of life improving procedures should not be withheld due to potential sterilization.
- She explained that this bill is not forcing doctors to do anything, as they can provide referrals.
- Ms. Sykes noted two different cases of men being denied proper treatment; one had a family history of testicular cancer and had to receive two surgeries because their original request of removing both testicles was denied, and the other was prescribed a long course of antibiotics instead of direct treatment because the physician was prioritizing fertility preservation.

Representative Katherine Prudhomme-O'Brien, Rockingham – District 13

- Representative Prudhomme O'Brien stated that she is speaking in support of this bill and emphasized its bipartisan support.
- She shared a personal story about her experience with difficult menstrual cycles and questioned how women are expected to maintain careers while dealing with chronic pain and being forced to miss work due to unaddressed medical issues.
- She referenced the previous suggestion about obtaining a second opinion and explained she and many other women have consulted several physicians.
- Representative Prudhomme O'Brien explained that she was recommended birth control by physicians, which is a risky option for her due to her blood clotting disorder. She ultimately chose to take that risk in hopes of helping the severe pain she was in.

- Representative Prudhomme O'Brien emphasized that this is sexism and said that is not something she says lightly. This issue is a widespread problem impacting a large portion of the population.

Stephen Scaer

- Mr. Scaer stated that he generally is in opposition to laws that compel physicians to act, except in rare and urgent life-saving situations.
- He stated that physicians could reasonably claim that they are being required to act against their consciences.