

House Bill 1509

January 30, 2023

Chair Weisz and members of the Human Services committee. My name is Ana Tobiasz. I am a Maternal Fetal Medicine physician in Bismarck. I have been practicing high risk obstetric care in this state for over 5 years. Through my years of post-medical school training in Michigan (4 years of ob/gyn residency), Tennessee (3 years of maternal fetal medicine fellowship), and since returning to North Dakota, I have cared for patients after they have seen a pregnancy resource center earlier in the pregnancy. Due to this experience, I can attest to the fact that these facilities as they are currently run, are generally not staffed by anyone with any medical experience. This includes the facilities within our state. They frequently employ advertising that is deceptive and will give the perception that they are a qualified legitimate medical facility. Patients generally disclose to me if they have seen these centers once they are established for care with me, and frequently will have received an ultrasound and are given a gestational age and due date of their pregnancy. Records of this information as well as imaging review to ensure the accuracy is nearly impossible to obtain. Patients not only will make decisions about continuing their pregnancy based on this information, and will often make decisions about when to seek initial prenatal care for their pregnancy based on this information. I frequently will have to adjust their due date of their pregnancy due to the inaccurate information they received at the pregnancy resource center, which causes confusion for my patients and sometimes compromises their obstetric care. Frequently after patients have seen these facilities for an initial visit, they have received deceptive information regarding pregnancy, the risks of pregnancy, inaccuracies about contraception, and commonly receive an ultrasound and are given a due date that was inaccurate because the staff performing these procedures frequently have either minimal training to perform these procedures or minimal ongoing training and oversight. The individuals providing the early pregnancy counseling frequently have no specific medical training. When you try to confirm information about the credentials of the individuals who provide care to women at these centers, there is no information to be found. In contrast, if you were to review my credentials, it is publicly available and displayed so patients know who is providing their care as well as the type of training they have received to be qualified to give them medical advice.

Given that we have several legislative bills that are intent on providing additional taxpayer funding to these centers as an "alternative to abortion" program, these centers should at a minimum be run by individuals with either a medical background and the staff providing counseling and procedures should be qualified to do so. Any other clinic or medical facility has standards their employees must meet to be hired including licensing and specific educational backgrounds and ongoing competencies and training that needs to be completed in order to continue seeing patients. I am uncertain why pregnancy crisis centers to this date have been exempt from this considering the number of patients they see and give medical advice to.

I recommend a Do Pass on House Bill 1509. Women seeking resources about pregnancy and reproductive healthcare otherwise will continue to receive inaccurate information about their healthcare from untrained individuals.