

Chairman Ruby and Members of The Committee,

As you know, I am a doctorally prepared nurse practitioner and health policy expert.

I urge you to **oppose HB 1373**. This bill threatens to set back a decade of progress in reproductive healthcare, restricting access to IVF, miscarriage care, and life-saving pregnancy treatments—essential services for families who want children more than anything.

Those in favor of this bill claim it will not impact IVF, but this demonstrates a fundamental misunderstanding of how legislation is written, interpreted, and enforced. As someone who has spent years studying health policy, I can tell you that defining life from fertilization puts fertility treatment at risk, creating unnecessary legal uncertainty and driving specialists out of the state. This will limit options for North Dakota families struggling with infertility.

Beyond IVF, this bill will delay medical intervention for pregnancy complications like miscarriage and ectopic pregnancies—putting women’s lives at risk. Healthcare providers will be forced to navigate legal risks instead of focusing on the best treatment for their patients. This is not protecting life; it is creating harm.

I have stood before this committee since 2019, fighting for families facing infertility. Voting “no” on bills like this has real consequences—it means families lose years in their ability to conceive due to the state’s legislative schedule. Every vote against these bills is a vote against families trying to build their future.

I urge you to listen to those of us who understand the dangers of this bill—medical and legal experts who have dedicated our careers to patient care and reproductive health policy. Do not allow misinformation and personal bias to dictate policy that impacts real lives.

I respectfully ask you to **vote NO tomorrow on HB 1373** and instead focus on policies that expand access to care, not restrict it.

#### 1. Threat to In Vitro Fertilization (IVF) and Fertility Treatment

As a provider who has helped countless families struggling with infertility, I am deeply concerned that HB 1373 could criminalize standard IVF practices, making it nearly impossible for patients in North Dakota to access necessary reproductive care. By defining an “unborn child” as a human being from the moment of fertilization, this bill would:

- Prevent clinics from safely handling embryos
- Increase legal liability for fertility specialists, leading to reduced access to care and driving specialists out of the state.
- Force patients to seek care out-of-state, creating financial and emotional barriers for families already struggling to conceive.
- While some in favor of this bill argue it will not impact IVF, this statement reflects a fundamental lack of understanding of how legislation is written, interpreted, and enforced—a dangerous oversight when dealing with medical care and reproductive rights.

## 2. Criminalization of Miscarriage & Delayed Emergency Care

- While the bill claims to exempt “spontaneous miscarriage,” in practice, it creates dangerous uncertainty for healthcare providers treating pregnancy complications.
- Miscarriage Management: Many miscarriages require medical or surgical intervention (such as D&C procedures), which under HB 1373, could be scrutinized as potential fetal harm. This will cause delays in care, increasing infection risk and emotional trauma for patients.
- Ectopic Pregnancy Treatment: This bill could make physicians hesitant to act quickly in life-threatening pregnancy complications. If the law is interpreted too broadly, providers may wait too long to intervene, putting patients' lives at risk.

## 3. Restricting Evidence-Based Pregnancy Care

- This legislation would undermine medical decision-making, forcing healthcare providers to navigate legal risks rather than focusing on what is best for the patient. Patients with high-risk pregnancies may be denied lifesaving treatments due to fear of legal repercussions.
- Standard prenatal care, including genetic screening, testing, and even routine ultrasounds, could come under increased scrutiny.

## 4. Government Overreach in Personal & Medical Decisions

HB 1373 represents unprecedented government interference in the doctor-patient relationship. Medical professionals—not politicians—should be making decisions about pregnancy care, miscarriage management, and fertility treatment. Patients deserve the right to make deeply personal, complex medical decisions without fear of legal consequences.

Thank you for your time,  
Dr. Tara Harding DNP, FNP-C