



THE COUNCIL
OF
THE CITY OF NEW YORK
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CHRISTINE C. QUINN
SPEAKER

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September 15, 2008

Secretary Michael O. Leavitt
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Leavitt:

I am writing to express my strong opposition to proposed rule 73 Fed. Reg. 50274 that purports to interpret the Church, Coats and Weldon Amendments.

Existing protections for health care providers that refuse to offer certain reproductive health services balance the rights of professionals and institutions with the rights and needs of patients. The proposed rule appears to upset this careful balance.

The regulation is written to allow anyone—not just doctors and nurses but a wide range of other workers at health care facilities—to refuse to participate in or to provide medical care that does not comport with their religious beliefs. The proposal makes no effort to ensure that patients' rights are protected. Adopting this rule would place dogma above medical need. It is unconscionable and a potentially life-threatening danger to the women of America.

I am particularly concerned about my constituents who must rely on publicly funded medical services. The proposed rule does not clarify what safeguards a health care facility is required to have in place when a medical professional refuses to provide a particular reproductive health service. When a woman with limited options for health care is denied services by a provider, will she be referred to another provider that can fully treat her or will her health and her rights be placed in jeopardy because of her provider's beliefs? Striking a balance between the religious liberty of individual health care providers cannot come at the expense of seamless and complete care for the patient.

Thirty-four states, including New York, currently have laws and policies that could be jeopardized by the proposed rule. These laws include protections to ensure women's access to birth control and emergency contraception in hospitals and pharmacies, and from insurance companies. For example, in 2002, the New York City Council passed a

set of laws to address a demonstrated lack of access to emergency contraception in the city. The first of these laws require pharmacies to post signs regarding the availability of emergency contraception. The second law requires hospitals to make emergency contraception available to rape victims. The third mandates that city health facilities must provide emergency contraception.

At minimum, the proposed rule would invite legal challenges to policies and programs similar to the city's emergency contraception laws that states and localities will have to spend precious time and money defending. At worst, the proposal would limit New York City's ability to enforce these laws, undermining laws and programs put in place by duly elected officials. This would significantly impede my ability to respond to the needs of my constituents.

Many New Yorkers are very lucky. We live in a large metropolitan area with many health care providers in a small geographic area. Not all Americans have such options. As a local elected official, I am deeply concerned by the federal government's attempt to undermine hard-won protections intended to help women access basic health care. At a time when our nation is in economic crisis and Americans are already struggling to balance a rising cost of daily life with the need for adequate health care, the Department of Health and Human Services should be working to increase access to health care, not restrict it. I urge you to withdraw the proposed rule.

Sincerely,

A handwritten signature in black ink, appearing to read 'Christine C. Quinn', with a stylized flourish at the end.

Christine C. Quinn
Speaker