



## OFFICE OF THE HOUSE SPEAKER

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### NEWS RELEASE

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## **Speaker Rayfield, Attorney General Rosenblum call for action to improve reproductive health and access to care**

*Work group recommendations give guidance on protecting, strengthening, and expanding abortion access during the 2023 legislative session*

SALEM – As abortion bans in states across the country put the health and safety of patients and providers across the country, a report released Wednesday outlined a path forward to strengthen reproductive rights in Oregon and expand access to care across the entire state.

House Speaker Dan Rayfield, Attorney General Ellen Rosenblum, Representative Andrea Valderrama and Senator Kate Lieber testified before the House Interim Committee on Health Care that recommendations from a monthslong work group on improving reproductive health and access to care will be a top priority during the 2023 legislative session.

“This report was directly informed by patient and provider experiences,” Speaker Rayfield (D-Corvallis) said. “Oregon has spent years preparing for the fall of Roe v. Wade. But the right to access an abortion does not mean abortion care is accessible to all Oregonians who need it. Gaps in reproductive health care still exist in many parts of the state and abortion bans across the country make an impact in Oregon. Every person should have the right to make their own decisions on their own health care, no matter where they live.”

“For generations, Americans relied on the constitutional right to abortion to make deeply personal decisions about their lives. But last June, our highest court declared that right out of existence. While Oregon still has some of the strongest protections in the country, we also border a state—Idaho—with a near total abortion ban. As your attorney general, my promise to Oregonians is simple: the Department of Justice will never stop defending your reproductive rights,” said Attorney General Rosenblum. “I want to thank the Speaker’s Office for bringing these stakeholders together, including from my office, to ensure that Oregon continues to be a leader in protecting full access to reproductive healthcare for all who need it.”

The report includes policy, administrative, and budget recommendations to protect, strengthen, and expand equitable access to all forms of reproductive care. Recommendations include but are not limited to proposals that:

- Improve access to care in medically underserved regions of the state
- Build up the health care workforce and expand opportunities for continued learning
- Protect individuals located in Oregon from criminal and civil liability for receiving, supporting, or providing reproductive and gender-affirming care
- Close gaps in insurance coverage for patients
- Invest in patient and consumer education and outreach
- Protect Oregonians from misleading and biased medical claims by crisis pregnancy centers
- Expand existing rights to access health services

Speaker Rayfield [formed](#) the work group in May in response to the impending *Dobbs v. Jackson Women's Health Organization* decision from the United States Supreme Court, which later overturned 50 years of precedent and the constitutional right to an abortion. In the time since that decision, many Americans face jail time for seeking an abortion, along with the doctors, nurses and other providers who provide that care.

“While our work in this state must be applauded, legislative leadership cannot become complacent,” the report states. “Existing gaps in access to care require immediate remedy and the threat of criminalizing health care choices only grows.”

The work group’s goal was to identify how Oregon can protect, strengthen, and expand equitable access to reproductive health care and other services that have been under attack at the state and federal levels.

The entire report from the Reproductive Health and Access to Care Work Group can be found [here](#). The 82nd Oregon Legislative Assembly will be sworn in on Monday, January 9 and the 2023 legislative session will begin on Tuesday, January 17.

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