

April 27, 2023

Senate Health & Human Services Committee  
Colorado General Assembly  
200 E Colfax Avenue  
Denver, Colorado 80203

**Re: In Support of HB 1218, “Patients’ Right to Know Act”**

Dear Chairperson Fields and Members of the Senate Health & Human Services Committee:

I write to you on behalf of Physicians for Reproductive Health (PRH) in support of the Patients’ Right to Know Act (HB 1218). PRH is a physician-led national advocacy organization working to ensure access to equitable, comprehensive reproductive health care for the communities we serve. Our network includes physicians of various specialties from across the country, including Colorado, committed to meeting the needs of the patients they serve. HB 1218 will increase transparency in health care by informing patients about health care providers’ refusals of care for nonmedical reasons. As a network of providers, we have witnessed first-hand the harm health care refusals have on patients and communities.

Federal and state laws allow hospitals and health care facilities to deny various types of care based on the beliefs of hospital executives and boards, as well as other nonmedical factors. Because hospitals often fail to publicly disclose nonmedical restrictions on services, patients too-often lack vital information necessary to make critical decisions about their health and where to receive care. The Patients’ Right to Know Act would address this lack of transparency by requiring hospitals and health care facilities to inform patients and the Department of Public Health & Environment (DPHE) about nonmedical restrictions on care. This legislation would empower patients across Colorado to better make decisions about where to seek health care because they would have access to information about which providers deny care and what services they refuse to provide.

The denial of medically appropriate and often lifesaving health care services and information can occur without regard for patient wellbeing, even in emergencies. For example, a hospital may deny emergency contraception to a survivor of rape, timely abortion care for a pregnant woman whose life is at risk,<sup>1</sup> compassionate end-of-life care to a suffering patient, sterilization procedures for patients seeking them, or gender affirming care for trans patients. There is no requirement that medical providers warn patients that they will be denied care, and too often, patients may not be informed of all of their medical options. This lack of information can result in patients wasting time and money, being prevented from receiving needed care, facing discrimination, and even suffering increased risk in emergency situations.

Health care refusals force patients to delay or forgo the care they seek, threatening their health and their lives. A delay in treatment while a patient locates another provider or institution, if they are able to do so, can result in worse health outcomes. For patients who live in rural areas or in areas with a high proportion of religiously affiliated health systems, patients may not have access to alternative providers.

---

<sup>1</sup> A nationally representative survey found that 11% of participants had someone on their plan who was denied reproductive care. Hebert LE, Wingo EE, Hasselbacher L, Schueler KE, Freedman LR, Stulberg DB. Reproductive healthcare denials among a privately insured population. *Preventive Medicine Reports*. 2021;23:101450.

This is especially true for some cities and towns in Colorado, for example in Durango, Grand Junction, and Lafayette, where the sole community hospitals are religious hospitals that refuse to provide certain types of care.<sup>2</sup>

Moreover, patients that are uninsured, whose insurance networks do not include providers that will meet their needs, or who are unable to afford to pay out of pocket for services or travel to another location, may also effectively be blocked from necessary care. For patients in medical emergencies, these refusals can have dire consequences. With the Patients' Right to Know Act in place, patients could learn which types of care are available and which are no longer offered, both at the point of service as part of informed consent and also through a public list maintained by DPHE.

Health care refusals are especially concerning because individuals who already face multiple and intersecting forms of discrimination are more likely to encounter refusals. Research shows that Black, Indigenous, and other people of color disproportionately give birth at Catholic hospitals are more likely to be denied necessary care including abortion or tubal ligation.<sup>3</sup> Additional research has found that access to care is increasingly difficult for LGBTQ people. A study from 2014 found that 8% of LGB people and 27% of transgender people reported that a doctor or other health care provider had refused to see them because of their actual or perceived sexual orientation or gender identity in the last year.<sup>4</sup> In 2019, nearly one in five LGBTQ people, including 31% of trans people, report that it would be very difficult or impossible to get the health care they need at another hospital if they were turned away.<sup>5</sup>

Pregnant patients should feel comfortable that the hospital they select will provide life-saving care they need in the event of a complication. And LGBTQ patients should be able to determine where they will receive the care they need without judgment or discrimination. No one should have to spend time and money seeking health care only to be unexpectedly turned away by hospitals that prioritize the beliefs of executives and boards over the health and safety of their patients. This legislation would allow patients to learn about which facilities deny various types of care and to make better informed decisions about their health care.

This bill does not change federal law or remove existing denial of care provisions, and patients may face limited choices because of their insurance coverage, costs, or for other reasons. However, the Patients' Right to Know Act (HB 1218) is an important step that will help protect patients and raise awareness about denial of care by Colorado hospitals. We urge you to swiftly pass this measure.

Sincerely,

Dr. Kristyn Brandi, MD, MPH, FACOG  
Board Chair  
Physicians for Reproductive Health

---

<sup>2</sup> Solomon, T., et al. (2020). *Bigger and Bigger: The Growth of Catholic Health Systems*. Community Catalyst. Retrieved from <https://www.communitycatalyst.org/resources/publications/document/2020-Cath-Hosp-Report-2020-31.pdf>.

<sup>3</sup> Shepherd, K., et al. (2018). *Bearing Faith: The Limits of Catholic Health Care for Women of Color*. Public Rights & Private Conscience Project and Public Health Solutions. Retrieved from <https://lawrightsreligion.law.columbia.edu/bearingfaith>.

<sup>4</sup> Tillery, B. (2014). *When health care isn't caring*. Lambda Legal. Retrieved from <https://www.lambdalegal.org/publications/when-health-care-isnt-caring>.

<sup>5</sup> Mirza, S. A., & Rooney, C. (2019, July 19). *Discrimination prevents LGBTQ people from accessing health care*. Center for American Progress. Retrieved from <https://www.americanprogress.org/article/discrimination-prevents-lgbtq-people-accessing-health-care/>.