



California Legislature

August 4, 2020

John A. Pérez, Chair
University of California Board of Regents
Office of the Secretary and Chief of Staff to the Regents
1111 Franklin St., 12th Floor
Oakland, CA 94607

Re: Affiliations that Impose Religious Restrictions on UC Health Care

Dear Chair Pérez:

As members of the California State Legislature, we have a deep commitment to protecting and advancing access to evidence-based healthcare for all Californians. It is for this reason that we write to express our serious concerns over the University of California's affiliations that impose religious restrictions on UC providers, student trainees and patients. These religious restrictions limit the health care patients can receive, including LGBTQ-inclusive care, abortion care, miscarriage management, tubal ligation, and contraception. The consequences of denying this care can be life-threatening.

COVID-19 reminds us that health is precious, and healthcare should be accessible for all of us. In fact, this crisis makes it all the more clear that hospitals should exist to provide the best possible, science-based care to patients, not impose religion on them and discriminate against them. In recent months, certain U.S. states brazenly attempted to exploit this global pandemic to ban abortion—putting ideology over science time and time again. This is in spite of the fact that the American College of Obstetricians and Gynecologists and seven other expert medical organizations have called for hospital systems and other surgical facilities to recognize that abortion is an essential, time-sensitive service. It's more important than ever that we rely on sound science and medical experts to guide decision-making in healthcare.

The State of California has long been a leader in reproductive freedom and LGBTQ rights, standing up for the rights of all people to receive healthcare and other services free from discrimination. Just last year, amid the onslaught of abortion bans being passed in anti-choice states across the country, Governor Newsom joined the governors of Oregon and Washington calling on other states to strengthen reproductive health laws. That same day, Governor Newsom issued a proclamation reaffirming California's commitment to reproductive freedom for all people. Similarly, last year the Legislature acted to advance sexual and reproductive health by

passing SB 159 to reduce barriers to accessing HIV preventative medications, and SB 24 to require that medication abortion is provided at all UC and CSU campuses.

Many of us were outspoken in our strong opposition to the proposed expanded partnership between UCSF and Dignity Health last year because of the harm to women and LGBTQ patients. Many of us too have been vocal in our opposition to the Trump administration's ongoing efforts to undermine access to reproductive and LGBTQ care by dangerously expanding the ability for healthcare institutions and providers to deny people care citing any religious or moral objection. California, through the work of Attorney General Becerra, has fought against Trump's Refusal of Care rule, against the Trump administration's birth control rule allowing employers to deny coverage for employees based on religious and moral objections, and against every effort to impose religious restrictions on healthcare.

Given the repeated assaults from the Trump administration on access to evidence-based healthcare, it is deeply alarming that the University of California, which has long been a national leader in comprehensive reproductive and LGBTQ-inclusive care, would be willing to involve its providers, student trainees, and patients in arrangements that subject them to religious rules that hold that basic reproductive healthcare is impermissible, and that directly exclude LGBTQ patients. Reproductive and LGBTQ-inclusive care is fundamental, basic healthcare, and we in California must stand strong in protecting it.

We understand that the UC Regents will be adopting new guidelines for UC health system contracts. We think it is of paramount importance that the guidelines the Regents adopt draw what should be an obvious, fundamental line: UC is a public entity and it should not limit its healthcare based on religious doctrine. Furthermore, consistent with state laws—and consistent with UC's own nondiscrimination policies—UC must also take a clear stand on nondiscrimination in its contracts. Any contract between UC and another hospital should affirmatively state that hospital policies prohibiting gender-affirming services for transgender people – or reproductive health services, including access to HIV-preventative medication, like pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) care, education and counseling, that disproportionately affect women and LGBTQ people – are in violation of UC's nondiscrimination policy. To be clear, the UC Health-backed proposal – known as “Option 1” – fails both of these essential requirements.

We reject the view of UC Health that these affiliations, which subject UC personnel, students and patients to religious restrictions on care, expand access to healthcare. To the contrary, when UC clinicians cannot provide evidence-based care, it needlessly results in restrictions on access to care. Patients of color, low-income patients, people living with HIV and AIDS, and others who experience health disparities and systemic barriers to healthcare access are most in need of quality, comprehensive care.

It is also insufficient to assert that patients can simply get treated or transferred elsewhere. In an emergency, a pregnant or LGBTQ person who finds themselves at a religiously affiliated hospital needs immediate care. For example, in her study of the experiences of OB/GYNs working in Catholic hospitals, UCSF's Dr. Lori Freedman found that in some cases ethics committees wouldn't approve terminating a pregnancy even when the mother was facing death, as long as a “fetal heartbeat” could be discerned. Similarly, patients cannot simply seek care at a different hospital because in many regions of the state - including Santa Cruz and increasingly

Napa County - there are only religiously affiliated hospitals. The UC must be the provider that can offer comprehensive healthcare.

The University of California is one of the largest healthcare providers in the state and has an obligation to represent California values. If the Regents vote to move forward with contracts in which UC providers are forced to participate in limiting patient access to reproductive and LGBTQ-inclusive care, it will send a message to the nation that it is permissible to impose such limits on care, just as the Trump administration has repeatedly sought to do. As the UC Regents adopt new guidelines, we strongly urge UC to mandate that any current or future affiliations must explicitly require that UC personnel, students and patients are not subject to religious-imposed restrictions and can provide and receive the full scope of healthcare.

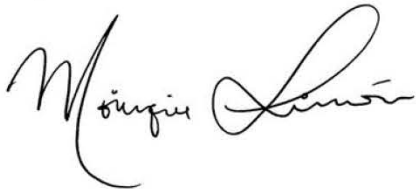
Sincerely,



State Senator Connie M. Leyva
Legislative Women's Caucus, Chair



State Senator Scott Wiener
Legislative LGBTQ Caucus, Chair



Assemblymember Monique Limón
Legislative Women's Caucus, Vice Chair



Assemblymember Todd Gloria
Legislative LGBTQ Caucus, Vice Chair



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Senate President pro Tempore



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State Senator, 5th District



Cristina Garcia,
Assemblymember, 58th District



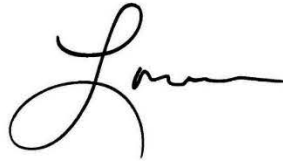
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Assemblymember, 65th District



Susan Talamantes Eggman
Assemblymember, 13th District



Lena Gonzalez
State Senator, 33rd District



Lorena Gonzalez
Assemblymember, 80th District



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Assemblymember, 54th District



Wendy Carrillo
Assemblymember, 51st District

cc: University of California President-designate Dr. Michael V. Drake
University of California Regents