



42           **WHEREAS**, Abortion shield laws protect healthcare providers from licensing or  
43 medical malpractice consequences for providing legal abortion care for an out-of-state  
44 patient<sup>6</sup>; and

45  
46           **WHEREAS**, Abortion shield laws protect patients by barring shielding states from  
47 complying with subpoenas, aiding investigations, or sharing any confidential  
48 information, including health information, with abortion-prohibitive states<sup>6,7</sup>; and

49  
50           **WHEREAS**, Twenty three states have passed shield laws protecting against out-  
51 of-state investigations and legal proceedings for those seeking abortion care, including  
52 neighboring states Michigan and Pennsylvania<sup>8,9</sup>; and

53  
54           **WHEREAS**, Our OSMA “supports patients’ timely access to standard treatment  
55 of nonviable pregnancy, including but not limited to miscarriage, molar pregnancy, and  
56 ectopic pregnancy, in both emergent and non-emergent circumstances,” and “opposes  
57 any hospital directive, policy, or legislation that may hinder patients’ timely access to the  
58 accepted standard of care in both emergent and non-emergent cases of nonviable  
59 pregnancy” (Policy 09 - 2022); and

60  
61           **WHEREAS**, Our OSMA “opposes the imposition of criminal and civil penalties or  
62 other retaliatory efforts against patients, patient advocates, physicians, other healthcare  
63 workers, and health systems for receiving, assisting in, referring patients to, or providing  
64 evidence-based reproductive health care services within the medical standard of care”  
65 (Policy 15 - 2023); and

66  
67           **WHEREAS**, Our AMA “will advocate for legal protections for patients who cross  
68 state lines to receive reproductive health services, including contraception and abortion,  
69 or who receive medications for contraception and abortion from across state lines, and  
70 legal protections for those that provide, support, or refer patients to these services” (D-  
71 5.999); and therefore

72  
73           **BE IT RESOLVED**, That our OSMA will advocate for legal protections for  
74 patients who cross state lines to receive reproductive health services, including  
75 abortion, or who receive medications for abortion from across state lines, and legal  
76 protections for those that provide, support, or refer patients to these services.

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78   **Fiscal Note:**                 \$ (Sponsor)  
79   \$ 50,000 (Staff)

80  
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82

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115

116 OSMA Policy:

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118 **Policy 15 – 2023 -- Strengthening the OSMA Stance on Abortion Policy in Ohio**

- 119 1. The OSMA amend OSMA Policy 10-1990- Policy on Abortion by addition and  
120 deletion as follows:

121 Policy 10 – 1990 – Policy on Abortion

122 ~~1. It is the position of the OSMA that the issue of support of or opposition~~  
123 ~~to abortion is a matter for members of the OSMA to decide individually,~~  
124 ~~based on personal values or beliefs.~~

125 12. The OSMA shall take no action which may be construed as an attempt  
126 to alter or influence the personal views of individual physicians regarding  
127 abortion procedures.

128 23. ~~Items 1 and 2~~ notwithstanding, the OSMA shall take a position of  
129 opposition to any proposed OSMA Ohio legislation or rule that would:

- 130 • Require or compel Ohio physicians to perform treatment actions,  
131 investigative tests, or questioning and OR education of a patient  
132 which are not consistent with the medical standard of care; or,
- 133 • Require or compel Ohio physicians to discuss treatment options  
134 that are not within the standard of care and/or omit discussion of  
135 treatment options that are within the standard of care; and be it  
136 further

137 2. The OSMA supports an individual's right to decide whether to have children, the  
138 number and spacing of children, as well as the right to have the information,  
139 education, and access to evidence-based reproductive health care services to  
140 make these decisions.

141 3. The OSMA opposes non-evidence based limitations on access to evidence-  
142 based reproductive health care services, including fertility treatments,  
143 contraception, and abortion.

144 4. The OSMA opposes the imposition of criminal and civil penalties or other  
145 retaliatory efforts against patients, patient advocates, physicians, other  
146 healthcare workers, and health systems for receiving, assisting in, referring  
147 patients to, or providing evidence-based reproductive health care services within  
148 the medical standard of care.

149 5. The OSMA collaborates with relevant stakeholders to educate legislators and  
150 amend existing state laws so that the term "fetal heartbeat" is not used to  
151 inaccurately represent physiological electrical activity.

152  
153 **Policy 09-2022 – Access to Standard Care for Nonviable Pregnancy**

154 1. The Ohio State Medical Association (OSMA) supports patients' timely access to  
155 standard treatment of nonviable pregnancy, including but not limited to  
156 miscarriage, molar pregnancy, and ectopic pregnancy, in both emergent and  
157 non-emergent circumstances.

158 2. The OSMA opposes any hospital directive, policy, or legislation that may hinder  
159 patients' timely access to the accepted standard of care in both emergent and  
160 non-emergent cases of nonviable pregnancy.

161  
162