



April 21, 2020

Dear Rep. Moran,

As the leadership of the Minnesota Section of the American Congress of Obstetricians and Gynecologists (ACOG), we want to thank you for including language from HF1892 authored by Rep. Kelly Morrison which would change reporting requirements related to drug and alcohol use during pregnancy.

Drug enforcement policies that deter women from seeking prenatal care are contrary to the welfare of the mother and fetus. Seeking obstetric–gynecologic care should not expose a woman to criminal or civil penalties, such as loss of custody of her children, or loss of housing. These approaches treat addiction as a moral failing and we know that addiction is a chronic, relapsing biological and behavioral disorder with genetic components. The disease of substance addiction is subject to medical and behavioral management in the same fashion as hypertension and diabetes. Substance abuse reporting during pregnancy may dissuade women from seeking prenatal care and may unjustly single out the most vulnerable, particularly women with low incomes and women of color planning and medical decisions in conjunction with their doctor. We believe that all providers will make the best decision for their patients and not having this mandate will ensure we can build trust with the women seeking care and they should not be afraid they will face consequences for seeking prenatal care while dealing with the disease of addiction.

Thank you for including this proposal in HF3104.

Respectfully submitted,

Beth Elfstrand MD, Chair
Siri Fiebiger MD, MPH
Christy Boraas MD, MPH
Lisa Erickson MD

Kathy Flory MD
Todd Stanhope MD
Cresta Jones MD
Elizabeth Slagle MD

Bridget Keller MD
Carrie Terrell MD
Lisa Mattson MD
Erin Stevens MD