

Dear Chair Tanzi and members of the House Finance Subcommittee on Human Services:

My name is Máire Amlicke, and I live in Providence, RI. I am an OB-GYN resident at Women & Infants Hospital and a proud women's healthcare provider.

I am testifying in strong support of the proposed one-time budget allocation of \$600,000 for Planned Parenthood of Southern New England (PPSNE) contained in Article 1, Section 1 for EOHHS of the proposed FY 2027 budget (H 7127). This funding will cover the cost of preventive care such as cancer screenings, STI testing and treatment, birth control, and other essential health care for patients who are now blocked from using their Medicaid insurance at PPSNE due to the "defund" provision in the federal H.R.1 law passed in July 2025. PPSNE is a safety net provider serving nearly 10,000 patients last year in Rhode Island. Patients are counting on the state to step in and backfill the blocked federal funding so PPSNE can continue to serve patients who need care now and in the future.

In my clinical work, I see firsthand how access to OB-GYN care has become increasingly limited. Many patients wait months for essential preventive services. PPSNE fills this critical gap. The majority of the care they provide—over 80% of more than 15,000 visits—is focused on preventive and gynecologic services, including contraception, STI testing and treatment, and routine screenings. The impact of this care cannot be overstated. In the past year alone, I cared for two patients on the gynecologic oncology service diagnosed with late-stage cervical cancer, neither of whom had completed a recent Pap smear. Screening like this is highly effective at detecting precancerous changes, yet obstacles such as cost, insurance gaps, transportation, and limited clinic availability leave many without care. For countless communities, Planned Parenthood health centers serve as the only accessible source of sexual and reproductive healthcare, with roughly one in three women having received care at these centers.

PPSNE also serves as a critical access point for medically underserved communities, with nearly half of its patients identifying as people of color (23% Hispanic, 13% Black, 3% more than one race, 3% Asian, 39% white, 19% other/unknown). Given cervical cancer disproportionately affects women of color, PPSNE plays a crucial role in improving access to preventive screening, including Pap smears, and addressing healthcare inequities.

Across the country, state leaders have stepped in to protect access to care. States including Connecticut, Massachusetts, Maine, California, Colorado, Hawaii, Illinois, Nevada, New Jersey, New Mexico, New York, Oregon, and Washington have all allocated funding to sustain services for Medicaid patients. Rhode Island now has the opportunity to do the same. As a provider, I strongly support this budget allocation. Access to reproductive health care remains vulnerable in Rhode Island, and all patients deserve the right to receive excellent, patient-centered care from trusted providers at Planned Parenthood. I urge the committee to approve the \$600,000 for PPSNE in the FY 2027 budget to protect access to essential preventive services.

Thank you for your time and consideration.

Máire Amlicke, MD/MPH

