

Chairperson DiPalma  
Senate Committee on Finance  
Rhode Island Senate  
82 Smith Street  
Providence, RI 02903

April 7, 2026

Dear Chairperson DiPalma and Members of the Senate Committee on Finance:

We submit this letter as **written testimony in STRONG SUPPORT of H 7127 on behalf of the Rhode Island chapter of the Reproductive Health Access Network (RHAP)**. Our chapter has over 50 members – most of whom are primary care providers (PCPs) like ourselves. Dr Diana Wohler is co-chair and lives in North Kingstown and works in West Warwick, while Dr Mindy Sobota is co-chair and lives and works in Providence.

**We write this testimony in strong support of H 7127 because, as PCPs, we see the preventive health care that Planned Parenthood of Southern New England (PPSNE) provides on a daily basis for our patients** – and for the growing number of people in our state who are not so lucky to have a PCP, many of whom are on Medicaid. Planned Parenthood of Southern New England is a health safety net in our state serving 10,000 people/year that all Rhode Islanders can turn to for preventive care regardless of their health insurance. This includes pap smears to prevent cervical cancer and mammograms for early detection of breast cancer, which is on the rise in women under 40 years old. Planned Parenthood of Southern New England is frankly more accessible than most PCP offices (you can book a visit for tomorrow in a few clicks on the Internet), so they provide an especially vital role in providing screenings and treatment for time-sensitive concerns like sexually transmitted infections (STIs) and prescribing birth control when requested.

**Preventive care should be a budget priority for all of us – it is relatively inexpensive and avoids more expensive care.** For instance, chlamydia is the most common STI in Rhode Island, with over 5,000 cases per year. Unfortunately, chlamydia is usually asymptomatic for men and women, which is why routine screening for chlamydia is recommended as part of preventive health visits for young people. Without preventative screening and treatment, chlamydia can cause pelvic inflammatory disease, which is a top cause for infertility – a very expensive medical problem and heartbreaking for all the people involved. Since we first wrote this testimony for the House two weeks ago, we have seen two additional patients treated by PPSNE for chlamydia, preventing pelvic inflammatory disease and preventing infertility. **Cutting funding to PPSNE will lead to more cases of STIs and infertility in our state as well as more advanced cases of cervical and breast cancer.**

**We urge you to join our neighbors in Massachusetts and Connecticut in allocating state funding to backfill the blocked federal funding under H.R.1. so that PPSNE can continue to serve Rhode Islanders now and in the future.** Access to reproductive health care remains vulnerable here in Rhode Island – we know that already 50 of the 600 Planned Parenthood clinics in the US have already closed in 2025, and continuing their high quality, preventive care work in its current form will be unsustainable without this funding. As co-leaders of the Rhode Island chapter of the Reproductive Health Access Network we urge the Subcommittee support the proposed budget allocation in H 7127 of \$600,000 to Planned Parenthood of Southern New England in the FY 2027 budget to ensure the necessary state funding for preventive health services and to protect patients' access to care.

Thank you for your time and consideration.

Sincerely,



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