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8 IN THE UNITED STATES DISTRICT COURT

9 FOR THE NORTHERN DISTRICT OF CALIFORNIA

10
11
12 **THE STATE OF CALIFORNIA; THE**
13 **STATE OF DELAWARE; THE STATE OF**
14 **MARYLAND; THE STATE OF NEW**
15 **YORK; THE COMMONWEALTH OF**
16 **VIRGINIA,**

4:17-cv-05783-HSG

17 Plaintiffs,

18 v.

19 **ALEX M. AZAR, II, IN HIS OFFICIAL**
20 **CAPACITY AS SECRETARY OF THE U.S.**
21 **DEPARTMENT OF HEALTH & HUMAN**
22 **SERVICES; U.S. DEPARTMENT OF**
23 **HEALTH AND HUMAN SERVICES; R.**
24 **ALEXANDER ACOSTA, IN HIS OFFICIAL**
25 **CAPACITY AS SECRETARY OF THE U.S.**
26 **DEPARTMENT OF LABOR; U.S.**
27 **DEPARTMENT OF LABOR; STEVEN**
28 **MNUCHIN, IN HIS OFFICIAL CAPACITY AS**
29 **SECRETARY OF THE U.S. DEPARTMENT OF**
30 **THE TREASURY; U.S. DEPARTMENT OF**
31 **THE TREASURY; DOES 1-100,**

DECLARATION OF KEISHA BATES IN
SUPPORT OF STATES' MOTION FOR
PRELIMINARY INJUNCTION

Defendants,

32 and,

33 **THE LITTLE SISTERS OF THE POOR,**
34 **JEANNE JUGAN RESIDENCE; MARCH**
35 **FOR LIFE EDUCATION AND DEFENSE**
36 **FUND,**

37 Defendant-Intervenors.

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1 I, Keisha Bates, declare:

2 1. I am a Maryland resident who is currently residing in Lanham, MD. Since moving to
3 Maryland, I have worked in basic science research at a neuroscience lab at Johns Hopkins and as
4 an admission counselor at the University of Maryland College Park. I am currently working as an
5 inpatient gynecology/perinatal nurse at a large, urban hospital and am a student in the Doctor of
6 Nursing Practice program, Family Nurse Practitioner Specialty, at the University of Maryland
7 School of Nursing.

8 2. This declaration is about my personal knowledge about the impact of the final rules
9 published by the U.S. Health and Human Services Department, in conjunction with the U.S.
10 Department of Labor and the U.S. Department of Treasury, on November 15, 2018. The final
11 rules will dramatically reduce access to contraceptive coverage for me and my patients.

12 3. Contraceptive coverage is essential to me. Through my current employer, I have
13 contraceptive coverage. Personally, I medically need hormonal birth control to avoid heavy
14 periods that make me anemic and to prevent debilitating menstrual cramps that used to occur two
15 weeks out of each month and would often keep me home from work. It is incredibly important to
16 me that I continue to maintain my contraceptive coverage, regardless of where I work. The
17 current IUD I have will expire in one year, and considering the bills and high loan payments that I
18 have, I do not think I would be able to afford the hundreds of dollars it would cost out-of-pocket
19 to get a new IUD without insurance coverage. If I were to get pregnant, or even if my debilitating
20 cramps were to return, I would be greatly hindered not only in my ability to work, but also in my
21 ability to complete my doctoral degree to become a nurse practitioner.

22 4. The final rules personally harm me by limiting my future job choices to employers
23 with contraceptive coverage, thus decreasing my opportunities for career development and
24 advancement. The final rules will increase the number of employers who do not offer insurance
25 with contraceptive coverage. I am particularly worried about this in the health care field, where a
26 large number of facilities and health programs have historical ties to religious institutions. For
27 me, contraceptive coverage to control my menstrual cycle is essential to my livelihood.

1 5. The final rules also personally harm me because, at any point in my career, my
2 employer could discontinue contraceptive coverage when renewing health plans for its
3 employees. This means that I could be put in a difficult position of having to switch employers to
4 get coverage. I probably would not qualify for some of the state family planning programs
5 because of my income level. Yet, as I stated previously, contraception is not affordable to me at
6 this point in my life.

7 6. As a nurse, I am concerned about the impact of the final rules on my patients.
8 Pregnancy is a serious medical condition, and it can be dangerous. I know this because I work
9 with pregnant and postpartum women every day. I see women come close to death because of
10 complications relating to their pregnancy and/or birth. I see women develop health issues that
11 they carry with them for the rest of their lives because of their pregnancy and/or birth. I see
12 women who have to stop taking psychiatric and seizure medications because of pregnancy,
13 placing their lives at risk for over 9 months. I am concerned about the impact of the final rules on
14 my patients. If their employers drop contraceptive coverage, they may forgo using contraception
15 and be in a position where their health or life is at risk.

16 7. Finally, having been raised in the Lutheran faith, I support religious freedom and
17 understand its importance in our society. However, what I cannot support is when the religious or
18 moral beliefs of one individual (or employer) are given the power to take away the rights of
19 another. Contraceptive coverage is essential to me and other women. It's essential to ensure that
20 we are healthy, can plan if and when to have families, finish our educations, and obtain
21 employment to become productive citizens.

22 I declare under penalty of perjury that the foregoing is true and correct and of my own
23 personal knowledge.

24 Executed on December 4, 2018, in Lanham, Maryland.

25 
26 Keisha Bates
27 B.A., M.S., R.N.