

## RESTORING EQUITY IN ACCESS TO ABORTION

**NCJW Message:** NCJW has long endorsed the protection of every woman's right to reproductive choices, including safe and legal abortion, access to contraception, and the elimination of obstacles that limit reproductive freedom. A woman's ability to access abortion is critical to respecting her moral agency, religious liberty, and supporting her economic security. NCJW is committed to ending federal restrictions that unjustly withhold coverage of abortion, like the Hyde Amendment. Hyde and similar policies restrict access for women who receive their health coverage through federal programs. NCJW believes every woman, regardless of her income or type of insurance, should have health insurance coverage of abortion.

### TALKING POINTS:

- ▶ **Every woman must be guaranteed fair treatment in accessing abortion, regardless of her income or type of insurance.** Under the US Supreme Court's decision in *Roe v. Wade*, every woman has the right make her own decision about abortion. But politicians withhold coverage for the procedure from women who use federal health programs through the appropriations process. By withholding coverage of abortion, federal workers, military personnel, Native American women, low-income women, and others are denied equitable access to abortion. Women who have fewer resources shouldn't have inferior access to health care than women with more money.
- ▶ **Restoring insurance coverage of abortion respects a woman's moral agency and religious liberty.** Abortion coverage restrictions interfere with a woman's ability to make a critical decision based on her own moral code, religious beliefs, and personal circumstances. However we feel about abortion, it is unjust for lawmakers to privilege the religious views of those who oppose abortion and impede a woman's ability to make her own faith-informed decision on this personal matter.
- ▶ **Coverage of abortion is essential to preserving a woman's health and safety.** When a woman decides to end her pregnancy, it is important that she have access to safe medical care. Health coverage restrictions threaten a woman's health by making abortion more difficult to access, creating barriers that may force her to delay care — unnecessarily increasing the risks to a generally safe procedure; to forego needed care to treat serious medical conditions; or to use methods to end the pregnancy herself.
- ▶ **Abortion coverage is an issue of women and families' economic security.** When a woman cannot afford to end a pregnancy, the consequences on her and her family can be far-reaching. Without health insurance coverage, women may put off seeking medical care. Such delays may not only jeopardize her health, but increase the cost of her care. She may shut off her heat or telephone, struggle to pay rent, or have to take another job just to pay for the care she needs.

## FREQUENTLY ASKED QUESTIONS: Restoring Equity in Access to Abortion

**What is the Hyde Amendment?** Every year since 1976, Congress has passed an unjust ban on abortion coverage in Medicaid called the Hyde Amendment (“Hyde”), which must be approved during the appropriations process. This policy withholds coverage of abortion except in limited circumstances. Egregiously, it was intentionally designed to deter abortion access for low-income women. Per the Kaiser Family Foundation, nearly 72% of adult women enrolled in Medicaid are of reproductive age. Today, this restriction has been expanded to most federal health programs, withholding coverage from federal workers, US servicewomen, and Native American women, among others. Hyde denies a woman the ability to make her own decision about abortion except in cases of rape, incest, or when her life is at risk.

**What is *Harris v. McRae*?** While the US Supreme Court affirmed every woman’s right to make her own decision about abortion in its 1973 ruling in *Roe v. Wade*, it eroded its own precedent only seven years later. In 1980, the Court ruled 5-4 in *Harris v. McRae*, that the denial of abortion coverage for Medicaid beneficiaries, including withholding care to protect a woman’s health, was constitutional. The majority argued that a poor woman’s indigence, rather than Congress, was the reason she could not access abortion. The dissenting opinion recognized that the intent and effect of the Hyde Amendment was to deny the right to choose abortion to poor and minority women. *Harris* is a travesty of justice in allowing Congress to condition federal benefits on the relinquishment of constitutional rights.

**Why should the tax dollars of those who don’t approve of abortion go toward covering it?** Even if one doesn’t personally agree with abortion, it is unjust to restrict a woman’s exercise of a constitutional right based on her income level or source of insurance. Abortion is a personal, complex decision and politicians should not interfere with that decision by withholding health insurance coverage. Ultimately, the decision about whether to choose adoption, end a pregnancy, or raise a child must be left to a woman, her doctor, and according to her own religious beliefs.

**Do coverage bans really harm women?** Yes. Hyde and similar restrictions can harm a woman’s health and economic security. When a woman needs to end her pregnancy, it is important that she have access to safe medical care. Having insurance coverage for abortion ensures she will be able to see a licensed, quality health provider. Withholding coverage can impose great financial burdens on women with limited means, many of whom already lack access to basic health care. The impact of these barriers can be far-reaching; she may be forced to delay needed care, or shut off utilities just to pay for the care she needs. For a woman to be able to make a real decision, based on her own circumstances and religious beliefs, she needs to be able to afford it. By limiting a woman’s access to abortion, coverage bans impinge on her ability to make her own health decisions and achieve economic security.

**How does Hyde impact religious liberty?** Insurance coverage bans also erode a woman’s religious liberty. Policies that restrict access to this legal medical procedure deny a woman the ability to make personal decisions about her health and family per her own religious or moral beliefs. By enacting barriers to access, politicians privilege the religious beliefs of those who oppose abortion over those who value a woman’s right to religious and reproductive freedom. Coverage bans infringe on women’s equality and the right to make decisions based on personal religious beliefs.

**What role do states play in granting or denying coverage of abortion under Hyde?** Under the joint federal-state Medicaid program, states may use state money to cover abortion care for Medicaid enrollees. Seventeen states currently require abortion to be covered with state Medicaid funds, including AK, AZ, CA, CT, HI, IL, MD, MA, MN, MT, NJ, NM, NY, OR, VT, WA, and WV.

**What can Congress do today?** As lawmakers consider appropriations bills for Fiscal Year 2014, they can act to lift Hyde and similar bans. They can also advance incremental change, supporting the Peace Corps Equity Act, S 813, to ensure Peace Corps volunteers have abortion coverage to the same extent as others in federal service.