

House Budget Bill Would Strip 60,000 Low-Income Women in the District of Columbia of Access to Abortion Services

Proposed Bill Would Dictate Abortion-Funding Policy to Hundreds of Thousands of D.C. Voters

The draft budget bill (H.R. 1) passed by the House of Representatives would overrule the decision of 400,000-plus voters in the District of Columbia to fund medically necessary abortions for low-income women. The bill would prohibit the District from spending its own funds to provide abortions and deny the over 60,000 non-elderly Medicaid-enrolled women the comprehensive reproductive healthcare they need – despite the fact that such funding has been supported by District voters and Representative Eleanor Holmes Norton, D.C.’s congressional representative. Congress should reject this provision and allow District voters to determine their own policy.

All 50 states and the District of Columbia provide healthcare to low-income women primarily through the Medicaid program, which provides matching funds for healthcare coverage. Under existing law, Medicaid covers all medically necessary health services except abortion – abortion can only be Medicaid-funded if the pregnancy endangers the woman’s life or is the result of rape or incest. However, the 50 states and D.C. are permitted to use **their own funds** to cover abortion services in other instances, such as when an abortion is necessary to preserve a woman’s health; currently, 17 states and the District of Columbia do so. (See Guttmacher Institute, *State Policies in Brief: State Funding of Abortion Under Medicaid*, March 1, 2011, available at http://www.guttmacher.org/statecenter/spibs/spib_SFAM.pdf).

The proposed budget would reverse the decision of District voters to fund these medically necessary abortions. This imposition of Congress’s political will to override the decision of District residents is both profoundly undemocratic – no other state is told by Congress how to use its local funding – and harmful to the District’s most vulnerable women. In fact, more than one in four women in the District of Columbia is enrolled in Medicaid, with many relying on the program as their sole means of accessing healthcare services. These women are forced either to carry to term a pregnancy they do not wish – jeopardizing the health of the pregnant woman and the fetus – or to forgo other necessities, such as the rent, utility bills, or food or clothing for their other children, to obtain the abortion. The economic hardship caused by the Medicaid ban also usually causes additional delays in the availability of an abortion, increasing health risks for the pregnant woman.

Congress should allow the District’s residents to make up their own minds about whether to fund abortions, and reject the restrictions in the proposed budget bill (H.R. 1).