

The D.C. Medicaid Abortion Ban: Disastrous Policy for Low-Income D.C. Residents

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The Hyde Amendment prohibits the use of federal funds for abortion care for people enrolled in Medicaid except in the limited cases of rape, incest or life endangerment, but states can still provide critical access to abortion care for Medicaid recipients by using their own funds. Washington D.C.'s Medicaid program, however, is blocked from doing so by a yearly appropriations rider in the Financial Services and General Government (FSGG) subcommittee.¹ This disastrous policy impacts 55,000 D.C. women of reproductive age enrolled in Medicaid;² pushing abortion care out of reach for many.

The D.C. Medicaid abortion ban effectively forces many people to choose between putting food on the table and paying the bills, or getting an abortion. People who are enrolled in Medicaid are already low-income and often struggle to make ends meet, and the cost of having to pay for abortion care out-of-pocket can be prohibitively expensive. In some cases, it can cost more than a D.C. Medicaid recipient earns in an entire month.³ Lack of access to abortion care further perpetuates the economic insecurity these individuals face. Women who are denied an abortion are more likely to fall into poverty than women who were able to obtain the care they need.⁴

The D.C. Medicaid Abortion Ban Harms Residents of the Nation's Capital

O The D.C. Medicaid abortion ban tramples the rights of D.C. residents. Barring the District from using its own funds blatantly disregards the rights of D.C. residents. No other jurisdiction or state is told by Congress how to use its locally-raised revenue. Currently, 15 states use state-only funds to pay for abortion services through their Medicaid programs.⁵ D.C. should be entitled to do the same.

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- **O** The D.C. Medicaid abortion ban disproportionately affects communities of color. Due to factors such as structural racism and discrimination, women of color face rampant income inequality⁶ and are more likely to be covered by Medicaid as a result. For example, in 2017, 80 percent of Medicaid recipients in Washington D.C. were Black and 13 percent were Hispanic.⁷ Consequently, people of color in the District are more likely to face even greater hurdles in trying to access abortion care.
- **O** The D.C. Medicaid abortion ban has disastrous consequences for low-income women in the District. The D.C. Medicaid ban was temporarily lifted in 2009 but then reinstated in 2011, providing an opportunity to directly examine the impact of and harms caused by the ban. After the ban went back into effect in April 2011, the D.C. Abortion Fund (DCAF), a non-profit organization that helps low-income people with the cost of abortion care, saw "an immediate spike in the need within [the] community." ⁸ The sudden drop off of Medicaid support for abortion services left 28 residents without funding for their already-scheduled abortion procedures and many only found out the night before. ⁹ One of these individuals was a 23-year-old homeless woman who was already caring for her four-year-old child. She sought counseling through a community center and her social worker arranged for her abortion to be covered through Medicaid. However, funding was eliminated just two days before her scheduled appointment. ¹⁰

End the D.C. Medicaid Abortion Ban

No one should be limited in their ability to access abortion care based on their zip code or income. It is clear that low-income D.C. residents have suffered because of decisions made by politicians they did not elect. The D.C. Medicaid abortion ban takes away the right of people living in Washington D.C. to decide if, when and how to become a parent. Politicians have no role in these personal decisions, and everyone should have the resources and agency to consider all options when deciding what is best for themselves and their families.

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help women and men meet the dual demands of work and family. More information is available at NationalPartnership.org.

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¹ S., D. (n.d.). *How Medicaid Bans Affect DC Residents*. DC Abortion Fund. Retrieved 26 April 2019, from https://dcabortionfund.org/2017/01/how-medicaid-bans-affect-dc-residents/

² Kaiser Family Foundation. (n.d.). *Distribution of Nonelderly Adults With Medicaid by Gender (Timeframe: 2017)*. Retrieved 26 April 2019, from https://www.kff.org/medicaid/state-indicator/distribution-by-gender-4/?dataView=1¤tTimeframe=0&sortModel=%7B%22colld%22:%22Location%22.%22sort%22:%22asc%22%7D

³ Jerman, J., & Jones, R. (2014). Secondary measures of access to abortion services in the United States, 2011 and 2012: Gestational age limits, cost, and harassment (Table 1). *Women's Health Issues 24*(4), e419-e424; DC Health Link. (n.d.). *Individual and Family Health Insurance: Reduce Your Premiums*. Retrieved 26 April 2019, from https://dchealthlink.com/individuals/reduce-your-premiums

⁴ Advancing New Standards in Reproductive Health. (2018, August). *Socioeconomic Outcomes of Women Who Receive and Women Who Are Denied Wanted Abortions* (p. 2). Retrieved 26 April 2019, from https://www.ansirh.org/sites/default/files/publications/files/turnaway socioeconomic outcomes issue brief 8-20-2018.pdf

⁵ Guttmacher Institute. (2019, April 1). *State Funding of Abortion Under Medicaid*. Retrieved 26 April 2019, from https://www.guttmacher.org/state-policy/explore/state-funding-abortion-under-medicaid

⁶ See National Partnership for Women & Families. (2019, April). *Quantifying America's Gender Wage Gap by Race/Ethnicity*. Retrieved 26 April 2019, from http://www.nationalpartnership.org/our-work/resources/workplace/fair-pay/quantifying-americas-gender-wage-gap.pdf

⁷ Kaiser Family Foundation. (n.d.). *Distribution of the Nonelderly With Medicaid by Race/Ethnicity (Timeframe: 2017) (District of Columbia)*. Retrieved 26 April 2019, from https://www.kff.org/medicaid/state-indicator/distribution-by-raceethnicity-4/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22district-of-columbia%22:%7B%7D%7D%7D&sortModel=%7B%22colld%22:%22Location%22.%22sort%22:%22asc%22%7D

⁸ DC Abortion Fund. (2011). *Upholding Abortion Ban Is an Egregious Overstep and a Dangerous Gamble*. Retrieved 26 April 2019, from https://dcabortionfund.org/2011/12/upholding-abortion-ban-is-an-egregious-overstep-and-a-dangerous-gamble/

⁹ Morrissey, A. (2011, April 14). D.C. Abortion Ban Begins to Rear Its Ugly Head. *DCist*. Retrieved 26 April 2019, from https://dcist.com/story/11/04/14/abortion-funding-cut/

¹⁰ NARAL Pro-Choice America. (n.d.). *Protect D.C. Residents' Rights; Repeal the Ban on Local Abortion Funding* (p. 4). Retrieved 26 April 2019, from https://www.prochoiceamerica.org/wp-content/uploads/2017/01/4.-Protect-D.C.-Residents-Rights-Repeal-the-Ban-on-Local-Abortion-Funding.pdf. This story is originally from unpublished DC Abortion Fund data.