

ABORTION and HEALTH REFORM

A Resource List for Reporters Compiled by the Alliance for Health Reform

www.allhealth.org

Dec. 4, 2009

The coverage of abortion in a reformed health care system has become a topic generating considerable emotion in health reform debates. Resolving this question is one of the hurdles that a final health reform bill must clear in order to reach President Obama's desk.

We offer this resource list to help reporters writing about this topic. If you will review the resources listed, you will better understand what drives the positions of those taking sides on abortion within health reform.

Resources are divided into these sections: 1) legislation – the wording in the House-passed bill and the Senate leadership bill, 2) overviews describing multiple perspectives, 3) documents emphasizing single viewpoints, and 4) poll results on this subject.

If you know of resources that should be added to this list, please email us at info@allhealth.org or call us at 202/789-2300.

LEGISLATION

House – H.R. 3962 – Affordable Health Care for America Act

www.thomas.gov

SEC. 265. LIMITATION ON ABORTION FUNDING (Note: This is the Stupak-Pitts amendment)

(a) In General- No funds authorized or appropriated by this Act (or an amendment made by this Act) may be used to pay for any abortion or to cover any part of the costs of any health plan that includes coverage of abortion, except in the case where a woman suffers from a physical disorder, physical injury, or physical illness that would, as certified by a physician, place the woman in danger of death unless an abortion is performed, including a life-endangering physical condition caused by or arising from the pregnancy itself, or unless the pregnancy is the result of an act of rape or incest.

(b) Option to Purchase Separate Supplemental Coverage or Plan- Nothing in this section shall be construed as prohibiting any nonfederal entity (including an individual or a State or local government) from purchasing separate supplemental coverage for abortions for which funding is prohibited under this section, or a plan that includes such abortions, so long as--

(1) such coverage or plan is paid for entirely using only funds not authorized or appropriated by this Act; and

(2) such coverage or plan is not purchased using--

- (A) individual premium payments required for a Exchange-participating health benefits plan towards which an affordability credit is applied; or
- (B) other nonfederal funds required to receive a federal payment, including a State's or locality's contribution of Medicaid matching funds.

(c) Option to Offer Separate Supplemental Coverage or Plan- Notwithstanding section 303(b), nothing in this section shall restrict any nonfederal QHBP offering entity from offering separate supplemental coverage for abortions for which funding is prohibited under this section, or a plan that includes such abortions, so long as--

- (1) premiums for such separate supplemental coverage or plan are paid for entirely with funds not authorized or appropriated by this Act;
- (2) administrative costs and all services offered through such supplemental coverage or plan are paid for using only premiums collected for such coverage or plan; and
- (3) any nonfederal QHBP offering entity that offers an Exchange-participating health benefits plan that includes coverage for abortions for which funding is prohibited under this section also offers an Exchange-participating health benefits plan that is identical in every respect except that it does not cover abortions for which funding is prohibited under this section.

Senate – H.R. 3590 – Patient Protection and Affordable Care Act

www.thomas.gov

See Sec. 1303 Special Rules (pp. 116 – 123)

OVERVIEWS

Access to Abortion Coverage and Health Reform (Dec. 2, 2009)

Kaiser Family Foundation

www.kff.org/healthreform/upload/8021.pdf

This six-page issue brief offers a side-by-side comparison of abortion coverage in the House and Senate bills, describes current federal and state laws addressing abortion coverage, and discusses the impact of the abortion provisions in the House and Senate bills on women with private insurance and on low-income women covered by Medicaid.

Abortion (Oct. 2008)

Bonnie Steinbock, professor of philosophy, The University of Albany/State University of New York, 518-442-4262

from “Bioethics Briefing Book,” *The Hastings Center*

www.thehastingscenter.org/Publications/BriefingBook/Detail.aspx?id=2400

This article presents an objective summary of conservative, moderate and liberal views about abortion, emphasizing ethical considerations.

Health-care reform and abortion coverage: Questions and answers (Nov. 15, 2009)

Alec McGillis, *Washington Post*

www.washingtonpost.com/wp-dyn/content/article/2009/11/14/AR2009111401597.html

Questions and answers about the House-passed Stupak-Pitts amendment, including “What is the status quo?” and “Are there broader implications?”

Health Bill Abortion Clause May Derail Insurance (Nov. 14, 2009)

Julie Rovner, *NPR*

www.npr.org/templates/story/story.php?storyId=120406487

“The ultimate impact of the House abortion amendment could be to change abortion from being a procedure routinely covered by most private insurance plans to a procedure routinely excluded -- even in cases of medical emergency.”

An Analysis of the Implications of the Stupak/Pitts Amendment for Coverage of Medically Indicated Abortions (Nov. 16, 2009)

Sara Rosenbaum, Lara Cartwright-Smith, Ross Margulies, Susan Wood, D. Richard Maurey

Department of Public Health, George Washington University Medical Center

www.gwumc.edu/sphhs/departments/healthpolicy/dhp_publications/pub_uploads/dhpPublication_FED314C4-5056-9D20-3DBE77EF6ABF0FED.pdf

This 14-page paper gives an overview of current law pertaining to abortion, and discusses the Stupak/Pitts amendment and its potential impacts. The authors write that the number of people getting health coverage through new exchanges will be so large (an estimated 30 million) that health insurers will drop abortion coverage in all markets if the Stupak/Pitts amendment becomes law “in order to meet the lowest common denominator in both the exchange and expanded Medicaid markets”

SPECIFIC POSITIONS

A Framework for Comprehensive Health Care Reform: Protecting Human Life, Promoting Human Dignity, Pursuing the Common Good (June 18, 1993)

United States Conference of Catholic Bishops

www.usccb.org/sdwp/national/comphealth.shtml

This document outlines the Catholic bishops’ criteria for health reform, including “respect for life.” Abortion is inconsistent with respect for life, as are euthanasia and assisted suicide, the statement says. Further, considering abortion or euthanasia as health care procedures distorts and threatens “the very meaning of health care.”

Lines in the Sand (Aug. 7, 2009)

Tom Grenchik, executive director of the Secretariat of Pro-Life Activities

U.S. Conference of Catholic Bishops

www.usccb.org/prolife/publicat/lifeissues/080709.shtml

Quotes a letter to Congress from Bishop William Murphy, chairman of the bishops' Committee on Domestic Justice and Human Development: "...no health care reform plan should compel us or others to pay for the destruction of human life, whether through government funding or mandatory coverage of abortion."

Jesuit Bioethics Group Endorses Health Care Reform, Sept. 10, 2009

Mark G. Kuczewski, Debra Bennett-Woods, Peter Clark, James DuBois, Amy M. Haddad, Carol Taylor, and James J. Walter

Hastings Center Report, Nov. – Dec. 2009

www.thehastingscenter.org/Bioethicsforum/Post.aspx?id=3834&terms=catholic+and+%23filename+*.html

This is a statement from the Consortium of Jesuit Bioethics Programs, representing the bioethics programs at four Jesuit medical schools and three major bioethics centers or institutes. Issues of financing abortion services and providing access to health care for immigrants should not be “politicized in the effort to again fail to insure the uninsured.”

Impact of Stupak Amendment on Access to Abortion Coverage and Care (Nov. 10, 2009)

Laurie Rubiner, vice president for public policy and advocacy

Planned Parenthood Federation of America

http://plannedparenthoodaction.org/files/PP_Real_Life_Issue_Brief_111809_v4.pdf

In this three-page issue brief, Ms. Rubiner says: “The truth is that under the Stupak Amendment...millions of women would lose private coverage for abortion services and millions more would be prohibited from buying it even with their own money.”

Abortion and health reform debate (Nov. 17, 2009)

Mark Mellman, president, The Mellman Group

TheHill.com

<http://thehill.com/opinion/columnists/mark-mellman/68251-abortion-and-health-reform-debate>

Mr. Mellman, who has worked for Democratic candidates and causes since 1982, argues that “...language inserted in the House bill will take away coverage for abortion that tens of millions of women already have. Taking away existing coverage not only violates the public will, but also does fundamental violence to Democrats’ explicit promise that if you like what you have, you will be able to keep it.”

Abortion Funding and Health Care (Nov. 10, 2009)

Michael Cannon, director of health policy studies

Cato Institute

www.cato-at-liberty.org/2009/11/10/abortion-funding-and-health-care/

Mr. Cannon says there is no middle ground in the debate over abortion within health reform legislation. “Either...taxpayer dollars will fund abortions, or the restrictions necessary to prevent taxpayer funding will curtail access to private abortion coverage... Thus both sides’ fears are justified. Both sides of the abortion debate are learning why government should not subsidize health care.”

Bishops assert moral duty in health care debate (Nov. 16, 2009)

Rachel Zoll, *Associated Press*

www.insidebayarea.com/crime-courts/ci_13802024?source=rss

Chicago Cardinal Francis George, president of the U.S. Conference of Catholic Bishops,

says prelates must ensure that "issues that are moral questions before they become political remain moral questions when they become political." Roman Catholic prelates believe that "everyone should be cared for and that no one should be deliberately killed," he said.

For Abortion Supporters, A Lesson in Federal Control of Health Benefits (Nov. 11, 2009)

Dennis Smith

The Foundry blog, Heritage Foundation

<http://blog.heritage.org/2009/11/11/for-abortion-supporters-a-lesson-in-federal-control-of-health-benefits/>

The handling of payment, or nonpayment, for abortion in health reform bills is part of a larger issue, Mr. Smith states – health coverage decisions become political decisions when government is placed in charge of deciding. Given the new powers that would flow to the secretary of health and human services under reform, “patients will get what the federal government gives them.”

POLLING

Pew Research Center for the People & the Press/ Pew Forum on Religion & Public Life (Nov. 19, 2009)

<http://people-press.org/report/565/abortion-and-health-reform>

A 55 percent majority of Americans say that abortion should not be included as a guaranteed medical benefit if a government health care plan passes. Only about half as many (28 percent) say it should be included. 1,003 adults polled nationwide. When health care opponents were asked in an open-ended question to describe their main reason for opposing the congressional proposals, only 3 percent raised the issue of abortion funding. Margin of error: + or – 4 percentage points.

FOX News/Opinion Dynamics Poll (Nov. 17-18, 2009)

Cited by PollingReport.com

www.pollingreport.com/abortion.htm

A majority of those polled (51 percent) said abortion procedures should not be covered by private insurance plans; 52 percent said those receiving financial assistance from the federal government to buy private health insurance should not be able to buy a plan that covers abortion; 50 percent said they favor the Stupak amendment as passed by the House. 900 registered voters polled nationwide. Margin of error: + or – 3 percentage points.

Women Donors Network & Communications Consortium Media Center (Nov. 16, 2009)

www.womenandhealthcarereform.org/MellmanSlides.pdf

A majority (56 percent) believed that those purchasing health insurance plans with partial government subsidies should be able to buy plans that cover abortions along with other health care services. 1,000 likely 2010 general election voters were polled.

CBS News Poll (Nov. 13-16, 2009)

Cited by PollingReport.com

www.pollingreport.com/abortion.htm

A majority (56 percent) said if the federal government provides subsidies or credits to help people buy health coverage, those insurance plans should not cover abortion procedures. 1,167 adults polled nationwide. Margin of error: + or – 3 percentage points.

CNN/Opinion Research Corporation Poll (Nov. 13-15, 2009)

Cited by PollingReport.com

www.pollingreport.com/abortion.htm

A majority (51 percent) said that women wanting abortion services should have to pay the entire cost out of pocket, while 45 percent said private insurance should cover some or all of the costs of abortion. 1,014 adults polled nationwide. Margin of error: + or – 3 percentage points.

ABC News/Washington Post Poll (Nov. 12-15, 2009)

Cited by PollingReport.com

www.pollingreport.com/abortion.htm

Six out of 10 said private health insurance sold to a person using a government subsidy to pay for the coverage should not be allowed to cover abortion. 1,001 adults polled nationwide. Margin of error: + or – 3.5 percentage points.