

Equality in Abortion Coverage Act (EACA)

Halting bans on abortion coverage to protect rights & advance health equity

In 2019, the Rhode Island General Assembly passed legislation to protect the right to abortion. The problem is that we still have laws on the books that take away coverage for abortion. Voters in our state have made it clear that they want people to manage their own health, make their own decisions and control their own futures!

We should all have access to health services that we need regardless of our income or medical insurance, including affordable coverage for abortion. Public or private, health insurance should cover services that ensure health and care for our families.

What does the *Equality in Abortion Coverage Act (EACA)* bill do?

- Eliminates the policy that withholds health coverage for abortion in the state Medicaid program and associated plans.
- Halts the denial of coverage for abortion in the health plan used by state employees.

What is the impact of Rhode Island policies that take away health coverage for abortion?

Our state employee health plans cover about 32,000 Rhode Islanders including health professionals, college professors, and students: the public servants who keep our state running, and their family members. They are all denied abortion coverage.

Medicaid:

- Covers over 25 percent of Rhode Islanders, including 77,000 women of child-bearing age.
- Serves our lowest wage earners, people with disabilities, and current and former foster youth.

They deserve equal access to health care, including abortion. By leaving people on Medicaid out of the *Reproductive Privacy Act's* protections, we have created an unequal system.

What type of out of pocket cost are we forcing people to incur?

The Women's Health and Education Fund (WHEF) has stated that the average cost of an abortion in RI is \$600. There are many individuals and families who simply do not have anything extra sitting around if their insurance says they won't cover their abortion.

Research has shown that for a person struggling to get by, taking away benefits for abortion means they may have to forego paying for things like rent or groceries to pay for medical care including abortion.

This puts people's health and well-being at risk. Decades under these state policies have resulted in too many people and their families pushed further into poverty as they scramble to find the money for an abortion.

How do abortion bans fuel racial and health inequity? Women of color are overrepresented in low wage jobs and more likely to use the state Medicaid program which means the state ban on Medicaid coverage disproportionately affects them. Black women have the highest unintended pregnancy rate of any racial or ethnic group, more than double that of non-Hispanic white women due to barriers to contraception, to preventative health care and lack of access to timely and affordable access to a range of services.

Recent research found that more than half of women of child bearing age, enrolled in Medicaid, have family incomes below the poverty level; one-quarter had incomes below 50 percent of the poverty level. When insurance coverage is denied, low-income people are likely to spend or more of their monthly income on a health care procedure – or are forced to forego the care. That's what this policy means.

When did these policies go into effect? From 1981-1983, several laws were passed in Rhode Island to take away health coverage for abortion in the state Medicaid program, for state employees, within private insurance and through coverage provided by municipal policies.

A court held that the ban on these benefits for municipal employees was valid but for private health-insurance contracts, plans, or policies, the ban was unconstitutional and unenforceable. These two provisions were struck from state law with the passage of the RPA, but the refusal to provide coverage in Medicaid and state employee plans remains in effect.

Do voters support repealing these restrictions? More than three-quarters of voters support state (78 percent) funding for reproductive health services for lower-income women. In fact, there is broad consensus on support for abortion coverage across party lines and faith traditions.

Today, Rhode Island law treats the right to abortion according to two different standards: whether you can afford to pay either out of pocket or with private health care for your rights or not. That is not equality. And it is not ok.

Repealing these restrictions will not ensure full equality for poor women and women of color. But doing so is a necessary first step. Anyone who cares about fighting racism and poverty must realize that attacks on abortion—and especially on abortion coverage—are first and foremost attacks on poor women and women of color.

CAMPAIGN PARTNERS:

ACLU of Rhode Island, Alpert Medical School Medical Students For Choice, American Academy of Pediatrics, RI Chapter, American College of Obstetricians and Gynecologists, Amnesty Intl RI Chapter, Black Lives Matter PAC, Brown College Democrats, Brown University's Department of Family Medicine, The College Dems of RI, The College Democrats at Roger Williams, Coyote RI, Economic Policy Institute, GLBTQ Legal Advocates & Defenders, Haus of Codec, House of Hope CDC, Latino Policy Institute, LBGTQ Action RI, League of Women Voters, RI Chapter, OLOC-RI- Old Lesbians Organizing for Change, Party for Socialism and Liberation, Physicians for a National Health Program – RI Chapter, Providence Democratic Socialists of America, Reproductive Health Access Project RI, RI Academy of Family Physicians, RI Coalition Against Domestic Violence, RI Democratic Women's Caucus, RI Healthcare Access and Affordability Partnership, RI Medical Society, RI NOW, RI Queer Political Action Committee, RI Working Families Party, RIOT RI, Sage RI, SHIP, SISTA Fire, Sojourner House, South County Huddle, SURJ-RI, The Womxn Project, Unitarian Universalist Church of SC- Social Justice Team, Women's Fund of RI, Women and Infants Hospital, Youth Pride RI

It is time that we close the gaps in access to abortion.

It is time to pass the EACA!



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EACA
Campaign for
Equal Abortion Coverage