Evaluating the impact of restricting Medicaid coverage of abortion

Amanda Dennis, DrPH, MBE
Associate, Ibis Reproductive Health

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Overview

- Place Medicaid restrictions in context
- Describe Medicaid restrictions
- Outline impact of Medicaid restrictions:
  - Low-income women
  - Health care providers
- Detail efforts to respond to Medicaid restrictions
Abortion restrictions and supportive policies

State policies supportive of women's and children's well-being vs. Number of abortion restrictions

R² = 0.4468

Legend:
- LA
- VT
- WA
- DC
- NY
- NM
- CA
- NJ
- HI
- CT
- ME
- MD
- WV
- IA
- DE
- MA
- MN
- IL
- RI
- OR
- NH
- AK
- CO
- NV
- WI
- PA
- OH
- NC
- MI
- TX
- SC
- OK
- AZ
- KS
- MS
- IN
- SD
- ID
- WY
- KY
- TN
- GA
- AR
- VA
- AL
- NE
- ND
- MS
Restricting abortion access in Louisiana: Providers in focus

- Only licensed physicians may perform abortions
- Ambulatory surgical center standards imposed on facilities providing abortion
- Hospital privileges or alternative arrangement required for abortion providers
- Refusal to provide abortion services allowed
- Restrictions on provision of medication abortion
Restricting abortion access in LA: **Women** in focus

- Gestational age limit for abortion set by law
- Parental consent before a minor obtains an abortion
- Mandatory counseling prior to abortion
- Mandatory waiting periods between time of first appointment and abortion
- Requirement to have an ultrasound
- Restrictions on abortion coverage in private health insurance plans
- Restrictions on abortion coverage in Medicaid
Medicaid 101

- Joint federal-state program for low-income populations
- Key health care payer for many health care providers
- Largest health insurance program in the US
- Important program for women and marginalized populations
- Leads to many positive outcomes
- Covers a wide range of health care services
Medicaid restrictions on abortion coverage

Hyde Amendment

- Passed in 1976, renewed annually
- Prohibits federal Medicaid funding for abortions except in cases of rape, incest, or life endangerment

- 32 states provide Medicaid coverage only in the cases of life endangerment, rape, and incest
- 1 state provides coverage only in cases of life endangerment
- 17 states provide state Medicaid coverage of abortion for low-income women in most cases
Abortion

Induced Abortion

Medicaid payment for induced abortion is restricted to those that meet the following criteria:

- A physician has found, and so certifies in his/her own handwriting, that on the basis of his/her professional judgment, the life of the pregnant woman would be endangered if the fetus was carried to term.

- The certification statement, which must contain the name and address of the recipient, must be attached to the claim form. The diagnosis or medical condition which makes the pregnancy life endangering must be specified on the claim.

OR

- In the case of terminating a pregnancy due to rape or incest the following requirements must be met:

  - The Medicaid recipient shall report the act of rape or incest to a law enforcement official unless the treating physician certifies in writing that in the physician’s professional opinion, the victim was too physically or psychologically incapacitated to report the rape or incest.

  - The report of the act of rape or incest to a law enforcement official or the treating physician’s statement that the victim was too physically or psychologically incapacitated to report the rape or incest must be submitted to the Bureau of Health Services Financing along with the treating physician’s claim for reimbursement for performing an abortion.

  - The Medicaid recipient shall certify that the pregnancy is the result of rape or incest and this certification shall be witnessed by the treating physician.

Growing body of literature examining impact of restricting Medicaid coverage

Original Ibis research:
1) Interviews with abortion providers
2) “Secret shopper” of Medicaid offices
3) Interviews with low-income abortion clients
What’s the harm of Hyde?

# 1

It *creates confusion* about when abortion is covered by Medicaid and how to obtain coverage.

- 32% of calls to Medicaid about answered incorrectly
- 52% of calls discouraged seeking coverage
What’s the harm of Hyde?

# 2

It leads to a **defacto ban on coverage** for any reason.

-36% of qualifying abortions covered

We have never been reimbursed by Medicaid for an abortion…. We have to do paperwork before it’s all accepted.... And for abortion, we may try seven different things and then we give up…. It’s just at some point—how damaged is your head from that brick wall?

– Abortion clinic administrator
What’s the harm of Hyde?

# 3

It forces women and their families to endure financial hardships and delays care.

It was hard. It took me three weeks…. I don’t have a strong family support where I could borrow money from…. The payday loan wiped out my entire account…. I got a three-day notice on my apartment door, and things started to spiral out of control. And then when I became evicted, I lived in a shelter.

“”

–Abortion client
What’s the harm of Hyde?  
# 4

It puts desired abortion care **out of reach**.

-25% of low-income women are unable to access care because they cannot afford an abortion

It’s not enough just to make it legal to have an abortion. If it’s not cost available, then it’s practically the same thing as keeping it illegal because…if you can’t afford something that you need, it might as well be illegal to you.

– Abortion client
What’s the harm of Hyde?

# 5

It **drains providers’ resources**

We are just eating the costs.

– Abortion clinic administrator
It prevents harms to women and their families, and to providers.

It was pretty easy [to get coverage].

All I had to do was just show my card and they ran everything through the computer.

I just signed a paper for them to process it through Medicaid and that was it. I never ever saw a bill.

—Abortion clients
Conclusions

- Restricting Medicaid coverage of abortion harms women, their families, and abortion providers
- Providing Medicaid coverage of abortion eliminates those harms
- Available evidence suggests that repealing federal and state coverage bans on abortion care is necessary to protect the health and lives of women and their families, and to ensure health care providers can offer high-quality care
Calls to action!

Take action.
Protect abortion.

Tell Congress to lift the bans on abortion funding.

It's time to lift the ban on abortion coverage. #AllAboveAll
@misfoundation

Why do so many women have to beg friends & family for money for an abortion? #abortionaccess is about human dignity.

We #protectabortion by expanding Medicaid coverage & outlining strategies for advocates. http://t.co/acHBPafD How do you protectabortion?

@IbisRH: Wed 04 Apr 12:28 via Seesmic

Thanks, @IbisRH, for this great Take Action Guide on Medicaid coverage of #abortion

@Iliithfund: Wed 04 Apr 12:11 via TweetDeck
Join us!

When:
Wednesday, November 19th
5-7 PM

Where:
Tulane Law School

Questions:
Amanda Dennis, Fran Linkin
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