

# Resolution No. 501 (California A) - Repeal the Hyde Amendment

## ACTION TAKEN BY THE 2017 CONGRESS OF DELEGATES: REFERRED TO THE BOARD OF DIRECTORS



**RESOLUTION NO. 501 (California A)** 

Repeal the Hyde Amendment

Introduced by the California Chapter

Referred to the Reference Committee on Advocacy

WHEREAS, The American Academy of Family Physicians (AAFP) has confirmed a woman's legal right to make her own reproductive choices, <sup>1</sup> and supports women's access to reproductive health services without non-evidence-based restrictions. <sup>2</sup> and

WHEREAS, the landmark Supreme Court case *Roe v. Wade* recognized a woman's constitutional right to decide, in consultation with her physician, whether to terminate a pregnancy, and

WHEREAS, the adoption of the Hyde Amendment in 1976 cut off federal funding for abortions except those performed in cases of rape, incest, and endangerment of the patient's life, thereby prohibiting funding of abortions paid for with federal Medicaid or for women on native American reservations, military personnel and their dependents, federal employees and their dependents, teenagers participating in State Children's Health Insurance Program, low-income residents of the District of Columbia, members of the Peace Corps, and federal prison inmates, among others, and

WHEREAS, the Hyde Amendment disproportionately affects underserved, low income, and minority patients as 75 percent of women seeking abortion in 2014 were poor or low income, <sup>5</sup> and

WHEREAS, women who are unable to access desired abortion are more likely to live in poverty, 6 and

WHEREAS, the AAFP is against discrimination of any kind<sup>7</sup> and continues to affirm its commitment to the underserved,<sup>8</sup> and

WHEREAS, it takes poor women up to three weeks longer to obtain a desired abortion<sup>9</sup> and

WHEREAS, women often have to divert funds that would otherwise be used for rent, utility bills, or food to cover the cost of an abortion, <sup>10</sup> and

WHEREAS, the costs and risks of an abortion procedure increase with gestational age such that delays in accessing care are of particular importance.<sup>10</sup> and

WHEREAS, providing funding for abortion does not compel morally-opposed women to have abortions or morally-opposed providers to participate, but limiting funding does inhibit a woman's reproductive autonomy, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians endorse the principle that women receiving health care paid for through health plans funded by state or federal governments who have coverage for continuing a pregnancy also should have coverage for ending a pregnancy, and be it further

RESOLVED, That the American Academy of Family Physicians engage in advocacy and lobbying efforts to overturn the Hyde Amendment, which bans federal funding for abortions.

(Received 03/14/17)

Fiscal Impact: None

#### Background

The Hyde Amendment restricts federal funds from being used for abortion services except in cases of rape, incest, or to protect the life of the woman. The original language only provided an exception for the life of the mother, but the restriction was expanded (https://www.gpo.gov/fdsys/pkg/CREC-1994-02-23/html/CREC-1994-02-23-pt1-PgE46.htm) in 1994. Since 1974, the Hyde amendment has been included annually as a "policy rider" on the Labor, Health and Human Services, and Education appropriations bill. The Hyde Amendment applies to federal programs such as the Title X (ten) family planning. It also applies to federal health insurance programs such as Medicaid and plans that list in *Affordable Care Act* marketplaces with premiums that are defrayed by federal tax credits. States may use their own monies to provide abortion services. Currently, 17 states extend abortion coverage for Medicaid recipients. http://kff.org/womens-health-policy/perspective/the-hyde-amendment-and-coverage-for-abortion-services/

On February 10, 2017, Rep. Barbara Lee (D-CA) introduced the *Equal Access to Abortion Coverage in Health Insurance (EACH Woman) Act* (HR 771 (https://www.congress.gov/bill/115th-congress/house-bill/771)). The bill would require the federal government: to ensure coverage for abortion care in public health insurance programs including Medicaid, Medicare, and the Children's Health Insurance Program (CHIP); to ensure coverage for abortion care for participants and beneficiaries; and to ensure that abortion care is made available to individuals who are eligible to receive services. The bill addresses the concern that health insurance with costs defrayed by the federal government should be equal to what is provided in the private market.

The House of Representatives approved the *No Taxpayer Funding for Abortions and the Abortion Insurance Full Disclosure Act* (HR 7 (https://www.congress.gov/bill/115th-congress/house-bill/7)) to permanently codify the Hyde Amendment. The bill would also restrict abortion coverage within private health insurance plans. Prior to the vote on HR 7, the AAFP sent a <u>letter (http://www.aafp.org/dam/AAFP/documents/advocacy/coverage/aca/LT-Smith-HR7-012317.pdf)</u> raising concerns about legislative intrusion into the doctor-patient relationship.

(http://kff.org/womens-health-policy/perspective/the-hyde-amendment-and-coverage-for-abortion-services/)

In January 2017, the AAFP signed a <u>letter (http://www.aafp.org/dam/AAFP/documents/advocacy/campaigns/ST-WomensHealth-012517.pdf)</u> urging members of Congress to protect women's health. The letter was co-signed by the American Congress of Obstetricians and Gynecologists, the American College of Physicians, and the American Academy of Pediatrics. The groups expressed strong support for women's right to access evidence-based health care services.

The AAFP is a member of the <u>Coalition to Protect the Patient Physician Relationship (http://www.coalitiontoprotect.org/)</u>. The Coalition "believes that patients deserve accurate information, high-quality care and the treatment options that best meet their needs. Physicians and other health care providers should be able to follow the best medical science and training based upon available evidence, and adhere to their ethical obligations." The Coalition was created in 2014 to address legislative infringements on the patient-provider relationship. Its membership includes public health and safety organizations and medical societies, such as the American Medical Association, the American Academy of Pediatrics, the American College of Physicians, and the American Congress of Obstetricians and Gynecologists.

#### **Current Policy**

Reproductive Decisions (http://www.aafp.org/about/policies/all/reproductive-decisions.html)

Reproductive Health Services (http://www.aafp.org/about/policies/all/reproductivehealth-services.html)

**Health Care for All** (http://www.aafp.org/about/policies/all/health-care-for-all.html)

#### **Prior Congress Action**

#### Resolution No. 505 from the 2007 COD (Not Adopted):

RESOLVED, That the American Academy of Family Physicians endorse the principle that women receiving healthcare paid for through health plans funded by state or federal governments should be provided with access to the full range of reproductive options when facing an unintended pregnancy, and be it further

RESOLVED, That the American Academy of Family Physicians engage in advocacy efforts to overturn the Hyde Amendment which bans federal funding for abortions.

#### Please see Page 351 from the 2007 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about\_us/congress/restricted/2007/COD3rdSession.pdf) for details.

#### Resolution No. 506 from the 2007 COD (Not Adopted):

RESOLVED, That the American Academy of Family Physicians (endorse the principle that women receiving healthcare paid for through health plans funded by state or federal governments should be provided with access to the full range of reproductive options when facing an unintended pregnancy, and be it further

RESOLVED, That the American Academy of Family Physicians engage in advocacy efforts to overturn the Hyde Amendment which bans federal funding for abortions.

#### Please see Page 351 from the 2007 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about us/congress/restricted/2007/COD3rdSession.pdf) for details.

#### Resolution No. 503 from the 2008 COD (1st Resolved Clause Adopted; 2nd Resolved Clause Not Adopted):

RESOLVED, That the American Academy of Family Physicians (AAFP) endorse the principle that women receiving healthcare paid for through health plans funded by state or federal governments be provided with access to the full range of reproductive options when facing an unintended pregnancy, and be it further

RESOLVED, That the American Academy of Family Physicians engage in advocacy efforts to overturn

the Hyde Amendment, which bans federal funding for abortions.

#### Please see Pages 363-364 from the 2008 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about us/congress/restricted/2008/ThirdSession.pdf) for details.

#### Please see Page 154 from the 2009 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about\_us/congress/restricted/2009/TRANSACTIONS2009.pdf) for follow-up details.

#### Resolution No. 501 from the 2009 COD (Referred to the Board of Directors):

RESOLVED, That the American Academy of Family Physicians engage in advocacy efforts to overturn the Hyde Amendment, which bans federal funding for abortions.

#### Please see Pages 314-315 from the 2009 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about\_us/congress/restricted/2009/TRANSACTIONS2009.pdf) for details.

#### Please see Pages 162-163 from the 2010 Transactions

(http://www.aafp.org/content/dam/AAFP/documents/about\_us/congress/restricted/2010/2010CODTransactions.pdf) for follow-up details.

#### **Prior Board Action**

Approval of a recommendation from the Commission on Governmental Advocacy to accept for information Resolution. No. 501 referred from the 2009 CoD on "Repeal the Hyde Amendment." B2010, April 26-29, p. 19.

Approval of recommendation to accept for information the resolutions from the 2007 NCSC referred to the Board of Directors as follows:

Resolution No. 5 – Eliminating Barriers to Routine HIV Testing

Resolution No. 6 – Repeal the Hyde Amendment

Resolution No. 26 – Establishing Minority Health Fellowships to Reduce and Eliminate Racial and

Ethnic Health Care Disparities

Resolution No. 52 – Reinstitution of Rural Section in the AAFP

Resolution No. 54 – Inclusion of Levels of Evidence with Standardized Care Plans

B2007, September 28-29, pp. 5-8.

Approval of a recommendation to accept for information as this is current policy as adopted by the 2006 Congress of Delegates, NCFMR Resolution No. R2-506 entitled "Affirm Safe and Legal Abortion Care as a Public Health Need."

B2006, November 30-December 1, pp. 9-10.

#### **References:**

- American Academy of Family Physicians. Policy on Reproductive Decisions. Available at <a href="http://www.aafp.org/about/policies/all/reproductive-decisions.html">http://www.aafp.org/about/policies/all/reproductive-decisions.html</a> (http://www.aafp.org/about/policies/all/reproductive-decisions.html). Accessed October 14, 2016
- American Academy of Family Physicians. Policy on Reproductive Health Services. Available at <a href="http://www.aafp.org/about/policies/all/reproductivehealth-services.html">http://www.aafp.org/about/policies/all/reproductivehealth-services.html</a> (http://www.aafp.org/about/policies/all/reproductivehealth-services.html). Accessed October 14, 2016
- 3. Jones RK and Jerman J. <u>Abortion incidence and service availability in the United States, 2011</u>
  <a href="mailto://www.guttmacher.org/about/journals/psrh/2014/02/abortion-incidence-and-service-availability-united-states-2011">https://www.guttmacher.org/about/journals/psrh/2014/02/abortion-incidence-and-service-availability-united-states-2011</a>), Perspectives on Sexual and Reproductive Health, 2014, 46(1):3–14,
- 4. Rocca, CH, Kimport, K, Roberts, SCM, Gould, H, Neuhaus, J, Foster, DG. Decision Rightness and Emotional Responses to Abortion in the United States: A Longitudinal Study. <u>PLoS One.</u>

- (https://www.ncbi.nlm.nih.gov/pubmed/26154386) 2015 Jul 8;10(7)
- 5. Jerman, J, Jones, RK, Onda, T. Characteristics of U.S. Abortion Patients in 2014 And Changes since 2008.Guttmacher Institute. May 2016.
- 6. Barar, RE. Best practice for abortion policies: listen to women's stories. Researchgate. Available at <a href="https://www.researchgate.net/blog/post/best-practice-for-abortion-policies-listen-to-womens-stories">https://www.researchgate.net/blog/post/best-practice-for-abortion-policies-listen-to-womens-stories</a>. (<a href="https://www.researchgate.net/blog/post/best-practice-for-abortion-policies-listen-to-womens-stories">https://www.researchgate.net/blog/post/best-practice-for-abortion-policies-listen-to-womens-stories</a>).
- American Academy of Family Physicians. Policy on Discrimination. Available at
   <a href="http://www.aafp.org/about/policies/all/patient-discrimination.html">http://www.aafp.org/about/policies/all/patient-discrimination.html</a> (http://www.aafp.org/about/policies/all/patient-discrimination.html).
   <a href="http://www.aafp.org/about/policies/all/patient-discrimination.html">http://www.aafp.org/about/policies/all/patient-discrimination.html</a> (http://www.aafp.org/about/policies/all/patient-discrimination.html).
- 8. American Academy of Family Physicians. Policy on the Medically Underserved. Available at <a href="http://www.aafp.org/about/policies/all/medically-underserved.html">http://www.aafp.org/about/policies/all/medically-underserved.html</a> (http://www.aafp.org/about/policies/all/medically-underserved.html). Accessed on October 14, 2016.
- Finer LB et al., <u>Timing of steps and reasons for delays in obtaining abortions in the United States</u>
   (<a href="https://www.guttmacher.org/sites/default/files/pdfs/pubs/2006/10/17/Contraception74-4-334">https://www.guttmacher.org/sites/default/files/pdfs/pubs/2006/10/17/Contraception74-4-334</a> Finer.pdf), Contraception, 2006, 74(4):334–344.
- 10. Boonstra, Heather D. The Heart of the Matter: Public Funding of Abortion for Poor Women in the United States. Guttmacher Institute. Guttmacher Policy Review. Volume 10 Issue 1. Available at <a href="https://www.guttmacher.org/about/gpr/2007/03/heart-matter-public-funding-abortion-poor-women-united-states">https://www.guttmacher.org/about/gpr/2007/03/heart-matter-public-funding-abortion-poor-women-united-states</a>).



#### ADD TO FAVORITES

### Resolution No. 501 (California A) - Repeal the Hyde Amendment -- Congress of Delegates

http://www.aafp.org/about/governance/congress-delegates/2017/resolutions2/california-a.mem.html



