



Key Points on Pro-Abortion Provisions in Obama-Backed Health Care Bills

National Right to Life Committee, Washington, D.C.
<http://www.nrlc.org> Legfederal@aol.com

- Both of the health care bills backed by the Obama White House – H.R. 3200 in the House, and the “Affordable Health Choices Act” (unnumbered) in the Senate – create two big new federal programs that would cover abortion for any reason: (1) a national health insurance program that would be run entirely by the federal government, called the “public plan” or “public option,” and (2) a huge new program to provide subsidies to help tens of millions of Americans buy health insurance.
- **Both bills will result in government funding of abortion.** As the independent FactCheck.org reported in an August 21, 2009, analysis, “Despite what Obama said, the House bill would allow abortions to be covered by a federal plan and by federally subsidized private plans.” FactCheck.org also wrote: “Obama has said in the past that ‘reproductive services’ would be covered by his public plan, so it’s likely that any new federal insurance plan would cover abortion unless Congress expressly prohibits that. Low- and moderate-income persons who would choose the ‘public plan’ would qualify for federal subsidies to purchase it. Private plans that cover abortion also could be purchased with the help of federal subsidies.” This is all also true of the Senate bill.
- **Abortion is explicitly mentioned 17 times in the current House bill.** On July 30, the Democrat-controlled House Energy and Commerce Committee added to H.R. 3200 an amendment written by staff to Chairman Henry Waxman (D-Ca.) and offered by Rep. Lois Capps (D-Ca.), both of whom have consistently pro-abortion career voting records. This “phony compromise” amendment explicitly authorizes the “public plan” to cover all abortions. This means that any citizen who wants to take advantage of the public plan will be compelled to purchase coverage for abortion on demand. **Furthermore, the Capps Amendment explicitly requires the federal agency to raise every enrollee’s premium by an amount sufficient to pay for all the abortions paid for by the agency.** So: a federal agency will collect the premium money (which, once collected, becomes public funds and federal funds), will receive bills from abortionists, and will send the abortionists payment checks drawn on a federal Treasury account. **This is clearly government funding of abortion – *the federal government would be running a nationwide insurance plan covering abortion on demand.***
- The abortion coverage would not be optional – no citizen would be allowed to enroll in the federal insurance program without paying the abortion surcharge. As *Time* magazine

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accurately reported (August 24), “The problem is that all those who sign up for the public option would have to pay into the account for abortion coverage, an amount ‘not less than \$1 per month,’ according to the legislation. So in effect, anyone who wanted to sign up for the public option, a federally funded and administered program, would find themselves paying for abortion coverage.”

- **The current “Hyde Amendment” law would not apply to the new premium subsidy program.** Under H.R. 3200 as amended by the Capps Amendment, some private plans may elect not to include abortion, but private plans that cover elective abortion will be federally subsidized. Both bills provide funds for the new premium-subsidy program through a new funding pipeline that would not be subject to the Hyde Amendment, which is a year-to-year provision that currently prevents federal funding of abortions in the Medicaid program. As the Associated Press accurately reported in its August 5, 2009, analysis, “A law called the Hyde amendment applies the [abortion] restrictions to Medicaid . . . [But] The health overhaul would create a stream of federal funding not covered by the restrictions.”

- **The proposed provisions are a radical departure from the status quo.** Currently, the federal government does not pay into any health plans that cover elective abortion, and the federal government certainly currently does not run a national abortion insurance program. *Time* magazine reported (August 24, 2009), “The health-care reform proposed by House Democrats, if enacted, would in fact mark a significant change in the Federal Government’s role in the financing of abortions.”

- **In four congressional committees, pro-abortion Democratic committee chairmen and majorities, allied with the White House, rejected amendments to keep elective abortion out of the “public plan” and to prevent federal subsidies from going to private plans that cover elective abortion.**

- Under the Senate bill, there is an additional problem: Both the “public plan” and, in time, most private insurance plans, would be required to cover all “essential benefits.” These must include (but are not limited to) ambulatory patient services, hospitalization, and preventive services. Under numerous past federal court decisions, such broad categories will include elective abortion unless Congress adds an explicit exclusion for abortion – but the Senate Health, Education, Labor, and Pensions (HELP) Committee rejected such an exclusion. **Thus, under the Senate bill, many private health plans would be required to pay for and to provide local access to abortion, and many state laws that regulate abortion could be invalidated.**

For additional information and documentation, or for an up-to-date report on the status of this legislation, go to <http://nrlactioncenter.com> or <http://www.nrlc.org/AHC/Index.html>

August 26, 2009