

# THE LEGACY OF HYDE

## The Impact of the Hyde Amendment on Californians

The Hyde Amendment, passed in 1976, bans the use of federal funding for abortion coverage. As a direct consequence, the majority of people in the U.S. who depend on public insurance for health care don't have coverage for the abortion they need - especially the millions of people enrolled in Medicaid.

California is one of 15 states that uses its own Medicaid dollars (through Medi-Cal) to cover abortion care for low-income women. Some believe that the Hyde Amendment does not impact Californians, that our state policies protect us. However, many in our state live an everyday reality that is far from utopia. Hyde and other abortion coverage bans means there are still Californians whose income-level is deciding for them about if and when to parent.

**Hyde's legacy means that Californians with federally funded insurance are not covered.** Even though Medi-Cal covers abortion, many Californians are left without coverage - military service members, veterans and their families, Native Americans covered through Indian Health Services, members of the Peace Corps, people in federal prison and immigration detention centers, and federal employees.

*In 2015, Christina called the ACCESS Healthline from a military base outside of Sacramento, seeking assistance in accessing abortion care. TriCare, the federal military insurance program, does not cover abortion. California has a work-around in which military personnel can qualify for Medi-Cal.*

*However, the process often involves leaving the base to enroll at an agency and then again for at least one clinic appointment. Leaving base was extremely difficult because Christina was under great scrutiny by those who controlled permission and protocol for leaving, all of whom were men. This significant barrier to care would not exist if the Hyde Amendment was lifted and TriCare covered abortion.*

ACCESS Women's Health Justice operates the bilingual Reproductive Healthline in California. ACCESS provides free, confidential and non-judgmental referrals, peer counseling, and logistical information on the full range of reproductive health services including pregnancy, parenting, abortion and adoption. The majority of ACCESS Healthline callers are young women of color who are uninsured (26%) or have Medi-Cal (37%). Cost is often their primary barrier to accessing timely health care. When callers are facing transportation barriers to get to an abortion, ACCESS connects them with a statewide network of over 100 volunteers who offer rides, a couch to sleep on, and a human connection. Through these hours on the phone, on drives and in homes, ACCESS bears witness to how the Hyde Amendment affects California communities.

**Medicaid** is a national, publicly-funded health insurance for low-income people in the U.S. **Medi-Cal** is California's Medicaid program. It compensates for gaps in the federal standard of minimum coverage requirements in several ways, including that it covers abortion. As a result of poor federal policy, Medi-Cal relies our state dollars to cover abortion services.

**The Hyde Amendment contributes to misinformation, stigma, and lack of awareness about public coverage for abortion care.** This creates confusion about when abortion is actually covered and how to obtain those services.

In secret shopper research of Medicaid information lines, 36% of calls about abortion coverage were answered incorrectly. (Dennis A, Blanchard K. A mystery caller evaluation of Medicaid staff responses about state coverage of abortion. *Women's Health Issues*. 2012; 22(2): e143-e148.)

In California, Medi-Cal eligibility workers often do not know about Medi-Cal programs with:

- \* shorter enrollment times,
- \* a broader eligibility pool,
- \* and overall, a simpler application process than full coverage Medi-Cal.

These programs include Presumptive Eligibility, Minor Consent, and Emergency Medi-Cal for Pregnancy. As a result, people are misinformed or misled about their options. This delays timely access to care and compounds barriers, which at times prevents a person from accessing abortion care at all.

The rhetoric from the Hyde Amendment also elevates the bias of eligibility workers who do not believe a person should be allowed to access abortion services.

*When she called the ACCESS Healthline in 2015, Jeri from Southern California said that she tried to get Medi-Cal coverage for her abortion, and her caseworker told her she should "just keep the pregnancy." The Medi-Cal plans she applied to do not have deductibles. Jeri was somehow provided coverage that had a \$2,000 deductible. This is not an isolated case.*

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**The Hyde Amendment reinforces the oppressive belief that politicians can and should dictate the reproductive decisions of people living in poverty, people of color, immigrants, and youth.**

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WOMEN'S HEALTH JUSTICE

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