30th Edition February 2021



The Status of Reproductive Freedom in the United States



FREEDOM IS FOR

EVERYBODY

The United States

ACCESS FACT: Currently, there are no states that provide total access



Restricted Access

The state of reproductive freedom in the United States is alarming. Due to the dearth of access in many regions, the nationwide status is "restricted access." The colors represent the status of access to reproductive healthcare, such as abortion and contraception, in each state: a spectrum from bright red for "severely restricted access" to dark purple representing "total access."

As shown below, a handful of states have made great strides in expanding and protecting access to reproductive healthcare, achieving the status of "strongly protected access." Yet, no state has achieved "total access" at this time. The majority of the states are in red, which should serve as a warning about the lack of reproductive healthcare access in much of the nation.

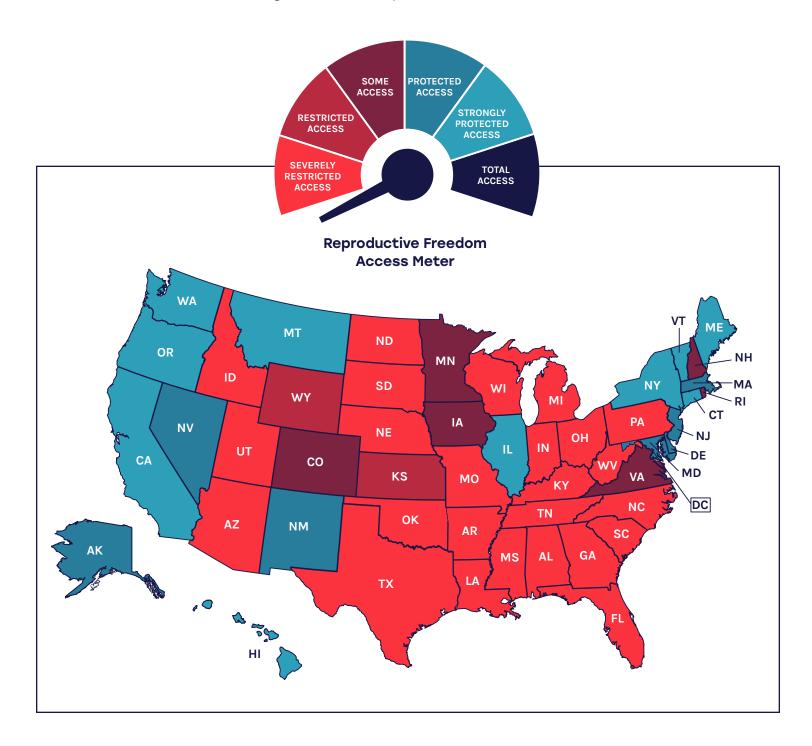


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Dedication

Supreme Court Justice Ruth Bader Ginsburg, a brilliant scholar and tireless champion for civil rights, reproductive freedom, and social justice, died in November after serving 27 years on the Supreme Court. She is deeply missed.

Justice Ginsburg knew that access to abortion is crucial. She wrote that a woman's "ability to stand in relation to man, society, and the state as an independent, self-sustaining, equal citizen," hinges on this right, and that no less than "a woman's autonomous charge of her full life's course" hangs in the balance.

Justice Ginsburg was a visionary, writing not just for today, but for the future, believing in our ability to construct a society where her wise dissents would become governing law.

When asked about Roe v. Wade and Planned Parenthood v. Casey, at her 1993 confirmation hearing, she responded clearly and forthrightly:

"The cases essentially pose the question: **Who decides**; is it the State or the individual? In Roe, the answer comes out: the individual, in consultation with her physician... The most recent decision, whatever else might be said about it, acknowledges that the woman decides."

Justice Ginsburg was not only a titan of the judiciary, but a cultural icon, who inspired generations of women to trod the road she paved. We honor her legacy by fighting for everything she believed in. We hold fast to the principles she espoused every day by never ceasing to believe that a more just and equitable country is possible.

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation dedicate the 30th edition of *Who Decides? The Status of Reproductive Freedom in the United States* to Ruth Bader Ginsburg. Thank you, Justice Ginsburg, for always answering this question clearly.



From the President

Ilyse G. Hogue

2020 was a difficult and challenging year. The country grappled with multiple intersecting crises: the Trump administration's obstinate refusal to combat the COVID-19 pandemic, resulting in hundreds of thousands of deaths in the United States alone; an uprising led by racial justice leaders to drive a national reckoning around white supremacy, systemic racism, and racial violence; and a president who intentionally attacked the foundation of our democracy—our right to vote—by spreading disinformation about the electoral process in an effort to hold on to power regardless of the will of the people.

The related and compounding effect of these urgent issues was to lay bare the work that still needs to be done so that our families and communities can thrive. NARAL Pro-Choice America believes that there can be no reproductive freedom without freedom from tyranny and oppression, and we are working with our allies to fight for that ultimate goal.

This last year made crystal-clear that the anti-choice movement will not hesitate to subvert science and disregard our health and well-being in order to maintain control. Whether it was jamming through a U.S. Supreme Court justice days before a national election or explicitly peddling disinformation about the election, 2020 was the culmination of a decades-long effort by the Radical Right working in lockstep with the anti-choice movement to gut our democracy to maintain white patriarchal power.

While, some states exploited the pandemic to restrict access to time-sensitive and needed abortion care during already difficult times, reproductive freedom champions in other states moved proactively to protect access to abortion. In 2020, overall, less anti-choice legislation was enacted because of legislative closures in response to the pandemic. But legislators hostile to our fundamental rights introduced many of the same anti-choice measures as the year before—all with the intention of baiting the U.S. Supreme Court into overturning Roe v. Wade.

Thanks to the efforts of these anti-choice, anti-freedom legislators as well as Trump and Senate Majority Leader Mitch McConnell's efforts to stack the federal judiciary with judges hostile to Roe, there's no question that the years ahead will be perilous for reproductive freedom.

Just look back at 2019: After Brett Kavanaugh was confirmed to the Supreme Court and solidified a majority hostile to Roe, state lawmakers launched an all-out assault on abortion rights in hopes of rolling back the landmark decision. Bans on abortion were introduced, passed, or signed in 31 states in 2019 alone.

Now, Amy Coney Barrett's illegitimate appointment to the Supreme Court has left us with an anti-choice supermajority of justices—and we can expect lawmakers hostile to our fundamental rights to redouble their work to end legal abortion.

Even while it stands, Roe has long been insufficient because a right without access is no right at all. There are many laws that put abortion out of reach for many in the United States, especially marginalized communities.

Freedom is for every body—and we're committed to fighting for it. We're proud that NARAL's 2.5 million members remain on the front lines, organizing, lobbying, campaigning, and voting.

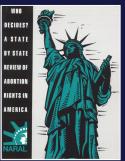
The stakes are higher than ever. As we look ahead to the future, we're facing a pivotal moment in the movement for reproductive freedom. But you can be sure that NARAL Pro-Choice America and our members are paving the way for a more just and free future.

Onward,

President

Olyre J. Abser

NARAL Pro-Choice America Commemorates 30 Editions of Who Decides











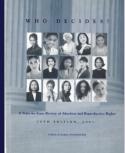










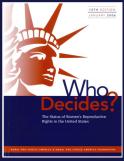












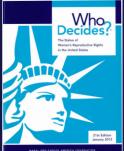




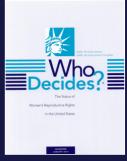










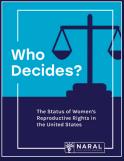


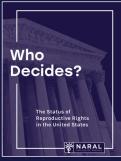












2020 is a year when it's useful to take a moment to appreciate the arc of history that stretches behind us and recommit to creating a future where we all have the freedom to make personal decisions about pregnancy and parenting that help us and our communities thrive.

After decades of organizing, the U.S. Congress ratified the Nineteenth Amendment to the U.S.

Constitution: "The right of citizens of the United States to vote shall not be denied or abridged by the United States or by any State on account of sex." But, this right was only for some - women of color continued to organize and fight well into the 20th Century to obtain the right to vote.

1933 • Ruth Bader Ginsburg was born in Brooklyn, New York.

1965 Griswold v. Connecticut - The Supreme Court recognized a "right of privacy" that encompasses the ability of married individuals to access contraception.

1969 NARAL established at the "First National Conference on Abortion Laws: Modification or Repeal?" in Chicago, originally called the National Association for the Repeal of Abortion Laws.

1972 Eisenstadt v. Baird - The Supreme Court recognized that unmarried people have the right to access contraception.

1973 • Roe v. Wade - The Supreme Court recognized that pregnant people have the "fundamental right" to abortion.

Harris v. McRae - The Supreme Court upheld a racist and discriminatory abortion coverage ban known as the Hyde Amendment, which prohibits federal reimbursment for abortion care for Medicaid beneficiairies except in limited circumstances, disproportionately harming people of color.

1990 NARAL published the first edition of Who Decides? A State by State Review of Abortion Rights in America.

1992 Planned Parenthood v. Casey - While Roe v. Wade technically stands, the Supreme Court's new "undue burden" standard opened the door for state legislatures to chip away at reproductive freedom.

2007 • Gonzalez v. Carhart - The Supreme Court upheld a ban on a common procedure for second trimester abortion care.

2014 Burwell v. Hobby Lobby - The Supreme Court allowed closely-held corporations to block their employees' access to no-copay birth control coverage as guaranteed by the Affordable Care Act (ACA) on the basis of religious objection.

Whole Woman's Health v. Hellerstedt - The Supreme Court struck down a Texas clinic shutdown law imposing medically unnecessary requirements on abortion providers because it imposed an "undue burden" on abortion access.

2020 • The Supreme Court decided two cases that impact reproductive freedom:

June Medical Services v. Russo - The Supreme Court struck down a Louisiana clinic shutdown law imposing medically unnecessary requirements on abortion providers because it imposed an "undue burden" on abortion access. While the decision preserved abortion access in Louisiana for now, Chief Justice John Roberts' concurrence left the door open for states to continue their attacks on reproductive freedom.

Trump v. Pennsylvania - The Supreme Court upheld the Trump administration's authority to issue rules that allow virtually any employer or university to deny no-copay birth control coverage as guaranteed by the ACA on the basis of a religious or moral objection.

2020 Key Findings and Political Landscape

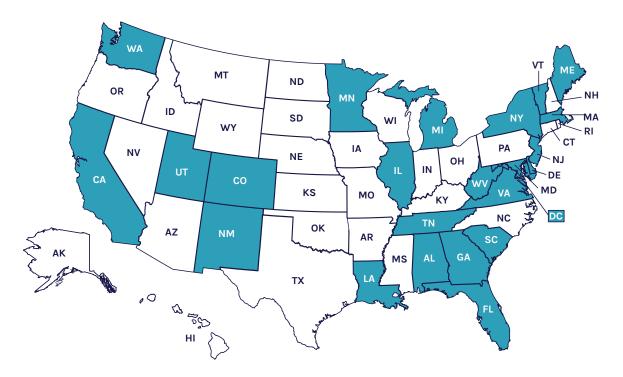
Key Findings: Expanding Reproductive Freedom in 2020

TOTAL MEASURES EXPANDING REPRODUCTIVE FREEDOM ENACTED IN 20201:

23 STATES and the DISTRICT OF COLUMBIA enacted 63 measures supporting reproductive freedom in 2020—fewer than the 96 measures passed in 2019, though legislatures closed early due to the pandemic.

The states which passed proactive legislation this year include: AL, CA, CO, DE, DC, FL, GA, IL, LA, ME, MD, MA, MI, MN, NJ, NM, NY, SC, TN, UT, VA, VT, WA, WV.

- Virginia led the nation by enacting 11 measures supporting reproductive freedom.
- The **District of Columbia** followed with 7 measures supporting reproductive freedom.
- And New Jersey enacted 6 measures supporting reproductive freedom.



KEY VICTORIES EXPANDING REPRODUCTIVE FREEDOM IN 2020:

- Virginia passed the Reproductive Health Protection Act, repealing many longstanding restrictions on abortion in the state, including mandates that people who are pregnant receive biased counseling, undergo a mandatory ultrasound, and wait at least 24 hours prior to an abortion. The law also repealed unnecessary restrictions requiring abortion care facilities to be regulated as hospitals, and expands scope of practice for nurse practitioners to perform first trimester abortion care.
- The Massachusetts state legislature overrode Governor Charlie Baker's veto to enact legislation that removes critical barriers
 to accessing abortion care in Massachusetts. The law codifies the right to abortion in state law, improves access to abortion
 later in pregnancy in cases of lethal fetal diagnosis, expands access to abortion for young people, and codifies expanded scope
 of practice for qualified advanced practice clinicians to perform abortion care.
- The **District of Columbia** codified the right to abortion, contraception, sterilization, infertility treatment, and pregnancy-related care. DC joined Oregon and Vermont to expand protections beyond *Roe v. Wade* by prohibiting government interference in these services. The measure also prohibits punishing people who self-manage abortion care or experience miscarriage or adverse pregnancy outcomes, and prohibits discrimination against healthcare professionals that provide abortion or sterilization care.
- This year voters in **Colorado** defeated a proposed ban on abortion later in pregnancy that would have forced someone to carry a pregnancy to term with no exceptions for risks to health, a lethal fetal diagnosis, or even in cases of rape.

¹This report uses "laws" to refer specifically to statutes adopted by the legislature or enacted by ballot measure. "Measures" is a broader term that includes the following: constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental action with statewide effect.

- California removed an outdated physician supervision requirement for Certified Nurse-Midwives, improving pregnancy and birth outcomes and expanding access to affordable, high-quality abortion care.
- The attorney general in **Maryland** issued an opinion stating that the law expands scope of practice for advanced clinicians to provide medication abortion care.
- Bills promoting healthy pregnancy again accounted for the largest percentage of measures expanding reproductive freedom, finding traction even in states hostile to reproductive freedom. 19 STATES and the DISTRICT OF COLUMBIA passed 42 measures to promote healthy pregnancy: AL, CA, CO, DE, DC, FL, GA, LA, ME, MD, NJ, NM, NY, SC, TN, UT, VT, VA, WA, WV.
 - o Georgia passed a bill expanding Medicaid coverage for postpartum care and lactation services.
 - Maryland, New Mexico, Tennessee, and Virginia enacted measures requiring employers to provide reasonable accommodations to pregnant working people.
 - o Alabama, Maine, Maryland, New York, Tennessee, Vermont, Virginia, West Virginia and the District of Columbia passed measures expanding the scope of, or funding for, maternal mortality review committees.
 - New Jersey passed a bill to study the effects of racial and ethnic disparities on the sexual and reproductive health of African-American women.
 - o 4 states, California, Colorado (by ballot measure), Utah, and Washington expanded paid family leave.
 - 7 states, California, Florida, Louisiana, New Jersey, South Carolina, Tennessee, and Virginia enacted legislation to expand protections for incarcerated pregnant people.
- Several states passed measures expanding access to contraception:
 - Vermont amended its law to allow pharmacists to prescribe hormonal contraception and to require insurers to cover it; Vermont's law also requires high schools to make cost-free condoms available to students.
 - Minnesota and Virginia enacted legislation to allow pharmacists to prescribe contraception, but with significant limitations for people under 18, who are still required to obtain a prescription, at least initially, from a physician.
 - West Virginia joined 18 states and the District of Columbia by allowing pharmacists to dispense 12 months of contraception at once, and enacted legislation expanding Medicaid coverage for long-acting reversible contraceptive methods (LARCs), without requiring medically unnecessary office visits.
 - o New Jersey required health insurance plans to cover all-FDA approved contraceptive products, without cost sharing.
 - o The District of Columbia, Illinois, and Virginia passed measures expanding access to emergency contraception.
- Washington enacted legislation requiring public schools to provide comprehensive sexual education that is evidence-informed, medically and scientifically accurate, age-appropriate, and inclusive for all students. The curriculum must include affirmative consent and bystander training.
- Washington passed legislation that protects healthcare providers from employment discrimination and does not allow the healthcare entity to limit the provider's provision of medically accurate and comprehensive information, notwithstanding their employer's religious beliefs.
- New Jersey enacted legislation to replace \$9.5 million in family planning funding lost to organizations that previously
 participated in the federal Title X family planning program, but that had lost eligibility as a result of Trump's domestic gag rule,
 which resulted in defunding family planning providers across the country.

Key Findings: Restricting Reproductive Freedom in 2020

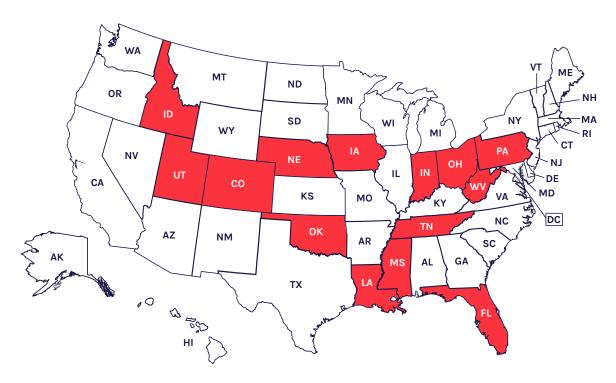
TOTAL MEASURES RESTRICTING REPRODUCTIVE FREEDOM ENACTED IN 2020:

14 STATES enacted 18 measures restricting reproductive freedom: CO, FL, ID, IN, IA, LA, MS, NE, OH, OK, PA, TN, UT, WV.

Legislatures nationwide adjourned early in 2020 as a result of the COVID-19 pandemic, undoubtedly hampering legislative activity.

In 2019, 23 STATES enacted 50 measures restricting reproductive freedom and in 2018, 22 STATES also enacted 50 anti-choice measures.

Since NARAL began tallying anti-choice measures in 1995, states have enacted 1,108 measures restricting reproductive freedom.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM IN 2020:

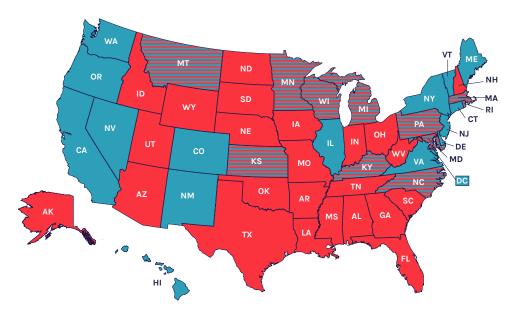
- Idaho and Utah both passed trigger bans that will criminalize abortion automatically if Roe v. Wade is overturned.
- Tennessee passed the most expansive anti-choice bill this year. With a nod to their existing trigger ban, the law bans abortion at as many points in pregnancy as possible—24, 23, 22, 21, 20, 18, 15, 12, 10, 8, and as few as 6 weeks of pregnancy—if courts allow it. Under the law, pregnant people must undergo a mandatory ultrasound to receive care, even if medically unnecessary. Legislators also included bans on abortion based on the reason the pregnant person is seeking care. The law, which subjects doctors who provide abortion care to criminal penalties, also requires providers to counsel pregnant patients about unproven claims that it is possible to "reverse" a medication abortion. This legislation was immediately challenged in court.
- Mississippi also enacted a ban on abortion based on the reason the pregnant person is seeking care.
- Florida enacted legislation requiring people under 18 to obtain consent from a parent or legal guardian in order to receive abortion care. Existing law already required parental notification. The new law requires a notarized record of the guardian's consent along with a copy of their government-issued identification. The law contains a judicial bypass procedure whereby young people can make a case to a judge about why parental consent is not warranted.
- Louisiana voters approved a ballot measure in November to amend the state constitution to make clear that it does not protect the right to abortion or require public coverage of abortion care.

- lowa amended its law imposing a mandatory delay before a person can obtain an abortion. In 2018, the lowa Supreme Court held that a 72-hour waiting period violated the state constitution. Pursuant to the law as amended this year, a person must wait 24-hours after giving written consent for the care, still requiring the person to make a second trip to the clinic. The only exception is for life-threatening or severe medical emergencies.
- Oklahoma enacted inflammatory legislation allowing the would-have-been parent or grandparent of a fetus, termed an "unborn person" in the bill, to initiate litigation against an abortion care provider. The measure is meant to shut down clinics in the state by allowing them to be sued.
- Nebraska banned the standard method for providing second trimester abortion care.
- Indiana, Ohio, and Utah enacted measures imposing restrictions on how abortion care providers dispose of fetal tissue.
- West Virginia passed an inflammatory law that inserts politicians into family decisions. The law elevates health disinformation, attacks healthcare providers, and is intended to shame those who need abortion care later in pregnancy. Similar bills were passed in Wyoming and Kentucky, but were vetoed by the states' governors.
- Three states passed laws directing funding to fake women's health centers: Florida, Idaho, and Pennsylvania.
- Colorado expanded health benefit plans issued or renewed in the state on or after January 1, 2022, to cover diagnosis of infertility, treatment for infertility, and fertility preservation services, but included a provision allowing religious employers to refuse to comply if the coverage conflicts with the organization's religious beliefs and practices.

Political Landscape: State Government

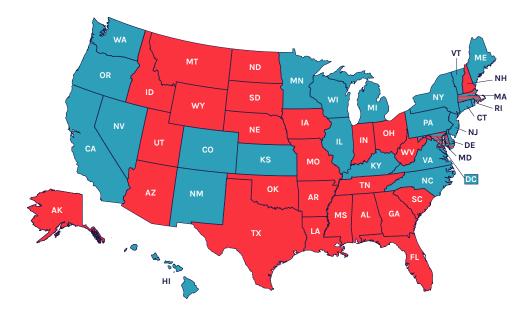
OVERVIEW:

- 15 STATES and the DISTRICT OF COLUMBIA have governments that support reproductive freedom (both the governor and the majority of the legislature support reproductive freedom): CA, CO, CT, DE, DC, HI, IL, ME, NV, NJ, NM, NY, OR, VT, VA, WA.
- 11 STATES have governments with mixed support for reproductive freedom: KS, KY, MD, MA, MI, MN, MT, NC, PA, RI, WI.
- 24 STATES have governments that oppose reproductive freedom (both the governor and the majority of the legislature oppose reproductive freedom): AL, AK, AZ, AR, FL, GA, ID, IN, IA, LA, MS, MO, NE, NH, ND, OH, OK, SC, SD, TN, TX, UT, WV, WY.



STATE EXECUTIVE: Position on Reproductive Freedom

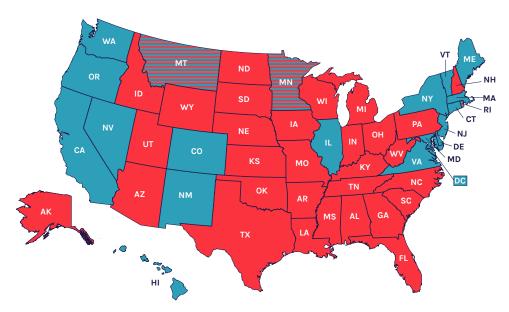
- 23 GOVERNORS and the MAYOR of the DISTRICT OF COLUMBIA support reproductive freedom: CA, CO, CT, DE, DC, HI, IL, KS, KY, ME, MI, MN, NV, NJ, NM, NY, NC, OR, PA, RI, VT, VA, WA, WI.
- 2 GOVERNORS have mixed support for reproductive freedom: MD, MA.
- 25 GOVERNORS oppose reproductive freedom: AL, AK, AZ, AR, FL, GA, ID, IN, IA, LA, MS, MO, MT, NE, NH, ND, OH, OK, SC, SD, TN, TX, UT, WV, WY.



STATE LEGISLATURES:

Legislatures that oppose reproductive freedom outnumber legislatures that support it

- 17 STATES and the DISTRICT OF COLUMBIA have legislatures that support reproductive freedom (both the state house and senate support reproductive freedom): CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NJ, NM, NY, OR, VT, VA, WA.
- 3 STATES have legislatures with mixed support for reproductive freedom: MN, RI, MT.
- 30 STATES have legislatures that oppose reproductive freedom (both the state house and senate oppose reproductive freedom): AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NE, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.



STATE SENATES¹: Position on Reproductive Freedom

- 18 Support Reproductive Freedom: CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NJ, NM, NY, OR, VT, VA, WA.
- 2 Mixed Support for Reproductive Freedom: MT, RI.
- 31 Oppose Reproductive Freedom: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, NE, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.

STATE HOUSES: Position on Reproductive Freedom

- 19 Support Reproductive Freedom: CA, CO, CT, DE, HI, IL, ME, MD, MA, MN, NV, NJ, NM, NY, OR, RI, VT, VA, WA.
- 1 Mixed Support for Reproductive Freedom: MT.
- 29 Oppose Reproductive Freedom: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.

¹Includes Nebraska's unicameral body and the District of Columbia's city council.

Fast Facts

Abortion Rights: Protections and Bans

Post-Roe Outlook: Abortion in the States

In its landmark 1973 decision, Roe v. Wade, the U.S. Supreme Court held that the right to abortion is a fundamental constitutional right. With the appointment of three Trump justices, the Supreme Court now has a supermajority hostile to reproductive freedom and many fear that Roe will be overturned. What would a world after Roe look like?

At the federal level every year since it was introduced in 2013, NARAL Pro-Choice America has urged the U.S. Congress to pass the Women's Health Protection Act, which would provide a federal statutory right to abortion, free from unnecessary restrictions and bans.

Without federal protection, if the Supreme Court overturns Roe, the regulation of abortion—its legality and accessibility—would completely fall to state law.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

9 STATES still have a near-total criminal ban on abortion that was enacted before Roe v. Wade: AL, AZ, AR, MI, MS, NM, OK, WV, WI.

The enforcement of these state laws is blocked by Roe
v. Wade. If Roe v. Wade is overturned, these laws could go
into effect.

10 STATES have enacted trigger laws that would impose a neartotal criminal ban on abortion if Roe is overturned: AR, ID, KY, LA, MS, MO, ND, SD, TN, UT.

4 STATES have amended their constitutions to make clear that they do not protect the right to abortion: **AL, LA, TN, WV.**

7 STATES have articulated in law their interest in restricting abortion to the maximum extent allowed by the Supreme Court: AR, KS, KY, LA, MO, ND, OH.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

2 STATES enacted trigger laws to criminalize abortion if Roe is overturned: **ID**, **UT**.

1 STATE approved a ballot initiative to amend its constitution to preclude a right to abortion: **LA**.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

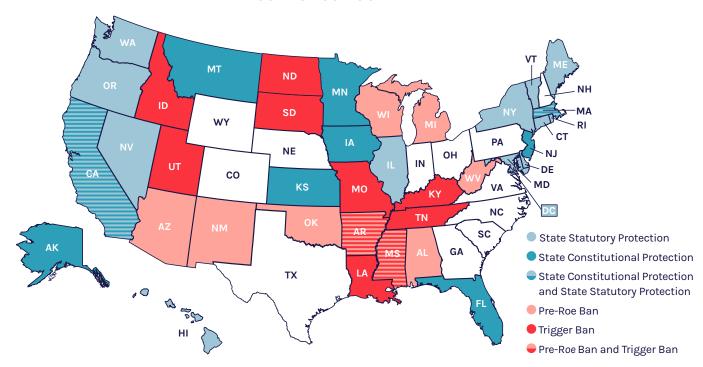
14 STATES and the DISTRICT OF COLUMBIA have codified the right to abortion in state law: CA, CT, DE, DC, HI, IL, ME, MD, MA, NV, NY, OR, RI, VT, WA.

9 STATES protect the right to abortion within their state constitutions: AK, CA, FL, IA, KS, MA, MN, MT, NJ.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE and the **DISTRICT OF COLUMBIA** enacted measures to improve protections for abortion access: **DC**, **MA**.

POST-ROE OUTLOOK



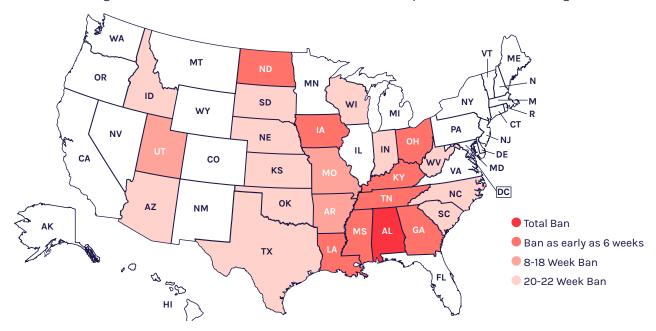
STATE	State Protects Abortion Rights in Statute	State Protects Abortion Rights in State Constitution	State Has a Pre-Roe Ban	State Has a Trigger Ban
Alabama				
Alaska				
Arizona				
Arkansas				
California				
Colorado				
Connecticut				
Delaware				
District of Columbia	•			
Florida		•		
Georgia				
Hawaii				
Idaho				
Illinois				
Indiana				
Iowa				
Kansas				
Kentucky				
Louisiana				
Maine				
Maryland				
Massachusetts				
Michigan				
Minnesota				
Mississippi				
Missouri				

STATE	State Protects Abortion Rights in Statute	State Protects Abortion Rights in State Constitution	State Has a Pre-Roe Ban	State Has a Trigger Ban
Montana				
Nebraska				
Nevada				
New Hampshire				
New Jersey				
New Mexico				
New York				
North Carolina				
North Dakota				
Ohio				
Oklahoma				
Oregon				
Pennsylvania				
Rhode Island				
South Carolina				
South Dakota				
Tennessee				
Texas				
Utah				
Vermont				
Virginia				
Washington				
West Virginia				
Wisconsin				
Wyoming				
TOTAL	14 + DC	9	9	10

Bans on Abortion by Week

The Supreme Court has long held that a person has the right to seek abortion care until the point of fetal viability. Despite this, states hostile to reproductive freedom have pushed bans on abortion at various arbitrary points in pregnancy. In 2019 alone, nine states passed these types of abortion bans. These unconstitutional bans on abortion are direct challenges to Roe v. Wade. They were passed with the intention of overturning the constitutional right to abortion.

Last year, anti-choice politicians in Missouri passed the first law that included multiple gestational bans at different points in pregnancy in the same bill. This year, despite the pandemic, Tennessee managed to pass a bill banning abortion at as many points in pregnancy as possible—at 24, 23, 22, 21, 20, 18, 15, 12, 10, 8, and as early as 6 weeks. The anti-choice politicians who introduced the bill specifically said their goal was to give the state "multiple shots" at ending Roe v. Wade. In Missouri and Tennessee, like other states, courts immediately blocked the unconstitutional abortion bans from taking effect. Despite all these attempts, abortion is still legal in all 50 states because the courts have thus far upheld the constitutional right to abortion.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM1:

19 STATES ban abortion after 22 weeks with only very narrow exceptions: AL, AR, GA, ID*, IN, IA, KS, KY, LA, NE, ND, OH, OK, SC, SD, TN*, TX, WV, WI.

5 STATES ban abortion after 20 weeks with only very narrow exceptions: AZ*, MS, MO*, NC*, TN*.

4 STATES have a ban on abortion at 18 weeks: AR, MO*, TN*, UT*.

3 STATES have a ban on abortion after 15 weeks: LA, MS, TN*.

 Louisiana's ban on abortion after 15 weeks will not go into effect unless similar laws in MS are upheld by the Fifth Circuit Court of Appeals.

1 STATE has a ban on abortion after 14 weeks: MO*.

2 STATES have a ban on abortion after 12 weeks: AR*, TN*.

1 STATE has a ban on abortion after 10 weeks: TN*.

2 STATES have a ban on abortion after 8 weeks: MO*, TN*.

8 STATES have a ban on abortion as early as six weeks—before many women even know they are pregnant: GA*, IA*, KY*, LA, MS*, ND*, OH*, TN*.

 Louisiana's ban on abortion as early as 6 weeks will not go into effect unless similar laws in MS are upheld by the Fifth Circuit.

1 STATE has a total abortion ban: AL*.

19 STATES have post-viability abortion bans that have inadequate exceptions, lack the necessary exceptions altogether, or define viability as occurring at a particular point in pregnancy: AL, DE*, FL, IN, IA, KS, MI, MN*, MT, NV, ND, OH, PA, SC, SD, TN, TX, UT, VA.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

• 1 STATE enacted a measure with cascading gestational bans on abortion: TN.

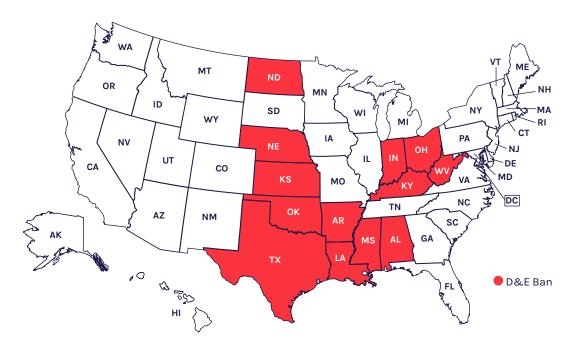
^{*} These measures are temporarily or permanently enjoined.

¹ For consistency, all weeks here are measured using the pregnant person's last menstrual period (LMP). Most doctors use LMP to measure pregnancy, as do many states. Other states define "commencement" of pregnancy as two weeks after LMP, when conception is likely to have occurred.

Bans Based on Method of Abortion Care

One avenue of undermining abortion rights is for politicians to interfere with how doctors care for their patients. Using intentionally inflammatory language, politicians hostile to reproductive freedom have worked to ban particular methods of providing safe abortion care as part of a larger national strategy to block access altogether.

These restrictions ban care people need and doctors recommend. Healthcare providers must be able to use their best medical judgment, not have politicians dictate the care they provide. There is no valid reason to deny providers the ability to use particular methods of care. The only reason is political, not medical.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

31 STATES ban abortion as early as 12 weeks, with no exception to protect a person's health, through a ban on the dilation and extraction (D&X) procedure: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, MT, NE, NH, NJ, NM, ND, OH, OK, SC, SD, TN, TX, UT, VA, WV, WI.

- 1 STATE bans this safe abortion procedure with only a narrow health exception: OH.
- The Federal Abortion Ban that became law in 2007 supersedes the state laws.

13 STATES the standard method for abortion care after about 14-15 weeks of pregnancy, dilation & evacuation (D&E): AL, AR, IN, KS, KY, LA, MS, NE, ND, OH, OK, TX, WV.

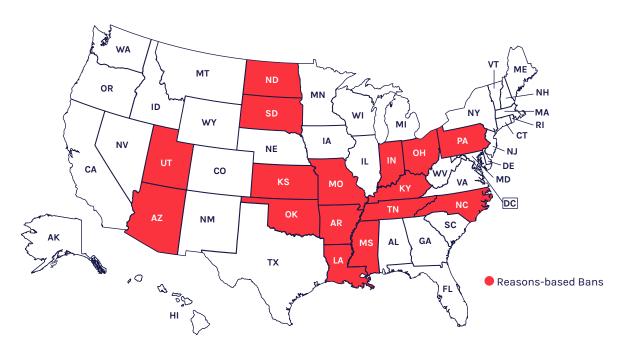
- 9 STATES' laws have been temporarily or permanently enjoined: AL, AR, IN, KS, KY, LA, OH, OK, TX.
- ND's D&E ban will go into effect only if Roe is overturned.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

1 STATE enacted a ban on D&E abortion: NE.

Bans Based on the Reason a Person May Seek Abortion Care

In yet another strategy to ban abortion by any means necessary, state governments hostile to reproductive freedom have worked to enact extreme bans on abortion that hold providers legally liable for the reasons a person may seek care. These reasons may include the potential race and sex of the pregnancy or in cases of fetal diagnosis. These bans not only restrict access and target people of color, but also force providers to interrogate a person's motives for seeking abortion care—something that does not belong in the doctor-patient relationship nor should be dictated by politicians.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

16 STATES have reasons-based bans on abortion: AZ, AR, IN, KS, KY, LA, MS, MO, NC, ND, OH, OK, PA, SD, TN, UT.

6 OF THESE STATES ban abortion if sought based on race: AZ, IN*, KY*, MS, MO, TN.

- 13 OF THESE STATES ban abortion if sought based on sex: AZ, AR, IN*, KS, KY*, MS, MO, NC, ND, OK, PA, SD, TN.
- 10 OF THESE STATES ban abortion if sought for reasons of fetal diagnosis: AR, IN, KY, LA, MS*, MO*, ND*, OH*, TN*, UT.
 - *These laws have been temporarily or permanently enjoined.
 - o UT's law will go in effect only if a court of binding authority holds that it is lawful.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

2 STATES enacted a ban on abortion if sought based on race: MS, TN.

2 STATES enacted a ban on abortion if sought based on sex: MS, TN.

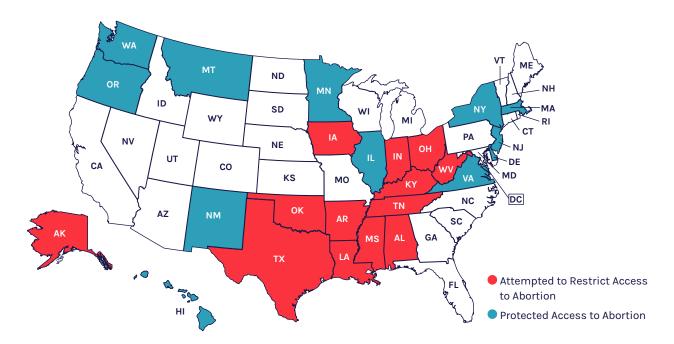
2 STATES enacted a ban on abortion if sought for reasons of fetal diagnosis: MS, TN.

COVID-19 and Reproductive Freedom

The COVID-19 pandemic gripped the world and the United States in 2020. Reproductive freedom was once again at the forefront—both in states actively protecting access to abortion and states that used the pandemic as an excuse to restrict access to abortion.

The anti-choice movement is obsessed with advancing their ideological agenda and ending legal abortion. They exploited the COVID-19 pandemic to advance that goal, prioritizing personal beliefs over science and using health disinformation to manipulate people at a time when we needed accurate information from doctors and experts more than ever. It is clear that this was an ideological attack on our fundamental rights—the states in which officials attempted to restrict access to abortion during the COVID-19 pandemic all introduced or enacted abortion bans and restrictions in recent years.

While some states spent their time restricting time-sensitive and needed care during a public health emergency, other states acted proactively to protect access to abortion.



2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

During the COVID-19 pandemic, anti-choice officials in 13 STATES attempted to restrict access to abortion care: AL, AK, AR, IN, IA, KY, LA, MS, OH, OK, TN, TX, WV.

 None of the COVID-19 executive orders issued in 2020 restricting access to abortion care are still in effect.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

12 STATES protected access to abortion care during the pandemic: DE, HI, IL, MA, MN, MT, NJ, NM, NY, OR, VA, WA.

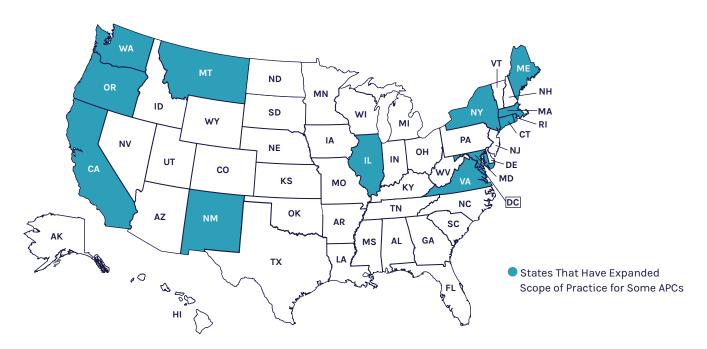
Fast Facts

Abortion Rights: Access and Restrictions

Expanded Scope of Practice

Everybody should have the freedom to access the time-sensitive abortion care they need no matter where they live—and expanding the scope of trusted, qualified medical professionals who can provide abortion care is a critical component of helping to make that a reality. According to the Guttmacher Institute, 89% of counties in the United States in 2017 did not have a known clinic. Expanding the type of providers who can offer abortion care is one way to expand access to abortion care, particularly in rural areas.

Advanced practice clinicians, such as advanced practice nurses and physicians assistants, are highly-trained, qualified, and already-licensed healthcare providers who can provide abortion care to people in their communities. Some states choose to expand access to abortion care by expanding the scope of practice for advanced practice clinicians to provide medication abortion, procedural abortion care, or both. Expanding scope of practice is critical to expanding access to abortion across the country.



STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

13 STATES have expressly expanded the scope of practice for some advanced practice clinicians (APCs) to include some abortion services: CA, CT, IL, ME, MD, MA, MT, NM, NY, OR, RI, VA, WA.

- 12 STATES have expressly expanded the scope of practice for some APCs to provide medication abortion care: CA, CT, IL, ME, MD, MA, MT, NM, NY, RI, VA, WA.
- 9 STATES have expressly expanded the scope of practice for some APCs to provide procedural abortion care: CA, IL, ME, MA, MT, NY, OR, VA, WA.

6 additional STATES and the DISTRICT OF COLUMBIA allow some APCs to provide some abortion care: CO, DC, HI, NH, NJ, VT, WV.

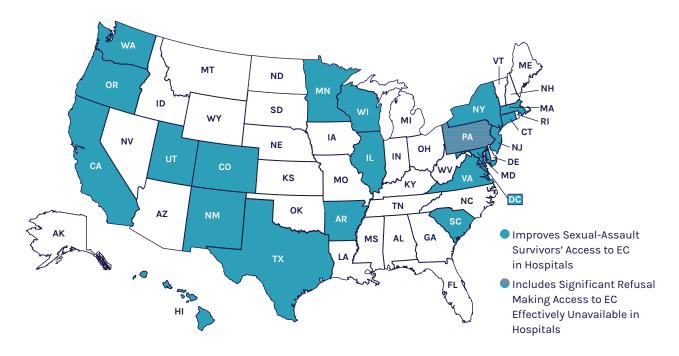
2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

3 STATES enacted measures that allow advanced practice clinicians to provide abortion care: MD, MA, VA.

1 STATE enacted a measure removing the physician supervision requirement for certified nurse midwives, who are able to provide abortion care: CA.

Emergency Contraception

Emergency contraception (EC) is birth control that can be used soon after sex to prevent a pregnancy before it occurs. This means that EC is different from medication abortion in that it has no effect on an existing pregnancy. There are several types of Food and Drug Administration-approved methods of EC, including some that are approved for over-the-counter sale to people of all ages. Despite the fact that the anti-choice movement has continued to attack access to EC by intentionally spreading disinformation about how it works, many states have taken proactive steps to expand access, particularly for survivors of sexual assault.



STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

19 STATES and the DISTRICT OF COLUMBIA have measures that improve sexual-assault survivors' access to EC in hospitals: AR, CA, CO, CT, DC, HI, IL, MD, MA, MN, NJ, NM, NY, OR, SC, TX, UT, VA, WA, WI.

• PA's law to make EC available in hospital emergency rooms does not appear in the above count because it includes a significant refusal clause that makes access to the medication effectively unavailable.

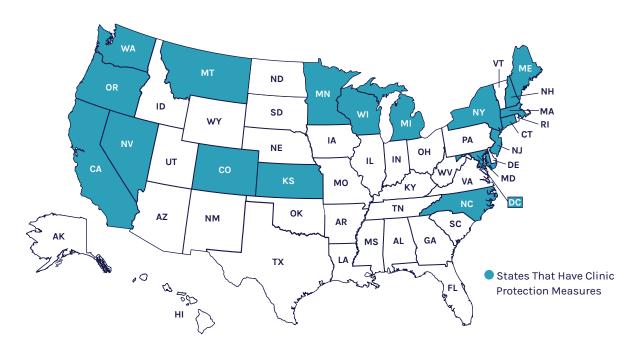
2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

2 STATES and the DISTRICT OF COLUMBIA enacted measures to improve access to EC in hospital emergency rooms: DC, IL, VA.

Clinic Protections

Patients and abortion providers' real-world experiences have shown the lengths to which the anti-choice movement is willing to go to achieve their goal of ending access to abortion. The long history of clinic violence and the increase in threats and violence against patients and providers demonstrates the need for clinic protections.

Measures protecting patients and providers from violence and intimidation are critical to preserving access to abortion care and ensuring that clinics remain open. While most states that protect against clinic violence have laws that criminalize interference with access to healthcare facilities, some have proactive laws—bubble zones—that guarantee staff and patients can enter the clinic without obstruction.



STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

18 STATES and the DISTRICT OF COLUMBIA have measures that protect healthcare facilities, providers, and/or patients from blockades, harassment, and/or other anti-choice violence: CA, CO, CT, DC, KS, ME, MD, MA, MI, MN, MT, NV, NH, NJ, NY, NC, OR, WA, WI.

- 3 STATES have proactive laws that protect patients and clinic personnel from unwanted harassment within specified distances from clinics: CO, MT, NH.
 - o 1 STATE has a buffer zone law that is currently not enforced: NH.

Guarantees and Refusals of Care

Thus far, unable to make abortion illegal, lawmakers hostile to reproductive freedom have enacted a wide variety of laws to try to make abortion and other reproductive healthcare unavailable.

Laws allowing refusals of healthcare, coverage, referrals, and information by a broad range of individuals and institutions—including hospitals, healthcare providers, pharmacists, employers, and insurance companies—based on a religious or moral objection are a significant barrier to care. This is particularly true for those who already face disproportionate obstacles such as Black, Indigenous, communities of color, young people, LGBTQ people, and more.

Some states have taken action to guarantee access to care and ensure the personal beliefs of an institution or individual do not impede someone's ability to get the healthcare and information they need.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

48 STATES and the DISTRICT OF COLUMBIA allow certain individuals or organizations to refuse to provide specific reproductive-health services, information, or referrals: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, WA, WV, WI, WY.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM*:

- **7 STATES** guarantee that a person's birth control prescriptions will be filled: CA, IL, ME, NV, NJ, WA, WI.
- 2 STATES and the DISTRICT OF COLUMBIA guarantee that employees cannot be discriminated against because of a reproductive-health decision: DE, DC, NY.
- **1 STATE** protects a healthcare professional's participation in abortion or sterilization procedures: **DC**.
- **2 STATES** allow providers in religious health care systems to give patients comprehensive information and resources about their health status and options: IL, WA.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

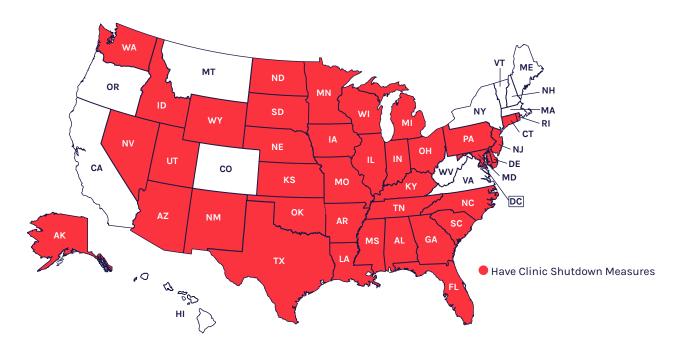
- **1 STATE** enacted a measure expanding employment discrimination protections to include a healthcare professional's participation in abortion or sterilization procedures: **DC**.
- **1 STATE** enacted a measure that allows providers in religious healthcare systems to give patients comprehensive information and resources about their health status and options: **WA**.

Clinic Shutdown Laws

In addition to direct attacks on Roe v. Wade, for years, politicians hostile to reproductive freedom have worked to incrementally chip away at the right to abortion through a series of restrictions intended to close clinics and push access out of reach.

The anti-choice movement pushes medically unnecessary restrictions on clinics and doctors who provide abortion care under the guise of protecting patient safety—but they are nothing more than a thinly veiled attempt to erect barriers and block access to abortion care through excessive and costly mandates designed to shut down clinics.

Clinic shutdown laws, also known as targeted restrictions of abortion providers (TRAP), often include arbitrary and medically unnecessary requirements, such as restrictions that force clinics to needlessly convert into ambulatory surgical centers, or minihospitals, at great expense. Other common TRAP restrictions include those that limit the provision of care only to physicians or to hospital settings, require abortion providers to obtain admitting privileges at nearby hospitals, or require facilities to have a transfer agreement with a local hospital (with nothing requiring hospitals to grant such privileges).



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

38 STATES have TRAP measures subjecting abortion providers to restrictions not imposed on other medical professionals: AL, AK, AZ, AR, CT, DE, FL, GA, ID, IN, IA, IL, KS, KY, LA, MD, MI, MN, MS, MO, NE, NV, NJ, NM, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, WA, WI, WY.

- 16 STATES have enacted measures unnecessarily requiring abortion providers to have admitting privileges at a hospital, though hospitals are not required to consider or grant the request: AL, AZ, AR, FL, IN, KS*, LA*, MS*, MO, NJ, ND, OK, SC, TN*, TX, WI*.
- * These measures are temporarily or permanently enjoined.

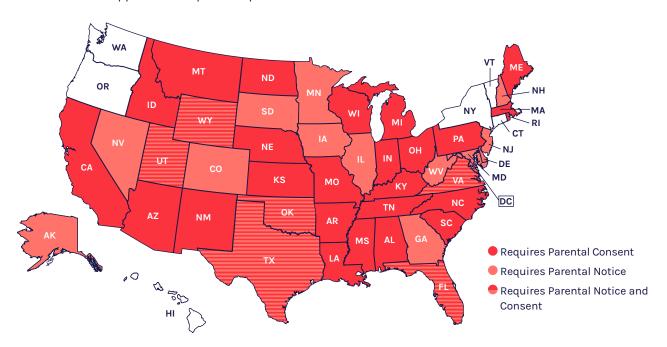
2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure to repeal restrictions on abortion providers that are not imposed on other medical professionals: VA.

Young People & Abortion

Most states require young people to notify or even obtain consent from one or both parents before they can receive abortion care. While most young people talk with at least one parent when facing an unintended pregnancy, others cannot. Some young people do not have access to their parents or are afraid of anger or abuse. In these situations, young people deserve access to healthcare providers who can offer counseling and the safe medical care they need, not abortion restrictions. All people, including young people, deserve to make decisions for themselves about if, when, and how to become a parent.

Mandatory notification and consent laws disproportionately impact young people of color and immigrant youth, who already face barriers to care. These restrictions force many young people into unsafe situations. They may delay accessing critical care, have to travel out of state, or end up in avoidable and unsafe situations. Laws can't force young people to talk to their parents—but they may force them into decisions that endanger their health and well-being. Of course, most parents hope their children will seek out their advice and support, but responsible parents want, above all, for their children to be safe.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

44 STATES have parental-notice or -consent measures that restrict young people's access to abortion: AL, AK, AZ, AR, CA, CO, DE, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WV, WI, WY.

- 31 STATES require parental consent: AL, AZ, AR, CA*, FL, ID, IN, KS, KY, LA, ME, MA, MI, MS, MO, MT*, NE, NM*, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WI, WY.
- 19 STATES require parental notice: AK*, CO, DE, FL, GA, IL, IA, MD, MN, NV*, NH, NJ*, OK, SD, TX, UT, VA, WV, WY.
- 6 OF THESE STATES require both parental notice and consent: FL, OK, TX, UT, VA, WY.
- 12 OF THESE STATES have parental-notice and/or -consent measures that, in some cases, permit other trusted adults to stand in for a parent: CO, DE, IL, IA, ME, MD, NE, NC, PA, SC, VA, WI.
- * These measures have been found unconstitutional and unenforceable.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure requiring parental consent: FL.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

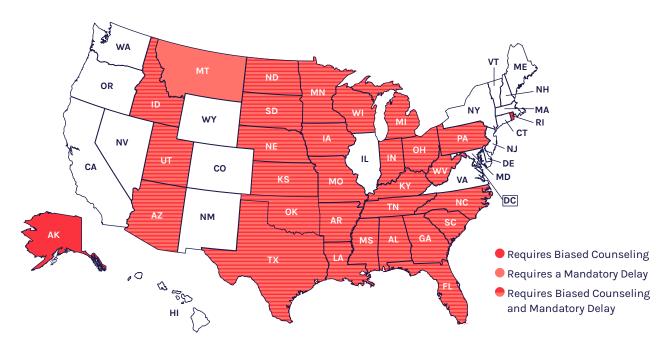
1 STATE enacted a measure partially repealing the state's parental consent law for 16- and 17-year-olds and streamlining the judicial bypass process for people under 16 by allowing remote hearings: MA.

Biased Counseling and Mandatory Delays

In 1992, in *Planned Parenthood v. Casey*, the Supreme Court affirmed that there should be no "undue burden" placed on a person's right to abortion. But since then, politicians hostile to reproductive freedom nationwide have passed medically unnecessary and politically-motivated restrictions, creating a web of barriers that push abortion care out of reach,

Through biased counseling laws, politicians seek to shame and intimidate people seeking abortion care by requiring providers to disseminate medically inaccurate information, unproven claims, and propaganda. These paternalistic mandates insult pregnant people, implying they are not capable of making decisions for themselves.

Mandatory delay laws, which often force pregnant people to make two trips to a clinic, create additional burdens for people seeking abortion care and serve no medical purpose. These laws particularly harm those in rural areas who often have to travel for many hours to reach a healthcare provider, and those who do not have the resources to take extra time off of work or to pay for child care.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

30 STATES have laws that subject people seeking abortion care to biased counseling requirements: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, NE, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, WV, WI.

• 9 STATES have laws requiring providers to provide medically unproven information on the ability to "reverse" a medication abortion: AR, ID, KY, NE, ND, OK, SD, TN, UT.

29 STATES have laws that force people to endure mandatory delays before accessing abortion care: AL, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, MT, NE, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI.

3 STATES' biased counseling and mandatory delay laws have been found fully or partially unconstitutional: FL, MT, TN.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

2 STATES enacted measures requiring a mandatory delay: IA*, TN.

• *The Iowa legislature replaced the 72-hour mandatory delay law, which was enjoined in 2018, with a 24-hour delay, which has been preliminarily enjoined in state court.

1 STATE enacted legislation that subjects people seeking abortion services to biased counseling requirements: TN.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

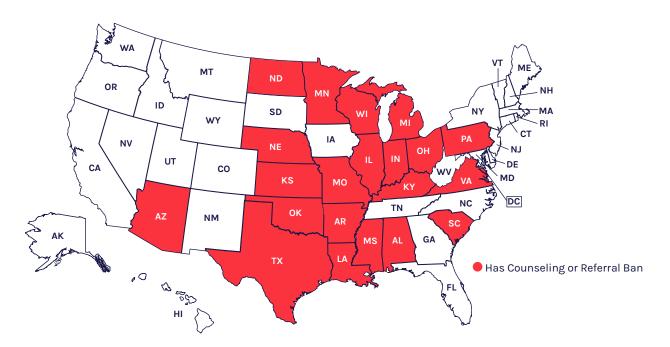
2 STATES repealed provisions mandating biased counseling and mandatory delays: MA, VA.

Counseling and Referral Bans

"Gag rules," sometimes called counseling and referral bans, typically prohibit organizations that receive state and/or federal funds from counseling or referring people for abortion care. In March 2019, the Trump administration published a new restriction blocking the availability of federal funds to family planning providers, such as Planned Parenthood, if they also offered abortion care-known as the domestic gag rule. The restriction required providers receiving these funds to refer all people who are pregnant to prenatal care even if a patient wants to end the pregnancy.

Counseling and referral bans similarly exist in the laws of some states. Beyond prohibiting the use of state funds for abortion care, states with these gag rules refuse to allow providers who receive state funds to refer pregnant people to abortion providers or provide information about abortion services—even if the state funds are not used.

To make the best decisions for their lives, families, and circumstances, people must have access to full, complete, and accurate information about their options.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

21 STATES have measures that prohibit some or all state employees or organizations that receive state funds from counseling or referring for abortion care: AL, AZ, AR, IL, IN, KS, KY, LA, MI, MN, MS, MO, NE, ND, OH, OK, PA, SC, TX, VA, WI.

• 1 STATE prohibition has been held partially unconstitutional: ND.

Fast Facts

Reproductive Health Coverage: Guarantees and Restrictions

Private Coverage of Contraception

Measures promoting comprehensive insurance coverage of contraception are crucial to reproductive freedom.

Thanks to the Affordable Care Act (ACA), private insurance plans must cover all Food and Drug Administration-approved contraceptive methods without additional out-of-pocket costs. This means that people can make decisions about what the best method of birth control is for them, without worrying about cost constraints. Though the birth control benefit helped millions of people, the Trump administration undermined it by allowing virtually any employer or university to opt out of coverage.

Many states have enacted policies that promote and improve insurance coverage for contraception. One such policy is known as contraceptive equity: Insurers must cover prescription contraception to the same extent as other medications. More recently, states have begun going beyond contraceptive equity and are codifying the ACA's birth control benefit into state law. Some states even require that insurers cover a broader range of contraceptives without cost-sharing than is required under the ACA and/or cover a year's supply of contraception dispensed at once. These measures are an important backstop to the federal law and allow states to ensure more robust coverage of contraception.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

26 STATES ensure equity in private insurance coverage for prescription contraception: AZ, AR, CA, CO, CT, DE, GA, HI, IL, IA, ME, MD, MA, MI, MT, NV, NH, NJ, NY, NC, OR, RI, VT, WA, WV, WI.

7 STATES have codified the ACA's contraceptive-coverage policy requiring insurers to cover all 18 FDA-approved contraceptive methods without cost sharing: **DE**, **ME**, **NV**, **NH**, **NM**, **VT**, **VA**.

9 STATES and the DISTRICT OF COLUMBIA require that health insurance plans cover each unique contraceptive product without cost sharing: CA, CT, DC, IL, MD, MA, NJ, NY, OR, WA.

20 STATES and the DISTRICT OF COLUMBIA require that health insurance plans cover multiple months of contraception dispensed at once: CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NH, NJ, NM, NY, OR, RI, VT, VA, WA, WV.

- 17 STATES and the DISTRICT OF COLUMBIA require coverage of 12 months of contraception dispensed at once: CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NH, OR, RI, VT, VA, WA, WV.
- 2 STATES require coverage of six months of contraception dispensed at once: NJ, NM.

2020 ENACTED MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure to require health insurance plans to cover all 18 FDA-approved contraceptive methods without cost sharing: VA.

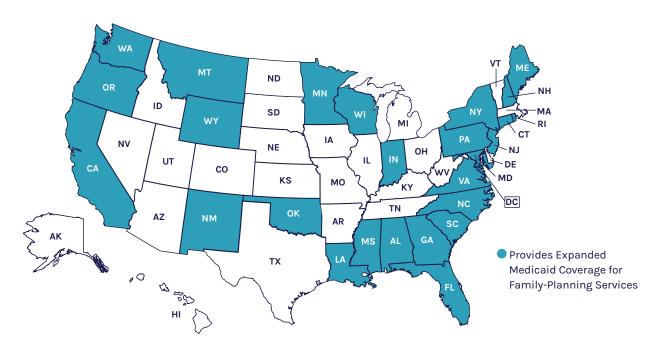
1 STATE enacted a measure to require health insurance plans to cover each unique contraceptive product without cost sharing: NJ.

1 STATE enacted a measure to require health insurance plans to cover multiple months of contraception dispensed at once: WV.

Public Coverage of Contraception

Cost is one of the most significant barriers to accessing reproductive healthcare in the United States. Medicaid, which provides insurance to many low-income individuals, is the single largest funding source for family planning services in the United States.

The Medicaid program is a vital safety net—but many who need Medicaid do not qualify for their state's program because of limited-eligibility rules. States may apply for a waiver from the federal government to expand eligibility, but the waiver is subject to continuous review and modification. To streamline enrollment and reduce administrative costs, under the Affordable Care Act, states may submit a State Plan Amendment (SPA) to expand access to their family planning program under Medicaid permanently.



STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

26 STATES, as of August 2020, provided expanded access to Medicaid coverage for family-planning services: AL, CA, CT, FL, GA, IN, LA, ME, MD, MN, MS, MT, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, VA, WA, WI, WY.

- 9 STATES provided this coverage through a waiver obtained from the federal government: AL, FL, GA, MS, MT, OR, RI, WA, WY.
- 17 STATES provided this coverage through a SPA: CA, CT, IN, LA, ME, MD, MN, NH, NJ, NM, NY, NC, OK, PA, SC, VA, WI.

15 STATES and the DISTRICT OF COLUMBIA provide Medicaid coverage of 12 months of contraception dispensed at once: CA, CO, DE, DC, HI, MD, MA, NV, NH, NM, NY, OR, SD, TX, VT, WA.

7 STATES provide Medicaid coverage of over-the-counter emergency contraception: DE, IL, MD, MA, NY, OR, WA.

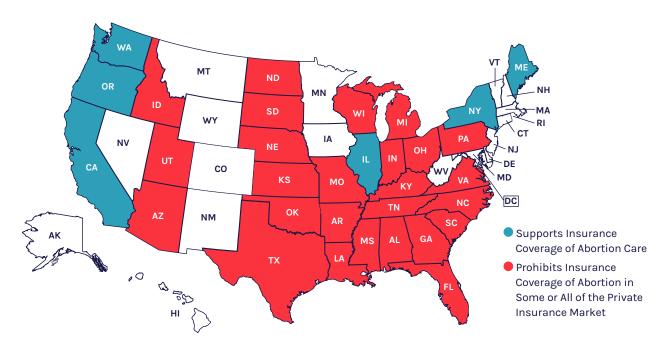
2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted measures expanding access to Medicaid coverage for family planning services: NJ.

Private Coverage of Abortion

Several states specifically target coverage of abortion care by private insurance plans. Politicians hostile to reproductive freedom have enacted laws that prohibit insurance companies from covering abortion care in the state insurance exchanges and even in the state's entire private insurance market. This puts abortion care financially out of reach for too many people—which is the exact purpose of these abortion coverage bans.

Conversely, measures that guarantee coverage for abortion ensure that people have access to the safe, comprehensive care they need. Such laws recognize that abortion is a vital part of a range of reproductive healthcare.



STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

6 STATES have measures supporting insurance coverage for abortion care: CA, IL, ME, NY, OR, WA.

- 3 STATES have measures guaranteeing insurance coverage for abortion services: CA, NY, OR.
- 3 STATES have measures requiring insurers that cover maternity services to also cover abortion services: IL, ME, WA.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

26 STATES prohibit insurance plans from covering abortion services in all or some of the private insurance market: AL, AZ, AR, FL, GA, ID, IN, KS, KY, LA, MI, MS, MO, NE, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, VA, WI.

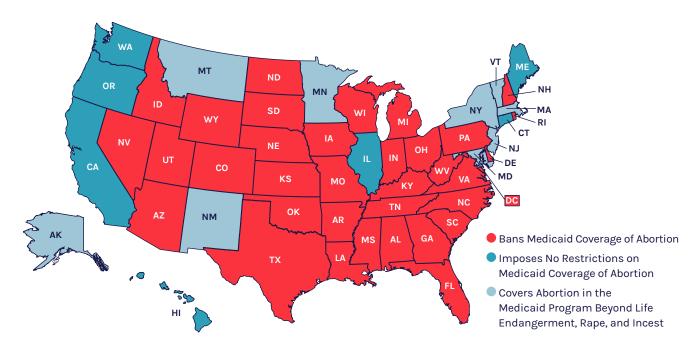
- 11 STATES expressly prohibit abortion coverage in the entire private insurance market: ID, IN, KS, KY, MI, MO, NE, ND, OK, TX, UT.
- 24 STATES expressly prohibit abortion coverage in state insurance exchanges: AL, AZ, AR, FL, GA, ID, IN, KS, LA, MI, MS, MO, NE, NC, OH, OK, PA, SC, SD, TN, TX*, UT, VA, WI.

*Although Texas does not have a state exchange, this measure prohibits abortion coverage in the event an exchange is established.

Public Coverage of Abortion

Since it was first passed in 1976, racist and discriminatory abortion coverage bans such as the Hyde Amendment have blocked insurance coverage for abortion care for those who receive their health insurance through the federal government.

Abortion coverage bans disproportionately hurt people already harmed by disparities in our healthcare systems, especially Black and Brown women, transgender and non-binary people, and those with lower incomes. Many states echo the federal abortion coverage bans in their state law. Other states, however, guarantee comprehensive coverage that includes abortion in publicly-funded healthcare programs.



STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

33 STATES and the DISTRICT OF COLUMBIA ban Medicaid coverage of abortion care in almost all cases (exceptions only for life endangerment, rape, and incest): AL, AZ, AR, CO, DE, DC, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NE, NV, NH, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WV, WI, WY.

- 7 OF THESE STATES cover abortion in their Medicaid programs in extremely limited circumstances beyond life endangerment, rape, and incest: IN, IA, MS, UT, VA, WV, WI.
- 1 STATE bans Medicaid coverage of abortion care without exception, in violation of federal law: SD.

17 STATES expressly prohibit abortion coverage for public employees: AZ, AR, CO, GA, KS, KY, MA, MS, NE, NC, ND, OH, PA, RI, SC, VA, WI.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

9 STATES cover abortion in their Medicaid programs in circumstances beyond life endangerment, rape, and incest: AK, MD, MA, MN, MT, NJ, NM, NY, VT.

7 STATES impose no restrictions on Medicaid coverage of abortion care: CA, CT, HI, IL, ME, OR, WA.

State Profiles

How Each State Measures Up

Alabama

PRE-ROE BAN: Alabama has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

ACCESS FACT: 59% of Alabama women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Kay Ivey (R) opposes reproductive freedom.

LEGISLATURE

The Alabama Senate opposes reproductive freedom. The Alabama House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Alabama state constitution does not provide additional protection for the right to abortion.

NO - Alabama does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Alabama bans the standard method for providing second trimester abortion care.

YES - Alabama unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Alabama does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Alabama does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Alabama subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Alabama subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Alabama restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Alabama has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Alabama law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Alabama does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Alabama allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Alabama prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Alabama law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Alabama expressly prohibits abortion coverage in all or some of the private insurance market.

PRIVATE COVERAGE OF ABORTION

NO - Alabama expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Alabama restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Alaska



ACCESS FACT: 32% of Alaska women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor Mike Dunleavy (R) opposes reproductive freedom.

LEGISLATURE

The Alaska Senate opposes reproductive freedom. The Alaska House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Alaska state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Alaska does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Alaska does not ban the standard method for providing second trimester abortion care.

NO - Alaska does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Alaska does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Alaska does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Alaska subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Alaska subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Alaska restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - Alaska has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Alaska law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Alaska does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Alaska allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Alaska does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Alaska law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Alaska has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Alaska has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Alaska covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

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Arizona

PRE-ROE BAN: Arizona has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

ACCESS FACT: 18% of Arizona women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Doug Ducey (R) opposes reproductive freedom.

LEGISLATURE

The Arizona Senate opposes reproductive freedom. The Arizona House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Arizona state constitution does not provide additional protection for the right to abortion.

NO - Arizona does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Arizona does not ban the standard method for providing second trimester abortion care.

YES - Arizona unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Arizona bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Arizona does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Arizona subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Arizona subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Arizona restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Arizona has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Arizona law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Arizona does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Arizona allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Arizona prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Arizona law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Arizona has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Arizona expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Arizona restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Arkansas

TRIGGER BAN: Arkansas has a trigger law to ban abortion if Roe v. Wade is overturned.

Severely Restricted Access

ACCESS FACT: 77% of Arkansas women live in counties with no abortion clinic.*

Political Information

EXECUTIVE

Governor Asa Hutchinson (R) opposes reproductive freedom.

LEGISLATURE

The Arkansas Senate opposes reproductive freedom. The Arkansas House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Arkansas state constitution does not provide additional protection for the right to abortion.

NO - Arkansas does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Arkansas bans the standard method for providing second trimester abortion care.

YES - Arkansas unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Arkansas bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Arkansas does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Arkansas subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Arkansas subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Arkansas restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - Arkansas law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Arkansas law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Arkansas does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Arkansas allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Arkansas prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Arkansas law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Arkansas has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Arkansas expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Arkansas restricts low-income people's access to abortion.

COLOR KEY: Restricts Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



California



ACCESS FACT: 3% of California women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Gavin Newsom (D) supports reproductive freedom.

LEGISLATURE

The California Senate supports reproductive freedom. The California House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The California state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

YES - California has an affirmative right to abortion enshrined in state law.

BANS

NO - California does not ban the standard method for providing second trimester abortion care.

NO - California does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - California does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - California expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - California treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - California does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - California restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - California law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - California law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - California guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - California allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - California does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - California law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - California provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - California guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - California covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice California

www.prochoicecalifornia.org 🔽 @ProChoiceCA

Colorado



ACCESS FACT: 27% of Colorado women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Jared Polis (D) supports reproductive freedom.

LEGISLATURE

The Colorado Senate supports reproductive freedom. The Colorado House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Colorado state constitution does not provide additional protection for the right to abortion.

NO - Colorado does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Colorado does not ban the standard method for providing second trimester abortion care.

NO - Colorado does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Colorado does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

Colorado has no measure defining which medical professionals may provide abortion.

CLINIC SHUTDOWN LAWS

NO - Colorado treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Colorado does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Colorado restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

YES - Colorado law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Colorado law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Colorado does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Colorado allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Colorado does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Colorado law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Colorado provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Colorado has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Colorado restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Connecticut



ACCESS FACT: 5% of Connecticut women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Ned Lamont (D) supports reproductive freedom.

LEGISLATURE

The Connecticut Senate supports reproductive freedom.

The Connecticut House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Connecticut state constitution does not provide additional protection for the right to abortion.

YES - Connecticut has an affirmative right to abortion enshrined in state law.

BANS

NO - Connecticut does not ban the standard method for providing second trimester abortion care.

NO - Connecticut does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Connecticut does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Connecticut expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Connecticut subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Connecticut does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - Connecticut does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - Connecticut law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Connecticut law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Connecticut does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Connecticut allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Connecticut does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Connecticut law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Connecticut provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

Connecticut has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Connecticut covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Connecticut

Delaware



ACCESS FACT: 18% of Delaware women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor John Carney (D) supports reproductive freedom.

LEGISLATURE

The Delaware Senate supports reproductive freedom. The Delaware House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Delaware state constitution does not provide additional protection for the right to abortion.

YES - Delaware has an affirmative right to abortion enshrined in state law.

BANS

NO - Delaware does not ban the standard method for providing second trimester abortion care.

NO - Delaware does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Delaware does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Delaware does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Delaware does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Delaware does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting period.

YOUNG PEOPLE AND ABORTION

YES - Delaware restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - Delaware has not improved people's access to emergency

contraception in the ER.

CLINIC PROTECTIONS

NO - Delaware law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Delaware does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Delaware allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Delaware prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Delaware law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Delaware provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Delaware has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Delaware restricts low-income people's access to abortion.

COLOR KEY: Restricts Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



District of Columbia

ACCESS FACT: 0% of District of Columbia women live in counties with no abortion clinic.*

Political Information

EXECUTIVE

Mayor Muriel Bowser (D) supports reproductive freedom.

LEGISLATURE

The District of Columbia City Council supports reproductive freedom

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The District of Columbia has an affirmative right to abortion enshrined in state law.

BANS

NO - The District of Columbia does not ban the standard method for providing second trimester abortion care.

NO - The District of Columbia does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - The District of Columbia does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - The District of Columbia does not allow some qualified healthcare professionals to provide abortion service.

CLINIC SHUTDOWN LAWS

NO - The District of Columbia treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - The District of Columbia does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - The District of Columbia does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - District of Columbia law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - The District of Columbia law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - The District of Columbia does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - The District of Columbia allows certain organizations or individuals to refuse to provide people specific reproductivehealth services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - The District of Columbia does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - The District of Columbia law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - The District of Columbia has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

The District of Columbia has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - The District of Columbia restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org



**NOTE: Because Congress routinely interferes with the District of Columbia's local abortion-related policy, no local grade is given.

Florida



ACCESS FACT: 24% of Florida women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Ron DeSantis (R) opposes reproductive freedom.

LEGISLATURE

The Florida Senate opposes reproductive freedom. The Florida House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Florida state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Florida does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Florida does not ban the standard method for providing second trimester abortion care.

NO - Florida does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Florida does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Florida does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Florida subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Florida subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Florida restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

NO - Florida has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Florida law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Florida does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Florida allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Florida does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Florida law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Florida provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Florida expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Florida restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Georgia



ACCESS FACT: 55% of Georgia women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Brian Kemp (R) opposes reproductive freedom.

LEGISLATURE

The Georgia Senate opposes reproductive freedom. The Georgia House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Georgia state constitution does not provide additional protection for the right to abortion.

NO - Georgia does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Georgia does not ban the standard method for providing second trimester abortion care.

YES - Georgia unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Georgia does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Georgia does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Georgia subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Georgia subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Georgia restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - Georgia has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Georgia law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Georgia does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Georgia allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Georgia does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Georgia law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Georgia provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Georgia expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Georgia restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Georgia

www.prochoicegeorgia.org 🔽 @NARALGeorgia

Hawaii



ACCESS FACT: 5% of Hawaii women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor David Ige (D) supports reproductive freedom.

LEGISLATURE

The Hawaii Senate supports reproductive freedom. The Hawaii House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Hawaii state constitution does not provide additional protection for the right to abortion.

YES - Hawaii has an affirmative right to abortion enshrined in state law.

BANS

NO - Hawaii does not ban the standard method for providing second trimester abortion care.

NO - Hawaii does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Hawaii does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Hawaii does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Hawaii treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Hawaii does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - Hawaii does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - Hawaii law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Hawaii law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Hawaii does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Hawaii allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Hawaii does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Hawaii guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Hawaii has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Hawaii has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Hawaii covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Idaho

TRIGGER BAN: Idaho has a trigger law to ban abortion if Roe v. Wade is overturned.

ACCESS FACT: 67% of Idaho women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Brad Little (R) opposes reproductive freedom.

LEGISLATURE

The Idaho Senate opposes reproductive freedom. The Idaho House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Idaho state constitution does not provide additional protection for the right to abortion.

NO - Idaho does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Idaho does not ban the standard method for providing second trimester abortion care.

YES - Idaho unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Idaho does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Idaho does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Idaho subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Idaho subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Idaho restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Idaho has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Idaho law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Idaho does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Idaho allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Idaho does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Idaho law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Idaho has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Idaho expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Idaho restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Illinois



ACCESS FACT: 37% of Illinois women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor J.B. Pritzker (D) supports reproductive freedom.

LEGISLATURE

The Illinois Senate supports reproductive freedom. The Illinois House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Illinois state constitution does not provide additional protection for the right to abortion.

YES - Illinois has an affirmative right to abortion enshrined in state law.

BANS

NO - Illinois does not ban the standard method for providing second trimester abortion care.

NO - Illinois does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Illinois does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Illinois expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Illinois subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Illinois does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Illinois restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

YES - Illinois law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Illinois law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - Illinois guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - Illinois allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Illinois prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Illinois guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Illinois has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - Illinois guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - Illinois covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Indiana



ACCESS FACT: 70% of Indiana women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Eric Holcomb (R) opposes reproductive freedom.

LEGISLATURE

The Indiana Senate opposes reproductive freedom.

The Indiana House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Indiana state constitution does not provide additional protection for the right to abortion.

NO - Indiana does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Indiana bans the standard method for providing second trimester abortion care.

YES - Indiana unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Indiana bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Indiana does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Indiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Indiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Indiana restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Indiana has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Indiana law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Indiana does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Indiana allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Indiana prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Indiana law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

48

YES - Indiana provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Indiana expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Indiana restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



lowa



ACCESS FACT: 58% of Iowa women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Kim Reynolds (R) opposes reproductive freedom.

LEGISLATURE

The Iowa Senate opposes reproductive freedom. The Iowa House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Iowa state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Iowa does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Iowa does not ban the standard method for providing second trimester abortion care.

YES - Iowa unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Iowa does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Iowa does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Iowa subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Iowa subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Iowa restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - Iowa has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Iowa law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Iowa does not guarantee that birth control prescriptions will be filled

Healthcare Refusals

YES - Iowa allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Iowa does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Iowa guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Iowa has not expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

lowa has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Iowa restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Support for Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Iowa

www.prochoiceiowa.org 🔽 @NARALIowa



Kansas



ACCESS FACT: 61% of Kansas women live in counties with no abortion clinic.*

Restricted Access

Political Information

EXECUTIVE

Governor Laura Kelly (D) supports reproductive freedom.

LEGISLATURE

The Kansas Senate opposes reproductive freedom. The Kansas House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Kansas state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Kansas does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Kansas bans the standard method for providing second trimester abortion care.

YES - Kansas unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Kansas bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Kansas does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Kansas subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Kansas subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Kansas restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Kansas has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Kansas law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Kansas does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Kansas allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Kansas prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Kansas law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Kansas has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Kansas expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Kansas restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Kentucky

TRIGGER BAN: Kentucky has a trigger law to ban abortion if Roe v. Wade is overturned.



ACCESS FACT: 82% of Kentucky women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Andy Beshear (D) supports reproductive freedom.

LEGISLATURE

The Kentucky Senate opposes reproductive freedom. The Kentucky House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Kentucky state constitution does not provide additional protection for the right to abortion.

NO - Kentucky does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Kentucky bans the standard method for providing second trimester abortion care.

YES - Kentucky unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Kentucky bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Kentucky does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Kentucky subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Kentucky subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Kentucky restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Kentucky has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Kentucky law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Kentucky does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Kentucky allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Kentucky prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Kentucky law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Kentucky has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Kentucky expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Kentucky restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

Louisiana

TRIGGER BAN: Louisiana has a trigger law to ban abortion if Roe v. Wade is overturned.



ACCESS FACT: 72% of Louisiana women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor John Bel Edwards (D) opposes reproductive freedom.

LEGISLATURE

The Louisiana Senate opposes reproductive freedom. The Louisiana House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Louisiana state constitution does not provide additional protection for the right to abortion.

NO - Louisiana does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Louisiana bans the standard method for providing second trimester abortion care.

YES - Louisiana unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Louisiana bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Louisiana does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Louisiana subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Louisiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Louisiana restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Louisiana has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Louisiana law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Louisiana does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Louisiana allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Louisiana prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Louisiana law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Louisiana provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Louisiana expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Louisiana restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Maine



ACCESS FACT: 24% of Maine women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Janet Mills (D) supports reproductive freedom.

LEGISLATURE

The Maine Senate supports reproductive freedom. The Maine House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Maine state constitution does not provide additional protection for the right to abortion.

YES - Maine has an affirmative right to abortion enshrined in state law.

BANS

NO - Maine does not ban the standard method for providing second trimester abortion care.

NO - Maine does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Maine does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Maine expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Maine treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Maine does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Maine allows physicians to bypass the state's parental consent requirements.

EMERGENCY CONTRACEPTION

NO - Maine has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Maine law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - Maine guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - Maine allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Maine does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Maine law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Maine provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - Maine guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - Maine covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Maryland



ACCESS FACT: 29% of Maryland women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor Larry Hogan (R) has a mixed record on reproductive freedom.

LEGISLATURE

The Maryland Senate supports reproductive freedom. The Maryland House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Maryland state constitution does not provide additional protection for the right to abortion.

YES - Maryland has an affirmative right to abortion enshrined in state law.

BANS

NO - Maryland does not ban the standard method for providing second trimester abortion care.

NO - Maryland does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Maryland does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Maryland expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Maryland subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Maryland does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Maryland allows physicians to bypass the state's parental notice requirements.

EMERGENCY CONTRACEPTION

YES - Maryland law improves women's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Maryland law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Maryland does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Maryland allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Maryland does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Maryland law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Maryland provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Maryland has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Maryland covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Maryland

www.prochoicemaryland.org 🔽 @ProChoiceMD

Massachusetts



ACCESS FACT: 13% of Massachusetts women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor Charlie Baker* (R) has a mixed record on reproductive freedom.

*Gov. Baker vetoed a major piece of reproductive freedom legislation in 2020.

LEGISLATURE

The Massachusetts Senate supports reproductive freedom. The Massachusetts House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Massachusetts state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

YES - Massachusetts has an affirmative right to abortion enshrined in state law.

BANS

NO - Massachusetts does not ban the standard method for providing second trimester abortion care.

NO - Massachusetts does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Massachusetts does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Massachusetts expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Massachusetts treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Massachusetts does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Massachusetts restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - Massachusetts law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Massachusetts law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Massachusetts does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Massachusetts allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Massachusetts does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Massachusetts law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Massachusetts provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

Massachusetts has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Massachusetts covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Massachusetts

www.prochoicemass.org 🔽 @prochoicemass

Michigan

PRE-ROE BAN: Michigan has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

ACCESS FACT: 35% of Michigan women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Gretchen Whitmer (D) supports reproductive freedom.

LEGISLATURE

The Michigan Senate opposes reproductive freedom. The Michigan House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Michigan state constitution does not provide additional protection for the right to abortion.

NO - Michigan does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Michigan does not ban the standard method for providing second trimester abortion care.

NO - Michigan does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Michigan does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Michigan does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Michigan subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Michigan subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Michigan restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Michigan has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Michigan law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Michigan does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Michigan allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Michigan prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Michigan law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Michigan has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Michigan expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Michigan restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Minnesota



ACCESS FACT: 61% of Minnesota women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Timothy Walz (D) supports reproductive freedom.

LEGISLATURE

The Minnesota Senate opposes reproductive freedom.

The Minnesota House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Minnesota state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Minnesota does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Minnesota does not ban the standard method for providing second trimester abortion care.

NO - Minnesota does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Minnesota does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Minnesota does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Minnesota subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Minnesota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Minnesota restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

YES - Minnesota law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Minnesota law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Minnesota does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Minnesota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Minnesota prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Minnesota law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Minnesota provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Minnesota has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Minnesota covers low-income women's access to abortion through a broad health exception.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Minnesota

www.prochoiceminnesota.org 🔽 @ProChoiceMN

Mississippi

TRIGGER BAN: Mississippi has a trigger law to ban abortion if Roe v. Wade is overturned.

As of publication, Mississippi had only one abortion clinic remaining.

ACCESS FACT: 91% of Mississippi women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Tate Reeves (R) opposes reproductive freedom.

LEGISLATURE

The Mississippi Senate opposes reproductive freedom. The Mississippi House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Mississippi state constitution does not provide additional protection for the right to abortion.

NO - Mississippi does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Mississippi bans the standard method for providing second trimester abortion care.

YES - Mississippi unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Mississippi bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Mississippi does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Mississippi subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Mississippi subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Mississippi restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Mississippi has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Mississippi law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Mississippi does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Mississippi allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Mississippi prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Mississippi law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Mississippi provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Mississippi expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Mississippi restricts low-income people's access to abortion.

COLOR KEY: Restricts Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Missouri

TRIGGER BAN: Missouri has a trigger law to ban abortion if Roe v. Wade is overturned.

As of publication, Missouri had only one abortion clinic remaining.

ACCESS FACT: 78% of Missouri women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Mike Parson (R) opposes reproductive freedom.

LEGISLATURE

The Missouri Senate opposes reproductive freedom The Missouri House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Missouri state constitution does not provide additional protection for the right to abortion.

NO - Missouri does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Missouri does not ban the standard method for providing second trimester abortion care.

YES - Missouri unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Missouri bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Missouri does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Missouri subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Missouri subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Missouri restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Missouri has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Missouri law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Missouri does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Missouri allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Missouri prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Missouri law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Missouri has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Missouri expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Missouri restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Missouri

www.prochoicemissouri.org 🔽 @NARALMissouri

*SOURCE: Guttmacher Institute, 2017 data

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Montana



ACCESS FACT: 56% of Montana women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Greg Gianforte (R) opposes reproductive freedom.

LEGISLATURE

The Montana Senate has a mixed record on reproductive freedom. The Montana House has a mixed record on reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The Montana state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - Montana does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Montana does not ban the standard method for providing second trimester abortion care.

NO - Montana does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Montana does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Montana expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Montana treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Montana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Montana restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Montana has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Montana law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Montana does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Montana allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Montana does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Montana law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Montana provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Montana has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Montana covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Nebraska



ACCESS FACT: 40% of Nebraska women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Pete Ricketts (R) opposes reproductive freedom.

LEGISLATURE

The Nebraska Senate opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Nebraska state constitution does not provide additional protection for the right to abortion.

NO - Nebraska does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Nebraska bans the standard method for providing second trimester abortion care.

YES - Nebraska unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Nebraska does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Nebraska does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Nebraska subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Nebraska subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Nebraska restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Nebraska has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Nebraska law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Nebraska does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Nebraska allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Nebraska prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Nebraska law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Nebraska has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Nebraska expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Nebraska restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Nevada



ACCESS FACT: 9% of Nevada women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor Steve Sisolak (D) supports reproductive freedom.

LEGISLATURE

The Nevada Senate supports reproductive freedom. The Nevada House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Nevada state constitution does not provide additional protection for the right to abortion.

YES - Nevada has an affirmative right to abortion enshrined in state law.

BANS

NO - Nevada does not ban the standard method for providing second trimester abortion care.

NO - Nevada does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Nevada does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Nevada does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Nevada subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Nevada does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Nevada restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - Nevada has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Nevada law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - Nevada guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - Nevada allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Nevada does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Nevada law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Nevada has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Nevada has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Nevada restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Support for Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Nevada

www.prochoicenevada.org 🔽 @NARALNV

New Hampshire



ACCESS FACT: 30% of New Hampshire women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Chris Sununu (R) opposes reproductive freedom.

LEGISLATURE

The New Hampshire Senate opposes reproductive freedom. The New Hampshire House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The New Hampshire state constitution does not provide additional protection for the right to abortion.

NO - New Hampshire does not have an affirmative right to abortion enshrined in state law.

BANS

NO - New Hampshire does not ban the standard method for providing second trimester abortion care.

NO - New Hampshire does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - New Hampshire does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - New Hampshire expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - New Hampshire treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - New Hampshire does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - New Hampshire restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - New Hampshire has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - New Hampshire law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - New Hampshire does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

NO - New Hampshire does not allow certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - New Hampshire does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - New Hampshire law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - New Hampshire provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

New Hampshire has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - New Hampshire restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



New Jersey



ACCESS FACT: 26% of New Jersey women live in counties with no abortion clinic.*

Protected Access

Political Information

EXECUTIVE

Governor Phil Murphy (D) supports reproductive freedom.

LEGISLATURE

The New Jersey Senate supports reproductive freedom. The New Jersey House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

YES - The New Jersey state constitution provides protection for the right to abortion in addition to the U.S. Constitution.

NO - New Jersey does not have an affirmative right to abortion enshrined in state law.

BANS

NO - New Jersey does not ban the standard method for providing second trimester abortion care.

NO - New Jersey does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - New Jersey does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - New Jersey does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - New Jersey subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - New Jersey does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - New Jersey restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

YES - New Jersey law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - New Jersey law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - New Jersey guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - New Jersey allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - New Jersey does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - New Jersey law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - New Jersey provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

New Jersey has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - New Jersey covers low-income people's access to medically necessary abortion care.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



New Mexico

PRE-ROE BAN: New Mexico has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

ACCESS FACT: 48% of New Mexico women live in counties with no abortion clinic.*



Protected Access

Political Information

EXECUTIVE

Governor Michelle Lujan Grisham (D) supports reproductive freedom.

LEGISLATURE

The New Mexico Senate supports reproductive freedom. The New Mexico House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The New Mexico state constitution does not provide additional protection for the right to abortion.

NO - New Mexico does not have an affirmative right to abortion enshrined in state law.

BANS

NO - New Mexico does not ban the standard method for providing second trimester abortion care.

NO - New Mexico does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - New Mexico does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - New Mexico expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - New Mexico subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - New Mexico does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - New Mexico restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - New Mexico law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - New Mexico law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - New Mexico does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - New Mexico allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - New Mexico does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - New Mexico law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - New Mexico provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

New Mexico has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - New Mexico covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



New York



ACCESS FACT: 8% of New York women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Andrew Cuomo (D) supports reproductive freedom.

LEGISLATURE

The New York Senate supports reproductive freedom. The New York House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The New York state constitution does not provide additional protection for the right to abortion.

YES - New York has an affirmative right to abortion enshrined in state law.

BANS

NO - New York does not ban the standard method for providing second trimester abortion care.

NO - New York does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - New York does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - New York expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - New York treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - New York does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - New York does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - New York law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - New York law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - New York does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - New York allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - New York does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - New York law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - New York provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - New York guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - New York covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



North Carolina



ACCESS FACT: 53% of North Carolina women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Roy Cooper (D) supports reproductive freedom.

LEGISLATURE

The North Carolina Senate opposes reproductive freedom.

The North Carolina House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The North Carolina state constitution does not provide additional protection for the right to abortion.

NO - North Carolina does not have an affirmative right to abortion enshrined in state law.

BANS

NO - North Carolina does not ban the standard method for providing second trimester abortion care.

YES - North Carolina unconstitutionally bans abortion throughout pregnancy in violation of *Roe v. Wade.*

YES - North Carolina bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - North Carolina does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - North Carolina subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - North Carolina subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - North Carolina restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - North Carolina has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - North Carolina law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - North Carolina does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - North Carolina allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - North Carolina does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - North Carolina law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - North Carolina provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - North Carolina expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - North Carolina restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice North Carolina

North Dakota

TRIGGER BAN: North Dakota has a trigger law to ban abortion if Roe v. Wade is overturned.

As of publication, North Dakota had only one abortion clinic remaining.

ACCESS FACT: 72% of North Dakota women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Doug Burgum (R) opposes reproductive freedom.

LEGISLATURE

The North Dakota Senate opposes reproductive freedom. The North Dakota House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The North Dakota state constitution does not provide additional protection for the right to abortion.

NO - North Dakota does not have an affirmative right to abortion enshrined in state law.

BANS

YES - North Dakota bans the standard method for providing second trimester abortion care.

YES - North Dakota unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - North Dakota bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - North Dakota does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - North Dakota subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - North Dakota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - North Dakota restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - North Dakota has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - North Dakota law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - North Dakota does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - North Dakota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - North Dakota prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - North Dakota law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - North Dakota has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - North Dakota expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - North Dakota restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Ohio



ACCESS FACT: 55% of Ohio women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Mike DeWine (R) opposes reproductive freedom.

LEGISLATURE

The Ohio Senate opposes reproductive freedom.

The Ohio House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Ohio state constitution does not provide additional protection for the right to abortion.

NO - Ohio does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Ohio bans the standard method for providing second trimester abortion care.

YES - Ohio unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Ohio bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Ohio does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Ohio subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Ohio subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Ohio restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Ohio has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Ohio law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Ohio does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Ohio allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Ohio prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Ohio law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Ohio has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Ohio expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Ohio restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Ohio

www.prochoiceoh.org 🔽 @ProChoiceOH

Oklahoma

PRE-ROE BAN: Oklahoma has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned

ACCESS FACT: 53% of Oklahoma women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Kevin Stitt (R) opposes reproductive freedom.

LEGISLATURE

The Oklahoma Senate opposes reproductive freedom. The Oklahoma House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Oklahoma state constitution does not provide additional protection for the right to abortion.

NO - Oklahoma does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Oklahoma bans the standard method for providing second trimester abortion care.

YES - Oklahoma unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Oklahoma bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Oklahoma does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Oklahoma subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Oklahoma subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Oklahoma restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

NO - Oklahoma has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Oklahoma law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Oklahoma does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Oklahoma allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Oklahoma prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Oklahoma law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Oklahoma provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Oklahoma expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Oklahoma restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Oregon



ACCESS FACT: 23% of Oregon women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Kate Brown (D) supports reproductive freedom.

LEGISLATURE

The Oregon Senate supports reproductive freedom. The Oregon House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Oregon state constitution does not provide additional protection for the right to abortion.

YES - Oregon has an affirmative right to abortion enshrined in state law.

BANS

NO - Oregon does not ban the standard method for providing second trimester abortion care.

NO - Oregon does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Oregon does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Oregon expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Oregon treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Oregon does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - Oregon does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - Oregon law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Oregon law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Oregon does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Oregon allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Oregon does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Oregon law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Oregon provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - Oregon guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - Oregon covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Support for Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Oregon

Pennsylvania



ACCESS FACT: 48% of Pennsylvania women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Tom Wolf (D) supports reproductive freedom.

LEGISLATURE

The Pennsylvania Senate opposes reproductive freedom. The Pennsylvania House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Pennsylvania state constitution does not provide additional protection for the right to abortion.

NO - Pennsylvania does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Pennsylvania does not ban the standard method for providing second trimester abortion care.

NO - Pennsylvania does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

YES - Pennsylvania bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Pennsylvania does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Pennsylvania subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Pennsylvania subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Pennsylvania restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - Pennsylvania law expands access but includes a refusal clause making expanded access to emergency contraception in the ER effectively unavailable.

CLINIC PROTECTIONS

NO - Pennsylvania law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Pennsylvania does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Pennsylvania allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Pennsylvania prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Pennsylvania law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Pennsylvania provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Pennsylvania expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Pennsylvania restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Rhode Island



ACCESS FACT: 22% of Rhode Island women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Gina Raimondo (D) supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Rhode Island state constitution does not provide additional protection for the right to abortion.

YES - Rhode Island has an affirmative right to abortion enshrined in state law.

LEGISLATURE

The Rhode Island Senate has a mixed record on reproductive freedom.

The Rhode Island House supports reproductive freedom.

BANS

NO - Rhode Island does not ban the standard method for providing second trimester abortion care.

NO - Rhode Island does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Rhode Island does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Rhode Island expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Rhode Island subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Rhode Island subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Rhode Island restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Rhode Island has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Rhode Island law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Rhode Island does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Rhode Island allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Rhode Island does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Rhode Island law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Rhode Island provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

Rhode Island has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Rhode Island restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

South Carolina



ACCESS FACT: 71% of South Carolina women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Henry McMaster (R) opposes reproductive freedom.

LEGISLATURE

The South Carolina Senate opposes reproductive freedom. The South Carolina House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The South Carolina state constitution does not provide additional protection for the right to abortion.

NO - South Carolina does not have an affirmative right to abortion enshrined in state law.

BANS

NO - South Carolina does not ban the standard method for providing second trimester abortion care.

YES - South Carolina unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - South Carolina does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - South Carolina does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - South Carolina subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - South Carolina subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - South Carolina restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - South Carolina law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - does not protect people seeking reproductive healthcare and/ or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - South Carolina does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - South Carolina allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - South Carolina prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - South Carolina law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - South Carolina provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - South Carolina expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - South Carolina restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



South Dakota

TRIGGER BAN: South Dakota has a trigger law to ban abortion if Roe v. Wade is overturned.

As of publication, South Dakota had only one abortion clinic remaining.

ACCESS FACT: 76% of South Dakota women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Kristi Noem (R) opposes reproductive freedom.

LEGISLATURE

The South Dakota Senate opposes reproductive freedom.

The South Dakota House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The South Dakota state constitution does not provide additional protection for the right to abortion.

NO - South Dakota does not have an affirmative right to abortion enshrined in state law.

BANS

NO - South Dakota does not ban the standard method for providing second trimester abortion care.

YES - South Dakota unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - South Dakota bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - South Dakota does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - South Dakota subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - South Dakota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - South Dakota restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - South Dakota has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - South Dakota law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - South Dakota does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - South Dakota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - South Dakota does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - South Dakota law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - South Dakota has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - South Dakota expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - South Dakota restricts low-income people's access to abortion.

COLOR KEY: Restricts Reproductive Freedom Shows Mixed Support for Reproductive Freedom Seproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Tennessee

TRIGGER BAN: Tennessee has a trigger law to ban abortion if Roe v. Wade is overturned.

ACCESS FACT: 63% of Tennessee women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Bill Lee (R) opposes reproductive freedom.

LEGISLATURE

The Tennessee Senate opposes reproductive freedom. The Tennessee House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Tennessee state constitution does not provide additional protection for the right to abortion.

NO - Tennessee does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Tennessee does not ban the standard method for providing second trimester abortion care.

YES - Tennessee unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Tennessee bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Tennessee does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Tennessee subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Tennessee subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Tennessee restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

NO - Tennessee has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Tennessee law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Tennessee does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Tennessee allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Tennessee does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Tennessee law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Tennessee has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Tennessee expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Tennessee restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Texas



ACCESS FACT: 43% of Texas women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Greg Abbott (R) opposes reproductive freedom.

LEGISLATURE

The Texas Senate opposes reproductive freedom.

The Texas House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Texas state constitution does not provide additional protection for the right to abortion.

NO - Texas does not have an affirmative right to abortion enshrined in state law.

BANS

YES - Texas bans the standard method for providing second trimester abortion care.

YES - Texas unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Texas does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Texas does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Texas subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Texas subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Texas restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

YES - Texas law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Texas law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Texas does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Texas allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Texas prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Texas law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Texas has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Texas expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Texas restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Utah

TRIGGER BAN: Utah has a trigger law to ban abortion if Roe v. Wade is overturned.

ACCESS FACT: 63% of Utah women live in counties with no abortion clinic.*

Severely Restricted Access

Political Information

EXECUTIVE

Governor Spencer Cox (R) opposes reproductive freedom.

LEGISLATURE

The Utah Senate opposes reproductive freedom. The Utah House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Utah state constitution does not provide additional protection for the right to abortion.

NO - Utah does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Utah does not ban the standard method for providing second trimester abortion care.

YES - Utah unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

YES - Utah bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Utah does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Utah subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Utah subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Utah restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

YES - Utah law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Utah law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Utah does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Utah allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Utah does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Utah law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

NO - Utah has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Utah expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Utah restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Vermont



ACCESS FACT: 38% of Vermont women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Phil Scott (R) supports reproductive freedom.

LEGISLATURE

The Vermont Senate supports reproductive freedom. The Vermont House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Vermont state constitution does not provide additional protection for the right to abortion.

YES - Vermont has an affirmative right to abortion enshrined in state law.

BANS

NO - Vermont does not ban the standard method for providing second trimester abortion care.

NO - Vermont does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Vermont does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Vermont expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Vermont treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Vermont does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - Vermont does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

NO - Vermont has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Vermont law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Vermont does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

NO - Vermont does not allow certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Vermont does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Vermont law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Vermont has expanded coverage for some Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Vermont has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

YES - Vermont covers low-income people's access to medically necessary abortion care.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Virginia



ACCESS FACT: 80% of Virginia women live in counties with no abortion clinic.*

Some Access

Political Information

EXECUTIVE

Governor Ralph Northam (D) supports reproductive freedom.

LEGISLATURE

The Virginia Senate supports reproductive freedom. The Virginia House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Virginia state constitution does not provide additional protection for the right to abortion.

NO - Virginia does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Virginia does not ban the standard method for providing second trimester abortion care.

NO - Virginia does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Virginia does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Virginia expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

NO - Virginia treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Virginia does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Virginia restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

YES - Virginia law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Virginia law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Virginia does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Virginia allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Virginia prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Virginia law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Virginia provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Virginia expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Virginia restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Virginia

www.prochoiceva.org 🔽 @NARALVirginia

Washington



ACCESS FACT: 10% of Washington women live in counties with no abortion clinic.*

Strongly Protected Access

Political Information

EXECUTIVE

Governor Jay Inslee (D) supports reproductive freedom.

LEGISLATURE

The Washington Senate supports reproductive freedom. The Washington House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Washington state constitution does not provide additional protection for the right to abortion.

YES - Washington has an affirmative right to abortion enshrined in state law.

BANS

NO - Washington does not ban the standard method for providing second trimester abortion care.

NO - Washington does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade.*

NO - Washington does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

YES - Washington expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Washington subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

NO - Washington does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

NO - Washington does not restrict young people's access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION

YES - Washington law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Washington law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - Washington guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - Washington allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Washington does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Washington law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Washington provides increased coverage for Medicaidfunded family-planning services.

PRIVATE COVERAGE OF ABORTION

YES - Washington guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION

YES - Washington covers low-income people's access to abortion without restrictions.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Washington

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*SOURCE: Guttmacher Institute, 2017 data

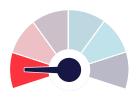
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West Virginia

PRE-ROE BAN: West Virginia has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

As of publication, West Virginia had only one abortion clinic remaining.

ACCESS FACT: 90% of West Virginia women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Jim Justice (R) opposes reproductive freedom.

LEGISLATURE

The West Virginia Senate opposes reproductive freedom. The West Virginia House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The West Virginia state constitution does not provide additional protection for the right to abortion.

NO - West Virginia does not have an affirmative right to abortion enshrined in state law.

BANS

YES - West Virginia bans the standard method for providing second trimester abortion care.

YES - West Virginia unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - West Virginia does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

West Virginia has no measure defining which medical professionals may provide abortion.

CLINIC SHUTDOWN LAWS

NO - West Virginia treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - West Virginia subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - West Virginia restricts young people's access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION

NO - West Virginia has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - West Virginia law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - West Virginia does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - West Virginia allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - West Virginia does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - West Virginia law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

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NO - West Virginia has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

West Virginia has no provision guaranteeing or restricting insurance coverage of abortion

PUBLIC COVERAGE OF ABORTION

NO - West Virginia restricts low-income people's access to abortion.

COLOR KEY: • Restricts Reproductive Freedom | • Shows Mixed Support for Reproductive Freedom | • Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.



Wisconsin

PRE-ROE BAN: Wisconsin has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

ACCESS FACT: 70% of Wisconsin women live in counties with no abortion clinic.*



Severely Restricted Access

Political Information

EXECUTIVE

Governor Tony Evers (D) supports reproductive freedom.

LEGISLATURE

The Wisconsin Senate opposes reproductive freedom. The Wisconsin House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Wisconsin state constitution does not provide additional protection for the right to abortion.

NO - Wisconsin does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Wisconsin does not ban the standard method for providing second trimester abortion care.

YES - Wisconsin unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.

NO - Wisconsin does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Wisconsin does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Wisconsin subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Wisconsin subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION

YES - Wisconsin restricts young people's access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION

YES - Wisconsin law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

YES - Wisconsin law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

YES - Wisconsin guarantees that birth control prescriptions will be filled.

Healthcare Refusals

YES - Wisconsin allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

YES - Wisconsin prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

YES - Wisconsin law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Wisconsin provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

NO - Wisconsin expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION

NO - Wisconsin restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

🔽 @NARAL

Wyoming



ACCESS FACT: 96% of Wyoming women live in counties with no abortion clinic.*

Restricted Access

Political Information

EXECUTIVE

Governor Mark Gordon (R) opposes reproductive freedom.

LEGISLATURE

The Wyoming Senate opposes reproductive freedom. The Wyoming House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS

NO - The Wyoming state constitution does not provide additional protection for the right to abortion.

NO - Wyoming does not have an affirmative right to abortion enshrined in state law.

BANS

NO - Wyoming does not ban the standard method for providing second trimester abortion care.

NO - Wyoming does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.

NO - Wyoming does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE

NO - Wyoming does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS

YES - Wyoming subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS

YES - Wyoming subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods for young people.

YOUNG PEOPLE AND ABORTION

YES - Wyoming restricts young people's access to abortion services by mandating parental notice and consent.

EMERGENCY CONTRACEPTION

NO - Wyoming has not improved people's access to emergency contraception in the ER.

CLINIC PROTECTIONS

NO - Wyoming law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE

Prescription Guarantees

NO - Wyoming does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals

YES - Wyoming allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS

NO - Wyoming does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION

NO - Wyoming law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION

YES - Wyoming provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION

Wyoming has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION

NO - Wyoming restricts low-income people's access to abortion.

COLOR KEY: Reproductive Freedom Shows Mixed Support for Reproductive Freedom Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Wyoming

www.prochoicewyoming.org

Conclusion

Methodology

General Methodology

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation have supporting documentation for statements of fact made in Who Decides? The Status of Reproductive Freedom in the United States. Source documents are maintained by NARAL Pro-Choice America.

Access Facts

The number of abortion providers and analysis of census data was supplied by the Guttmacher Institute. (Jones RK, Witwer E, Jerman J, Abortion Incidence and Service Availability in the United States, 2017, New York: Guttmacher Institute, 2019 https://www.guttmacher.org/report/abortion-incidence-service-availability-us-2017). Additional information about states with only one abortion clinic available at Alice F. Cartwright et al., Identifying National Availability of Abortion Care and Distance From Major US Cities: Systematic Online Research, 20 J. Med. Internet Res. 186 (2018) and Planned Parenthood to Resume Abortions at Kentucky Clinic, Wave3News (Feb. 1, 2020. 12:25 AM), https://www.wave3.com/2020/02/01/planned-parenthood-resume-abortions-kentucky-clinic/.

State and Local Legislative Information

This report uses "laws" to refer specifically to statutes adopted by the legislature or enacted by ballot measure. "Measures" is a broader term that includes constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental actions with statewide effect.

Counts of enacted pro-choice and anti-choice measures provided on the "Key Findings" pages include all measures enacted during the year, not just those described in more detail on the "Fast Facts" pages.

Reproductive Healthcare Access Meter

Who Decides? reflects the legal state of people's access to reproductive-health services in the previous calendar year. (Note: the Political Landscape data reflect the year ahead.)

The state's overall status of reproductive freedom, previously indicated by a letter grade, now is represented by a graphical scale. As always, a state's rating is based on a combination of factors, including enacted measures, level of legislative and regulatory activity, and a state's overall legislative and political landscape as it pertains to reproductive rights.

Points are subtracted for measures that oppose reproductive freedom and added for measures that support reproductive freedom. Measures that impose the greatest burdens on people are weighted most heavily. Statutes that have been enjoined or struck down by courts receive either full or partial "credit" in points.

As of 2020, no state has achieved "Total Access" as there are still obstacles to people receiving access to reproductive healthcare in every state.

Abortion Rights: Protections and Bans

• POST-ROE OUTLOOK: ABORTION IN THE STATES
STATUTORY PROTECTIONS FOR ABORTION
Points were added if a state has codified the protections of

Points were added if a state has codified the protections of Roe v. Wade and provides an affirmative right to abortion.

STATE CONSTITUTIONAL PROTECTIONS FOR ABORTION
Points were added if a state constitution protects the right
to choose beyond the U.S. Constitution, and to the degree
that the state constitutional protection prevents imposition
of restrictions on the right to abortion.

• STATES AT RISK FOR AN IMMEDIATE BAN ON ABORTION

PRE-ROE CRIMINAL BANS ON ABORTION, TRIGGER BANS Points were subtracted based either on the point in pregnancy when the ban begins, or for any ban whose effective date would be triggered if the Supreme Court overturns Roe v. Wade.

• BANS ON ABORTION BY WEEK

Points were subtracted for each abortion ban based on the point in pregnancy when the ban begins.

If a post-viability abortion restriction has adequate life and health exceptions and does not define viability as occurring at a particular point in pregnancy, no points were subtracted. Points were subtracted for the lack or inadequacy of the health exception and if the state defines viability as occurring at a particular point in pregnancy.

BANS BASED ON METHOD OF ABORTION CARE

Points were subtracted for each statute that bans a specific abortion procedure.

BANS BASED ON THE REASON A PERSON MAY SEEK ABORTION CARE

Points were subtracted for each abortion ban that holds providers legally liable for the reasons a person may seek abortion care, including the potential race or sex of the pregnancy, or in cases of fetal diagnosis.

Reproductive Health: Access and Restrictions

• EXPANDED SCOPE OF PRACTICE

Points were added if a state expands the scope of practice for advanced practice clinicians to provide abortion care.

• EMERGENCY CONTRACEPTION

Points were added if the state ensures that sexual assault survivors receive counseling about and access to emergency contraception (EC) in emergency rooms; if a state provides for improved public education about EC; or if a state has a measure that improves access to EC in another way. If the state's Medicaid program covers overthe-counter EC, this information can be found on the Public Coverage of Contraception Fast Facts page. If a state has a policy requiring insurance coverage of unique contraceptive products, this information can be found on the Private Coverage of Contraception Fast Facts page.

• CLINIC PROTECTIONS

Points were allocated based on the strength of the protection. States that have proactive laws—bubble and buffer zones—received more points than states with responsive policies that penalize offenders after they interfere with entry or exit to a facility; physically invade a facility (including trespassing, property damage, arson, and bombing); make excessive noise, odors, or telephone calls; harass clinic staff or patients; and/or make threats, including weapon possession at demonstrations.

• GUARANTEES & REFUSALS OF MEDICAL CARE

REFUSALS

Points were subtracted for the total strength of the measures in which individuals or organizations may refuse to provide, cover, counsel about, or refer for reproductive-health services. No points were subtracted for measures that allow individual healthcare providers to refuse to offer a service as long as they refer the patient to another provider that does offer the service.

GUARANTEES

Points were added if a state explicitly guarantees a person's right to have their birth control prescription filled. Points were also added if the state ensures that pharmacists are allowed to provide EC to a person without a prescription through a measure specific to EC or one that permits collaborative therapy agreements generally and includes EC. (These measures were in place before the Food and Drug Administration (FDA) approved Plan B One-Step® for over-the-counter sales to all customers.) Points were added as well for measures that guarantee employees cannot be discriminated against because of a reproductive-healthcare decision.

CLINIC SHUTDOWN LAWS

Points were allocated based on the breadth and severity of all targeted regulation of abortion providers measures imposed.

• YOUNG PEOPLE & ABORTION

Points were subtracted based on whether and whose consent or notice is required before a young person may obtain abortion services.

• BIASED COUNSELING & MANDATORY DELAYS

Points were allocated based on whether the patient must receive state-prepared materials, whether the patient must receive other material—oral or written—that contains biased information, the length of the waiting period, whether multiple trips are required, and whether a physician is required personally to provide specified information. No points were subtracted if a state has an abortion-specific informed consent measure that does not require biased counseling or a mandatory delay.

• COUNSELING & REFERRAL BANS

Points were subtracted if a ban applies to counseling and/or referrals for abortion care.

Reproductive Health Coverage: Guarantees and Restrictions

• PRIVATE COVERAGE OF CONTRACEPTION

Points were added if a state requires health insurance plans to cover contraceptives to the same extent that they cover other prescription medication; if a state prohibits costsharing for contraceptive products; if the state requires health plans cover 12-months of contraception dispensed at once; and/or if a state requires health plans to cover all FDA-approved unique contraceptive products

PUBLIC COVERAGE OF CONTRACEPTION

Points were added if the state provides increased coverage for family-planning services through a federal Medicaid waiver or through a state plan amendment. Points were also added if the state's Medicaid program covers overthe-counter EC without a prescription or 12-months of birth control dispensed at once.

PRIVATE COVERAGE OF ABORTION

COVERAGE

Points were added if a state guarantees insurance coverage of abortion in the entire private insurance market or the state health-insurance exchange.

BANS

Points were subtracted if the measure prohibits insurance coverage of abortion in the private insurance market or in the state health-insurance exchange.

• PUBLIC COVERAGE OF ABORTION

Points were added if a state Medicaid program covers abortion care with no restrictions. Points were deducted for restrictions. Points were also deducted if a state prohibits insurance coverage for all or some state and/or municipal employees.

Acknowledgments

The Government Relations department at NARAL Pro-Choice America and NARAL Pro-Choice America Foundation researched and wrote this study. Department staff for the 30th edition of Who Decides? The Status of Reproductive Freedom in the United States includes: Government Relations Director Kate Ryan, Deputy Government Relations Director Stephanie Yost, Senior Counsel for State Legislative Affairs Jael Humphrey, State Legislative Affairs Counsel Meghan McGuirk, Senior Policy Counsel Christina Krysinski, Policy Research Associate Kelly Matthews, and Policy Aide Joe Tusha with assistance from Kristin Ford, Ally Boguhn, Ryan Stitzlein, Ryan Marsan, Vanessa Rijo, and Sofia Gonzalez. We also acknowledge the 30 years of work at NARAL that this publication builds upon.

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Disclaimer

Who Decides? The Status of Reproductive Freedom in the United States is strictly for informational purposes and does not constitute legal services or representation. For legal advice, a practicing attorney who has a thorough knowledge of current law in the state or locality and who is informed about all relevant details of the situation should be consulted.

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation do not guarantee the accuracy of the contents of this book. Laws change, often rapidly, and interpretations of statutes may vary. Legislation may have been acted upon, or cases decided, after the date this book went to press. Systematic bill and case-tracking concluded on December 31, 2020.

NARAL Pro-Choice America Foundation hereby specifically disclaims any liability for loss incurred as a consequence of the use of any material in this book.

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation Ilyse G. Hogue, President 1725 I St NW, Suite 900, Washington, DC 20006 | 202.973.3000 www.ProChoiceAmerica.org and www.ProChoiceAmericaFDN.org

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NARAL Pro-Choice America Affiliates & Chapters

NARAL PRO-CHOICE CALIFORNIA

335 S. Van Ness Avenue San Francisco, CA 94103

P: 415.890.1020

www.prochoicecalifornia.org

✓ @ProChoiceCA

f facebook.com/ProChoiceCA

NARAL PRO-CHOICE CONNECTICUT

1 Main Street, Suite T4 Hartford, CT 06106

P: 203.787.8763

www.prochoicect.org

@ProChoiceCT

f facebook.com/ProChoiceCT

NARAL PRO-CHOICE

GEORGIA

P: 202.973.3000

www.Prochoicegeorgia.org

☑ @NARALGA

f facebook.com/NARALGeorgia

NARAL PRO-CHOICE **IOWA**

P: 202.973.3000

www.prochoiceiowa.org

🦅 @NARALlowa

f facebook.com/NARALIowa

NARAL PRO-CHOICE **MARYLAND**

1323 North Calvert Street, Suite A Baltimore, MD 21202

P: 443.869.2970

www.prochoicemd.org

@ProChoiceMD

f facebook.com/ProChoiceMD

NARAL PRO-CHOICE MASSACHUSETTS

15 Court Square, Suite 900 Boston, MA 02108

P: 617.556.8800

www.prochoicemass.org

@ProChoiceMass

f facebook.com/prochoicemass

NARAL PRO-CHOICE

MINNESOTA

2300 Myrtle Avenue, Suite 120 Saint Paul, MN 55114

P: 651.602.7655

www.prochoiceminnesota.org

@ProChoiceMN

f facebook.com/NARALProChoiceMinnesota

NARAL PRO-CHOICE **MISSOURI**

1210 South Vandeventer Avenue St. Louis, MO 63110

P: 314.531.8616

www.prochoicemissouri.org

MARALMissouri

f facebook.com/naralprochoicemissouri

NARAL PRO-CHOICE **NEVADA**

P: 702.751-4219

www.prochoicenevada.org

@NARALNV

f facebook.com/prochoiceNV

NARAL PRO-CHOICE NORTH CAROLINA

4711 Hope Valley Road, Suite 4F-509 Durham, NC 27707

P: 919.908.9321

www.prochoicenc.org

ONARALNC

f facebook.com/prochoicenc

NARAL PRO-CHOICE **OHIO**

11811 Shaker Boulevard, Suite 210 Cleveland, OH 44120

P: 800.GO.NARAL

www.prochoiceohio.org

☑ @ProChoiceOH

f facebook.com/NARALProChoiceOhio

NARAL PRO-CHOICE

OREGON

P.O. Box 40472 Portland, OR 97240

P: 503.223.4510

www.prochoiceoregon.org

@ProChoiceOregon

f facebook.com/prochoiceoregon

NARAL PRO-CHOICE

VIRGINIA

P.O. Box 1204 Alexandria, VA 22313

P: 571.970.2536

www.naralva.org

@NARALVirginia

f facebook.com/NARALProChoiceVirginia

NARAL PRO-CHOICE WASHINGTON

P: 206.624.1990

www.prochoicewashington.org

✓ @ProChoiceWA

f facebook.com/naralprochoicewashington

NARAL PRO-CHOICE **WYOMING**

P.O. Box 271 Laramie, WY 82073

P: 307.742.9189

www.prochoicewyoming.org

f facebook.com/Prochoicewyoming

Who We Are

For more than 50 years, NARAL Pro-Choice America has led the fight for reproductive freedom for *every* body, including the right to access abortion.

NARAL is powered by our more than 2.5 million members from every state and congressional district in the country. We represent the 7 in 10 Americans who believe every person should have the freedom to make the best decision for themselves about if, when, and how to raise a family.

We are the oldest and largest national membership organization primarily focused on advocating for abortion access.

1725 Eye St NW, Suite 900 Washington, DC 20006

202.973.3000

ProChoiceAmerica.org ProChoiceAmericaFdn.org

Connect with us:

Twitter: @NARAL

f Facebook: /NARALProChoiceAmerica

O Instagram: @ProChoiceAmerica