

MEMORANDUM

TO: Honorable Members of the Missouri General Assembly

FROM: Pam Fichter, President
Gerard Nieters, Legislative Director

DATE: March 29, 2010

RE: HB 1327 & 2000, and SB 793, and SCS SB 792

With the passage of the pro-abortion health care legislation in Washington D.C. Missouri Right to Life calls upon our Missouri Legislature to take up and pass the above mentioned legislation. This ultrasound legislation, which will ensure that women get the opportunity to view an ultrasound and hear their baby's heart beat 24 hours prior to an abortion, is needed now more than ever.

The new health care reform act will fund abortion in the following ways:

- (1) Direct funding of abortion through the Community Health Centers program. The bill directly appropriates \$7 billion for Community Health Centers with no restrictions on the use of these funds for abortion. The Hyde Amendment, which applies only to funds that flow through the regular annual HHS, doesn't apply because H.R. 3590 creates a new funding pipeline which would be untouched by the Hyde Amendment.
- (2) Other direct appropriations not covered by abortion restrictions. The Senate bill contains additional pools of directly appropriated funds that are not covered by any abortion limitations.
- (3) Federally administered abortion plans. H.R. 3590 would create a new program under which the federal Office of Personnel Management would administer two or more national ("multi-state") insurance plans stipulating that "at least one" could limit abortion coverage. By implication, the other plans could cover elective abortions.

(4) Federally subsidized abortion plans. The Senate bill (Section 1303, page 2069) allows for private plans that cover elective abortions to qualify for the federal subsidy. Every enrollee in such a plan would be required to make a separate payment into a fund used exclusively for elective abortions or lose their coverage.

(5) Authorities for pro-abortion mandates. The Senate bill contains provisions that grant authority to the Secretary of Health and Human Services and other federal entities to issue binding regulations on various matters. These provisions could be employed as authority for pro-abortion mandates, requiring health plans to cover abortion and/or provide expanded access to abortion, unless there is clear language to prevent it.

(6) Open door to future abortion funding in Indian health programs. The bill revamps and reauthorizes all Indian health programs and contains no language that would bar these programs from providing elective abortions.

(7) Missing abortion nondiscrimination (conscience) language. The so-called conscience protections in H.R. 3590 are exceedingly narrow and does not include language that would prevent government penalties for health care providers who refuse to participate in providing abortions.

Pro-life Missourians know that this is the most expansively pro-abortion legislation since *Roe v. Wade*.

For these reasons Missouri Right to Life believes HB 1327 & 2000, SB 793 & SCS SB 792 are necessary to save lives. We ask you to consider quick passage of these bills.